

Fern Terrace

Docket No. 060368-WS

Application to Increase Rates and Charges
For a "Class A" Utility
In

Florida

VOLUME 6

Book 7

Set 7 of 57

Containing
Additional Engineering Requirements

Monthly Operating Reports

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Aqua Utilities Florida, Inc.

DOCUMENT NUMBER - DATE - 00837 JAN 26 5

Aqua Utilities Florida, Inc. Monthly Operating Reports

Fern Terrace

Year: 2004	Tab Number	Page Number
January	4	2
February	1 2	3
March	3	5 7
April	4	9
May	5	11
June	6	13
July	7	15
August	8	17
September	9	19
October	10	21
November	11	23
December	12	25
Year: 2005		
January	1	27
February	2	29
March	3	31
April	4	33
May	5	35
June	6	37
July	7	39
August	8	41
September	9	43
October	10	45
November	11	47
December	12	49



See Pages 4 for Instru							
. General Information	for the Month/Y	Year of: January, 2005					
A. Public Water System	(PWS) Informa	tion					
PWS Name:	Fern Terrace				PWS Identification Number	er: 3350370	
PWS Type:	✓ Community	Non-Transient Non-Community	Transient Non-Com	nunity	Consecutive		
Number of Service Connect	ions at End of Month	: 119		Total l	Population Served at End of	f Month: 278	
PWS Owner:	Aqua Utilities Florid	a					
Contact Person:	Brian Heath			Conta	ct Person's Title:	Area Manager	
Contact Person's Mailing Ac	ddress:	PO Box 490310		City: Leesburg	State: Florida	Zip Code:	34749
Contact Person's Telephone	Number:	(352) 787-0980		Conta	ct Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Ad	ldress:	beheath@aquaamerica.com					
B. Water Treatment Pla	ant Information						
Plant Name:	Fern Terrace				Plant Telephone Number:	(352) 787-09	980
Plant Address:	300 North Fern Drive	е	ž	City: Leesburg	State: Florida	Zip Code:	32748
Type of Water Treatment by			Finished Water				
Permitted Maximum Day O	perating Capacity of	Plant, gallons per day:	129,600				
Plant Category (per subsecti	ion 62-699.310(4), F				lass (per subsection 62-699		
Licensed Operators		Name	License Class	License Number	Da	y(s) / Shift(s) Worked	
Lead/Chief Operator:			С	6813	Days 1st Shift		
	Marty Neal		С	10027	Days 1st Shift		
	John Worrell		С	6597	Days 1st Shift		
		The state of the s					
						-	
						-,	
I Certification by Lead	I/Chief Operator	-					
		t operator licensed in Florida, am the lead/cl	hiaf aparator of the	water treatment n	lant identified in part	Lof this report Logetify	that the
		ue and accurate to the best of my knowledge					
		cable standards referenced in subsection 62					
		operator staffed or visited this plant during					
		process performance records. Furthermore,		these additional o	perations records to the	ne PWS owner so the PV	VS owner can
retain them, together w	vith copies of this	report, at a convenient location for at least	ten years.				
		Will Fonta	ine			C-6813	
Signature and Date		Printed or	Typed Name			License Nur	mber
-							

Fem Тепасе

Plant Name:

											47,200			wmixsM
											765,45		•	Avgerage
											00£'990'1			IstoT
	2.1				L				t'I		006,25	24.0	Х	31
			L		<u> </u>		<u> </u>		<u> </u>		35,900	0.42		30
			<u> </u>		<u> </u>			L			006,25	0.4.0		- 67
	٤.1		<u> </u>						5.1		31,900	0.42	X	87
	2.1								1.4		93,200	24.0	X	53.
	1.2	L							7 1		009,88	24.0	Х	92
	7.1			<u> </u>					5.1		31,400	24.0	X	52
	1.2								S.I		002,25	0.42	X	24
				<u> </u>		.					005,25	24.0		23
											002,25	0.42		37
	6.0								1.1		32,000	0.42	X	17
	7.1		<u> </u>						1.4		009,72	24.0	X	. 02
	1.2				L				91		30,400	0.4.0	Χ _	61
	7.1								5.1		32,600	0.42	X	81
	2.1								4.1		L95'EE	0.42	X	LI
											۲ 95,٤٤	0.42		91
											762,55	24.0		SI
	1.2								S.I		009,25	24.0	Х	ÞI
	7.1								9.1		008,EE	24.0	Х	13
	1.1		·						£.I		991,25	0.42	Х	71
	1.1								þ'l		004,15	0.42	X	11
	2.1								4.1		37,100	24.0	X	01
				1							37,100	24.0		6
											37,100	0.42		8
	2.1								1.4		009,75	0.42	X	L
	11					-			†¹I		002,05	24.0	X	9
	2.1								tΙ		42,200	24.0	X	S
	0.1								€1		34,200	0.42	Х	7
	1.1								1.3		000,95	74.0	Х	ε
							i				000'6E	24.0	-	Z
											000,65	24.0		
Operation Of Operation	System, mg/L	zшэ/ээ́s	my-sec/cm	J\nim	eldsəilqqA i	Water, "C	J/nim	səmuru	Peak Flow, mg/L	Rate, gpd.	gal	Operation	("X"	Month
Conditions, Repair or Maintenance Work that Involves Taking Water System Components	Remote Point in Distribution	,bequired, -Wm	Operating Sective,	Minimum CT Required, mg	pH of Water,	Temp of	During Peak Flow, mg-	Point During Peak Flow,	Before or at First Customer During	Peak Flow	Water Producted,	insiq zwoH ni	Operator Solf)	Day of the
Emergency of Abitormal Operating	Lowest Residual Disinfectant Concentration at	Minimum UV Dose	ŢSƏMOŢ				Provided Before or at First Customer	Disinfectant Contact Time T) at C T) at C	Lowest Residual Disinfectant Concentration (C)		Met Quantity bərlərini 10		Days Plant Staffed or Visited by	
							Lowest CT							
		2500	יייי או זאח - ייי				Suoneir	CT Calcu		8	ł		1	
						Socr rec			The second secon			1		
				A 1i noitevi	inent amiV	oo I-mo			T Calculations, or		l	<u> </u>	l	<u> </u>
	əbixoide	Chlorine D	(9	(Chloramine	ed Chlorine	Combine	T anin	Ltce Chlor	bution System:	irteid ni bər	ristnisM leu	tant Resid	oolnisid 1	Туре о
					·			· · · · · ·		. (Descuipe):			raviolet Ra	_
	(sənin	e (Chloran	ined Chlorin	L Сошр	əuozO 🔟	əpixo	Chlorine Dio	hlorine			virus Inactiv			
								January, 2005			onth/) ear			
								2000 regular		.,,(- TOO VIGUO	M and and	and Alia	и Ш

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OI SW4

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



See	Pages	4	for	Instructions.
Sec	I ages	4	IUI	Ilisti uctivns.

See Pages 4 for Instru							
. General Information	for the Month/Yea	February, 2005					
A. Public Water System	(PWS) Informatio	n					
	Fern Terrace				PWS Identification Number	er: 3350370	
PWS Type:	✓ Community	Non-Transient Non-Community	Transient Non-Comr	nunity []	Consecutive		
Number of Service Connect	ions at End of Month:	125		Total P	Opulation Served at End of	Month: 438	
PWS Owner:	Aqua Utilities Florida						
Contact Person:	Brian Heath			Contac	ct Person's Title:	Area Manager	
Contact Person's Mailing A	ddress: PO	Box 490310		City: Leesburg	State: Florida	Zip Code	: 34749
Contact Person's Telephone	Number: (35	2) 787-0980		Contac	et Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Ad	dress: <u>be</u>	heath@aquaamerica.com					
3. Water Treatment Pla	nt Information						
Plant Name:	Fern Terrace				Plant Telephone Number:	(352) 78°	
Plant Address:	300 North Fern Drive			City: Leesburg	State: Florida	Zip Code	2: 32748
Type of Water Treatment by			d Finished Water				
Permitted Maximum Day O		· · · · · · · · · · · · · · · · · · ·	129,600				
Plant Category (per subsecti			.		ass (per subsection 62-699.		• Size - 2007
Licensed Operators		Name	License Class	License Number		y(s) / Shift(s) Worked	15
Lead/Chief Operator:			C		Days 1st Shift		
Other Operators:	Marty Neal	·	C	10027	Days 1st Shift		
	John Worrell		С	6597	Days 1st Shift		
	·						
					L		
I Certification by Lead	/Chief Operator						
		perator licensed in Florida, am the lead	chief operator of the	water treatment p	lant identified in part I	of this report. I cert	ify that the
information provided i	n this report is true:	and accurate to the best of my knowled	ge and belief. I cert	fy that all drinking	water treatment chem	nicals used at this plan	nt conform to NSF
International Standard	60 or other applical	ole standards referenced in subsection	62-555 320(3) F A (Lalso certify tha	it the following addition	onal operations record	ds for this plant
ware prepared each de	without a licensed one	erator staffed or visited this plant during	a the month indicated	l above: (1) record	ds of amounts of chemi	icals used and chemi	cal feed rates: and
(2) if applicable appre	y mai a neensed ope	ocess performance records. Furthermore	ra. Lagraa to provida	these additional o	nerations records to the	e PWS owner so the	PWS owner can
				these additional of	peracions records to un	e i wo owner so the	I We owner can
retain them, together w	in copies of this re	port, at a convenient location for at lea	si icii years.				
		WEILE-	ataina			C-6813	
0: 10:		Will For				License 1	Number
Signature and Date		Printed	or Typed Name			License	

PWS II): 			3350370		Plant Name:	Fern Terrace	?				· · ·		
III. D	aily Data	for the M	onth/Year	of:		February, 2005								
			Virus Inactiv				Chlorine Di	oxide	☐ Ozone	Comb	bined Chlori	ne (Chloran	nines)	
1	raviolet R	-		r (Describe):		•	Cinornic Di	O/ddC	1 Ozone	1 Come	onica Cinora	ne (emora	inics)	
-						₩ Free Chlo	mina F	Combin	ed Chlorine	(Chloramine	e) [Chlorine I	Diovide	
Type c	Disiniec	ctant Resid	iuai Maintaii		ibution System:								Joange	
				C	T Calculations, or			Four-Log	Virus Inac	tivation, if				
						CT Calc	ulations				/ UV	Jose		
1			1				Lowest CT			177				
						Disinfectant	Provided							
	Days Plant				Lowest Residual	Contact Time	Before or at			1			Lowest Residual	
ļ · · .	Staffed or		Net Quantity		Disinfectant	(T) at C	First			4		Minimum	Disinfectant	· · · · · · · · · · · · · · · · · · ·
	Visited by		of Finished		Concentration (C)	Measurement	Customer	for V			Lowest	UV Dose Required,	Concentration at	
Day of	4.5	Hours plant	Water	Peak Flow	Before or at First Customer During	Point During Peak Flow,	During Peak Flow, mg-	Temp of	nll of Water	Minimum CI Required, mg	TIV Dose	∦mW-	Remote Point in Distribution	Conditions; Repair or Maintenance Workthat Involves Taking Water System Components
the Month	(Place	in Operation	Producted, gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water OC	if Applicable	min/L	mW-sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1	X	24.0	28,600	rate, ppa.	1.5	, manage			, , ,				1.4	
2	Х	24.0	34,600	· · · · · · · · · · · · · · · · · · ·	1.4			†		<u> </u>	<u> </u>		0.9	
3 ,	Х	24.0	32,100		1.5								1.2	
4	Х	24.0	29,400		1.3					<u></u>			1.1	
5		24.0	36,033							<u> </u>				
6		24.0	36,033	ļ				ļ		ļ	ļ		 	
7	X	24.0	36,033		1.5					<u> </u>	ļ	 	1.2	
8	X	24.0 24.0	31,900 41,200	ļ. ———	1.5		 	 		 	 		1.1	
10	X	24.0	27,100	<u> </u>	1.4	<u>. </u>	 	 		 	 		1,2	
11	X	24.0	37,300		1.4		·	 			<u> </u>		1.1	
12		24.0	35,767				<u> </u>	 	<u> </u>		<u> </u>			
13		24.0	35,767											
14	Х	24.0	35,767		1.3			ļ <u> </u>					1.0	
15	X	24.0	33,400		1.3			<u> </u>	ļ	 	 -	<u> </u>	1.1	
16	X	24.0	49,600		1.5		<u> </u>	ļ		 	 	 -	1.1	
17	X	24.0	28,600	 	1.6		 	<u> </u>	 	 	 		1.2	
18	X	24.0	31,600 41,000	 	1.4	 	 	 -	 	 	 	 	 	
20	 	24.0	41,000		-		 	 	 	 	 	 	<u> </u>	
21	Х	24.0	41,000	 	1.2						<u> </u>		1.0	
22	Х	24.0	35,200		1.3								1.0	
23	Х	24.0	46,200		1.2						<u> </u>	ļ	1.0	
24	Х	24.0	26,800	·	1.3		<u> </u>	<u> </u>	ļ	 	<u> </u>	 	0.9	
25	X	24.0	35,400	ļ	1.4		<u> </u>	 -	ļ	 	 	<u> </u>	1.0	
26	 	24.0		 		 	ļ		 	-	 	 	 	
27	X	24.0	31,733 31,733	 	1.3		 	 -	 	 	 	 	1.1	
29	1-^-	24.0		 	1		 	 	† · · · · · · · · · · · · · · · · · · ·	 	 	†	 	
30	1	24.0		 	<u> </u>		T	1						
31	1	24.0							<u> </u>				L	
Total			982,600											
Avgera	ze	1.1	31,697	7										

49,600

Maximum

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



See Pages 4 for Instru								
I. General Information	for the Month/Y	ear of: March, 2005						
A. Public Water System	(PWS) Informat	tion						
PWS Name:	Fern Terrace					PWS Identification Number:	3350370	, , , , , , , , , , , , , , , , , , ,
PWS Type:	✓ Community	Non-Transient Non-Community	Tr	ansient Non-Com	munity	Consecutive		
Number of Service Connect	ions at End of Month:	125			Т	otal Population Served at End of Mont	th: 438	
PWS Owner:	Aqua Utilities Florida	l						
Contact Person:	Brian Heath				C	ontact Person's Title: Area	Manager	
Contact Person's Mailing Ac	ddress:	PO Box 490310			City: Leesburg	State: Florida	Zip Code:	34749
Contact Person's Telephone	Number:	(352) 787-0980			C	ontact Person's Fax Number: (352)	787-6333	
Contact Person's E-Mail Ad		beheath@aquaamerica.com						
B. Water Treatment Pla	int Information							
Plant Name:	Fern Terrace					Plant Telephone Number:	(352) 787-0	980
Plant Address:	300 North Fern Drive	:			City: Leesburg	State: Florida	Zip Code:	32748
Type of Water Treatment by	/ Plant:	✓ Raw Ground Water	Purchased Fini	shed Water				
Permitted Maximum Day O	perating Capacity of F	Plant, gallons per day:		129,600				
Plant Category (per subsecti	on 62-699.310(4), F.A	A.C.): V			Pla	nt Class (per subsection 62-699.310(4)		
Licensed Operators	4.	Name		License Class	License Num	ber Day(s) /	Shift(s) Worked	
Lead/Chief Operator:	Will Fontaine			С	6813	Days 1st Shift		
Other Operators:	Marty Neal			С	10027	Days 1st Shift		
	John Worrell			С	6597	Days 1st Shift		
and the property of								
II Certification by Lead	I/Chief Operator							
			41 1 1/1:	C 4 C.1		4 1 4 11 4 C - 1 1 4 Y - C 4	·	- 41 41-
		operator licensed in Florida, am						
-	•	e and accurate to the best of my l	-		•	_		
		cable standards referenced in sub-						
	·	perator staffed or visited this pla	_		, ,			
		process performance records. Fur		•	these addition	al operations records to the PW	/S owner so the PV	WS owner can
retain them, together w	vith copies of this	report, at a convenient location for	or at least ten	years.				
			Will Fontaine				C-6813	
Signature and Date			Printed or Typ	ed Name			License Nu	mber
-			31					

PWS II):			3350370		Plant Name:	Fern Terrace			****				
III. D	aily Data	for the M	lonth/Year	of:		March, 2005								
			g Virus Inacti		val: ▽ Free C									
1	raviolet R		Othe			morme [Chlorine Di	oxide	Ozone	☐ Com	bined Chlori	ne (Chlorar	nines)	
1														
Type	f Disinle	ctant Resic	lual Maintai			▼ Free Chle				(Chloramine	. *	Chlorine I	Dioxide	
1				C	T Calculations, or	UV Dose, to	Demostate l	Four-Log	Virus Inac	tivation, if	Applicable ⁴	Market Control		
1						CT Calc	culations				. UV	Dose		
							Lowest CT				gritical in the second	4.00		
1						Disinfectant	Provided	1						
ĺ	Days Plant				Lowest Residual	Contact Time	Before or at						Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First			200		Minimum	Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	-	Hours plant	Water		Before or at First	Point During	During Peak			Minimum CI	Operating	Required,		Conditions, Repair or Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg	UV Dose,	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, C	if Applicable	min/L	mW-sec/cm ²	sec/cm ²	System, mg/L	Out of Operation.
2	X	24.0 24.0	34,500 33,000		1.2		ļ	ļ					0.9	
3	^X	24.0	23,900	-	1.3		<u> </u>			ļ			1.2	
4	X	24.0	27,800		1.3					 	<u> </u>		1.1	
-5		24.0	34,067		(,4		 						1.1	
6		24.0	34,067					-			ļ — — —			
7.	X	24.0	34,067		1.3					-	1	 	1.1	
8	X	24.0	31,900		1.3		1	····					1.0	
9	X	24.0	34,300		1.3							· · · · · · · · · · · · · · · · · · ·	1.0	
10	X	24.0	34,300		1.3								1.1	
11	X	24.0	25,200		1.3								1.0	
12		24.0 24.0	39,967 39,967											
14	X	24.0	39,967		1.2						<u> </u>		0,8	
15	X	24.0	32,700		1.2					1	ļ		0.8	
16	X	24.0	25,500		0.9					<u> </u>			0.7	
17	Х	24.0	33,200		1.2					 			0.8	
18	Х	24.0	29,700		1.0								0.8	
19		24.0	33,100											
20		24.0	33,100			<u> </u>								
21 22	X	24.0	33,100		1.4								1.0	
23	X	24.0 24.0	29,800 36,400		1.6 1.6								1.1	
24	X	24.0	36,400		1.0								1.0	
25	X	24.0	27,900		1.4								1.2	
26		24.0	32,800								 		1.0	
27		24.0	32,800											
28	Х	24.0	32,800		1.2								1.0	
29	X	24.0	38,100		1.2								0.9	
30	X	24.0	57,500		1.3								0.9	
31														
Total	X	24.0	32,200 1,042,400		1.2		L				i		0.9	

57,500

Maximum

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



1. General Information for the Month/Year of: April, 2005	
A. Public Water System (PWS) Information	
PWS Name: Fern Terrace PWS Identification Number:	3350370
PWS Type:	
Number of Service Connections at End of Month: 125 Total Population Served at End of Mor	nth: 438
PWS Owner: Aqua Utilities Florida	
Contact Person: Brian Heath Contact Person's Title: Are	ea Manager
Contact Person's Mailing Address: PO Box 490310 City: Leesburg State: Florida	Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980 Contact Person's Fax Number: (352)	(2) 787-6333
Contact Person's E-Mail Address: beheath@aquaamerica.com	
B. Water Treatment Plant Information	
Plant Name: Fern Terrace Plant Telephone Number:	(352) 787-0980
Plant Address: 300 North Fern Drive City: Leesburg State: Florida	Zip Code: 32748
Type of Water Treatment by Plant:	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 129,600	
Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.):	
	/ Shift(s) Worked
Lead/Chief Operator: Will Fontaine C 6813 Days 1st Shift	
Other Operators: Marty Neal C 10027 Days 1st Shift	
John Worrell C 6597 Days 1st Shift	
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 t	this report. I cortify that the
information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemical	•
International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional	-
were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemical	
(2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PV	WS owner so the PWS owner can
retain them, together with copies of this report, at a convenient location for at least ten years.	
Will Fontaine	C-6813
Signature and Date Printed or Typed Name	License Number

PWS II	D:			3350370		Plant Name:	Fern Terrace	;						
III. D	aily Data	for the N	lonth/Year	of:		April, 2005							,	
			g Virus Inactiv		/al: ▼ Free C		Chlorine Di					. (CL I		
	traviolet R			r (Describe):		mornic 1	Chiorine Di	oxide	☐ Ozone	1 Come	ined Chlori	ne (Cniorar	nines)	
-								·	1011	(CI)		<u> </u>		
Type o	f Disinfe	ctant Resid	lual Maintair		ibution System:	▼ Free Chlo				(Chloramine		Chlorine I	Dioxide	
1 . 4			/e	C	T Calculations, or					tivation, if A				
			Art. 4 (5.5)				ulations				UVI	Dose		
*.					73 - Table 1		Lowest CT		多数人					
						Disinfectant	Provided		i i de Vila					
	Days Plant				Lowest Residual	Contact Time	Before or at						Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	
10	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator	Hours plant	Water		Before or at First	Point During	During Peak	Alex.	1347 B. 18	Minimum CT		Required,	Remote Point in	Conditions Repair or Maintenance Work that
the	(Place	in 🤙	Producted,	and a second of	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg		mW-	Distribution.	involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, C	if Applicable	min/L	mW-sec/cm ²	sec/cm ²	System, mg/L i	Out of Operation
1	Х	24.0	30,200		1.1							ļ	0.9	
2		24.0	38,567					<u> </u>		ļ				
3	3/	24.0	38,567		0.7					ļ			0.6	
5	X X	24.0 24.0	38,567 30,100		0.7	·		 		 			0.6	
6	X	24.0	40,000		1.1				<u> </u>			<u> </u>	0.6	
7	<u>^</u>	24.0	37,300		1.2			 				 	0.7	·
8	X	24.0	35,100		1.1		· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		·	0.8	
9	X	24.0	46,567					-			_			
10		24.0	46,567											
11	Х	24.0	46,567		1.1								0.9	
12	Х	24.0	41,400		1.2					1			0.9	
13	Х	24.0	70,800		1.4								1.0	
14	Х	24.0	48,000		1.3								1.0	
15	Х	24.0	44,200		1.4								1.0	
16		24.0	54,267				ļ			<u> </u>			ļ <u>.</u>	
17		24.0	54,267				ļ			ļ		<u> </u>	ļ	
18	X	24.0	54,267		1.4			ļ <u> </u>				<u> </u>	1.1	
19	X	24.0 24.0	60,700 64,700		1.4		-			 			1.2	
21	X	24.0	53,700		1.4			 	 	<u> </u>			1.0	
22	X	24.0	50,600		1.4				 	<u> </u>			1.1	
23		24.0	61,467		• • • • • • • • • • • • • • • • • • • •				 	 		ļ		
24		24.0	61,467											
25	Х	24.0	61,467		1.2								1.0	
26	Х	24.0	60,400		1.4								1.1	
27	X	24.0	43,200		1.4								1.1	
28	Х	24.0	29,400		1.3								1.0	
29	X	24.0	93,800		1.3								1.2	
30	X	24.0	53,500				ļ							
31		24.0			L	<u> </u>	<u> </u>	L	L		L	l	J	<u> </u>
Total	iningky: Bul		1,489,700											
Avgerag Maximu			48,055 93.800											
11VIAXIIIIU	LDE ACT		1008,69	1										

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



See Pages 4 for Instr	uctions.							
I. General Information	for the Month/	Year of: May, 2005						
A. Public Water System	(PWS) Informa	ition						
PWS Name:	Fern Terrace				· ·	PWS Identification Number:	3350370	
PWS Type:	✓ Community	Non-Transient Non-Commu	nityT	ransient Non-Com	munity	Consecutive		
Number of Service Connect	tions at End of Montl	125			Total	Population Served at End of Mo	onth: 290	
PWS Owner:	Aqua Utilities Florid	la						
Contact Person:	Brian Heath				Conta	ect Person's Title: Ar	rea Manager	
Contact Person's Mailing A	ddress:	PO Box 490310			City: Leesburg	State: Florida	Zip Code:	34749
Contact Person's Telephone	Number:	(352) 787-0980			Conta	act Person's Fax Number: (3	52) 787-6333	
Contact Person's E-Mail Ad		beheath@aquaamerica.co	<u>m</u>					
B. Water Treatment Pla	ant Information							
Plant Name:	Fern Terrace					Plant Telephone Number:	(352) 787-()980
Plant Address:	300 North Fern Driv	re			City: Leesburg	State: Florida	Zip Code:	32748
Type of Water Treatment by	·	✓ Raw Ground Water	Purchased Fin	ished Water				
Permitted Maximum Day O		·		129,600				
Plant Category (per subsect	ion 62-699.310(4), F					class (per subsection 62-699.310		
Licensed Operators		Name		License Class	License Number)/Shift(s) Worked	
Lead/Chief Operator:				С	6813	Days 1st Shift		
Other Operators:	Marty Neal			С	10027	Days 1st Shift		
	John Worrell			С	6597	Days 1st Shift		
5.00								
			 	ļ				
	<u> </u>			<u> </u>	L	<u> </u>		
II Certification by Lead	I/Chief Operato	r		· · -				
		t operator licensed in Florida,	am the lead/chie	of operator of the	water treatment	plant identified in part Lot	f this report Legrify	that the
		ue and accurate to the best of r						
		icable standards referenced in						
were prepared each da	iy that a licensed	operator staffed or visited this	plant during the	month indicate	a above: (1) reco	rds of amounts of chemica	ats used and chemica	i leed fales, and
		process performance records.			these additional of	operations records to the I	PWS owner so the P	ws owner can
retain them, together v	with copies of this	s report, at a convenient location	on for at least ter	n years.				
			Will Fontaine	;			<u>C</u> -6813	
Signature and Date			Printed or Typ	ped Name			License Nu	mber

Гет Тепасе

Plant Name:

											007,08			wmixsM
											744,24		ə	Avgerage
											1,315,700			IntoT
	6.0								£.1		006,54	24.0	X	318
	0.1								£.1	J	££1,24	24.0	X	30
			_								EE1,24	24.0		67
											££1,24	24.0		87
	Z.I	Ī					,		1.4	l	42,000	24.0	X	27
	1.1								€.1		36,200	0.42	X	97
	2.1								£.1		009,52	24.0	Х	52
	2.1								†Ί		32,100	24.0	X	74
	1.2			1					p'l		000'57	0.40	X	23
											000,24	0.4.0		77
						-					000,24	0.4.0		71
	11								tΊ		008,85	74.0	X	70
	0.I								ÞΙ		33,600	74.0	Х	61
	2.1								† 1		007,08	0.42	X	81
	1.1					i			Þ'I		45,100	74.0	Х	LI
	2.1								⊅'I	i	46,133	74.0	Х	91
											££1,64	24.0		SI
											££1,84	74.0		ÞΙ
	£.1								91	-	29,500	74.0	Х	. EI
	ÞΊ			1					8.1		38,100	24.0	X	71
	6.0								1.1		007,84	24.0	Х	П
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											££4,8£	24.0		L
	2.1								νI		34,800	0.4.0	X	9
	£.1								£.1		32,100	74.0	X	ς
	2.1								τı	i	38,700	24.0	Х	Þ
	2.1		1				T		5'1		008,65	0.42	X	ε
	2.1								t'l		005,52	24.0	Х	7
											005,52	74.0		1
Out Operation	System, mg/L &	zec/cm²	mW-sec/cm ²	J/mm	əldsəilqqA li	Water, CC	J\nim	səmum	Peak Flow, mg/L	Rate, gpd.	Esp	Operation	("X"	Month
dnyolves Taking Water System Components	notatribution	-Wm	UV Dose,	Required, mg	TOTEW TO Hq	to qma i	Flow, mg-	Peak Flow,	Customer During	Peak Flow	Producted,	uı	(Place	əqı
Conditions, Repair or Maintenance Work that	Remote Point in	Required,		Minimum CT			During Peak	Point During	Before or at First		Water	Hours plant		Day of
Emergency or Abnormal Operating	Concentration at	UV Dose	Lowest				Customer	Measurement	Concentration (C)		of Finished		Visited by	
Emergency or Abnormal Operating	Disinfectant	anminiM	$S_{\mu}^{*} \rightarrow S_{\mu}^{*}$				tzn4	O is (T)	Disinfectant		Net Quantity		Staffed or	
	Lowest Residual		p.				Before or at	Contact Time	Lowest Residual		4.		Days Plant	1
							Provided	Disinfectant						
			100				Lowest CT				: · · · · · · · · · · · · · · · · · · ·			
	\$200 A \$400 A \$4	000	<u> </u>	200		<u> </u>	gronn.	10ma 10	<u> </u>	l	.			
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			*əldsəilaa/	Yi nonsvi	Virus Inaci	20A-nuo	A stateom9C	UV Dose, to I	T Calculations, or	<u> </u>				
	ioxide	Chlorine D	(s	(Chloramine	ed Chlorine	Combin	T ənin	✓ Free Chlos	bution System:	insiG ni bər	riernieM leu	tant Resid	oornisid 1	Type o
				· · · · · · · · · · · · · · · · · · ·							L Огре		raviolet R	-
	(səuii	e (Chloran	ined Chlorin	[Сошр	orone	əpixi	Chlorine Dio	l aurour			virus Inactiv			
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								May, 2005		:10	onth/Year	M shr the M	aily Data	III. D

3350370

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



See Pages 4 for Instr							_	
. General Information	for the Month/Y	Year of: June, 2005	<u> </u>					
A. Public Water System	(PWS) Informa	tion						
PWS Name:	Fern Теттасе					PWS Identification Number:	3350370	
PWS Type:	✓ Community	Non-Transient Non-Commu	inity T	ransient Non-Comr	nunity	Consecutive		
Number of Service Connect	ions at End of Month	125				al Population Served at End of Mo	onth: 290	·····
PWS Owner:	Aqua Utilities Florid	a						
Contact Person:	Brian Heath				Con	tact Person's Title: Are	ea Manager	
Contact Person's Mailing A	ddress:	PO Box 490310			City: Leesburg	State: Florida	Zip Code:	34749
Contact Person's Telephone	Number:	(352) 787-0980			Con	tact Person's Fax Number: (35	52) 787-6333	
Contact Person's E-Mail Ad		beheath@aquaamerica.co	m					
B. Water Treatment Pla	nt Information							
Plant Name:	Fern Тептасе					Plant Telephone Number:	(352) 787	-0980
	300 North Fern Drive	e			City: Leesburg	State: Florida	Zip Code:	32748
Type of Water Treatment by		✓ Raw Ground Water	Purchased Fini	ished Water				
Permitted Maximum Day O				129,600				
Plant Category (per subsecti	ion 62-699.310(4), F					Class (per subsection 62-699.310		
Licensed Operators	1 1 1 1 1 1 1 1 1	Name		License Class	License Number) / Shift(s) Worked	
	Will Fontaine			С	6813	Days 1st Shift		
Other Operators:	Marty Neal			С	10027	Days 1st Shift		
	John Worrell			С	6597	Days 1st Shift		
								
							· · · · · · · · · · · · · · · · · · ·	
							_ 	
				<u></u>		<u> </u>		
I Certification by Lead	/Chief Operator	•						
		operator licensed in Florida,	am the lead/chie	f operator of the	water treatment	plant identified in part I of	this report Legrit	fy that the
-	-	ue and accurate to the best of r		•				•
		cable standards referenced in						
		operator staffed or visited this						
		process performance records.			these additional	operations records to the P	WS owner so the F	WS owner can
retain them, together w	of this	report, at a convenient location	on for at least ter	ı years.				
			Will Fontaine				C-6813	
Signature and Date			Printed or Typ				License N	umber
				· · / 			2.231.001	

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											LLE'ZE		Э	gвтэgvA
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	8.0								11		27,400	24.0	X	30
	8.0								0.1		32,800	24.0	X	67
	L'0								0.1		24,500	24.0	X	87
	6.0								8.0		794,88	0.42	Х	LT
	-										494,88	24.0		76
											794,88	0.42		72
	L'0								0.1		29,300	0.4.0	X	- 54
	T.0								0.1		007,15	24.0	X	53
	8.0								0.1		38,400	24.0	X	77
	0.1								1.3		40,000	24.0	X	17
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	6.0		<u> </u>						2.1		32,900	24.0	X	9
					***						32,900	24.0		5
											006,25	24.0		7
	11								. E.1		007,15	24.0	Х	ε
	0.1								£.1		30,100	24.0	X	7
	0.1								£.1		76,400	24.0	X	1
Involves Taking Water System Components Out of Operation	Distribution System, mg/L	zwo/oos	mW-sec/cm ²	Required, mg 7 Juim	in Applicable	Water, OC	-Зт, woFl Л\піт	Peak Flow, minutes	Customer During. Peak Flow, mg/L	Peak Flow Rate, gpd	Producted, gal	Operation	(Place	the .
Conditions; Repair or Maintenance Work that		· -Wm	Summers of	TO muminiM	3010W 30 He	TempT	During Peak	Spin During	Before or at First		Water	Hours plant	2 2	Day of
Emergency of Apploiting Operating	Concentration at	UV Dose Required,	TOWCZ				Customer	Measurement,	Concentration (C)		of Finished		Visited by	
	Disinfectant	mminiM.	Lowest				First	O is (T)	Disinfectant		Net Quantity		Staffed or	8
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			plicable	1 i noitevi	Virus Inact	go.I-nuo	Demostate F	UV Dose, to I	T Calculations, or	၁	<u>'</u>			
	ioxiqe	Chlorine D	1 (5	(Chloramine:	ed Chlorine	Combine	l ənir		bution System:	intsiG ni bə	nistnisM lsu	tant Resid	oofnisiO 1	Type of
										(Describe):			raviolet Ra	-
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								June, 2005	`	:1	o res (\dino	M off the M	stad vlie	III. Di
							2221121 1112 1	i aum i aum i	T	0150555				CIL CAA I

Page 2

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



See Pages 4 for Instr	uctions.												
I. General Information		ear of: July, 2005		*									
A. Public Water System		tion											
PWS Name:	Fern Тегтасе					PWS Identification Number:	3350370						
PWS Type:	✓ Community	Non-Transient Non-Commun	ity 📙 Tr	ansient Non-Com	munity	Consecutive							
Number of Service Connect					Tota	Population Served at End of Month	: 290						
PWS Owner:	Aqua Utilities Florid	<u>a</u>											
Contact Person:	Brian Heath					act Person's Title: Area	Manager						
Contact Person's Mailing A		PO Box 490310		***************************************	City: Leesburg	State: Florida	Zip Code: 34749						
Contact Person's Telephone		(352) 787-0980			Con	act Person's Fax Number: (352)	787-6333						
Contact Person's E-Mail Ac		beheath@aquaamerica.com	<u>1</u>										
B. Water Treatment Pla													
Plant Name:	Fern Terrace					Plant Telephone Number:	(352) 787-0980						
Plant Address:	300 North Fern Drive				City: Leesburg	State: Florida	Zip Code: 32748						
Type of Water Treatment by	<u> </u>	✓ Raw Ground Water	Purchased Finis	shed Water	-								
Permitted Maximum Day O				129,600									
Plant Category (per subsect	, 					Class (per subsection 62-699.310(4),							
Licensed Operators	album dies felijfe	Name		License Class	License Numbe		Shift(s) Worked						
	ad/Chief Operator: Will Fontaine C 6813 Days 1st Shift												
Other Operators:	erators: Marty Neal C 10027 Days 1st Shift												
John Worrell C 6597 Days 1st Shift													
, é													
	<u> </u>				<u> </u>			*					
I Cortification by Leas	VChief Opentor												
I Certification by Lead			.1 1 1/1	C		1 .:1 .:6 1:	T CC 3						
		operator licensed in Florida, ar											
	-	e and accurate to the best of m			-	-	-						
		cable standards referenced in su		. ,,	•	-		-					
		pperator staffed or visited this p											
(2) if applicable, appro	opriate treatment p	process performance records. I	Furthermore, I a	igree to provide	these additional	operations records to the PWS	S owner so the PWS owner	er can					
retain them, together v	with copies of this	report, at a convenient location	n for at least ten	years.				•					
			Will Fontaine				C-6813						
Signature and Date			Printed or Typ	ed Name	-		License Number						

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											£06,2£		9	Avgerag
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									£.1		001'69	24.0	X	82
	6.0								£.1			24.0	X	LT
	6.0			<u> </u>					0.1		30,200	24.0	X	97
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	2.0			ļ					1.3		730.EA	24.0		
														74
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	0.1								€1		008,15	24.0	X	77
	8.0			<u> </u>			<u> </u>		11		005,25	24.0	X	17
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											45,700	0.42		LI
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			<u> </u>				<u> </u>				££Z,6Z	0.42		ε
	l										552,62	24.0		7
	8.0								7.1		24,200	24.0	X	1.
Out of Operation	Jystem, mg/L	zwo/oos	mW-sec/cm	- J/uim	əldsəilqqA li	Water, C	J\nim	sənnim	Peak Flow, mg/L	Rate, gpd.	gal	Operation	("X"	Month
· Involves Taking Water System Components	nonudrasid	-Wm	'esoct A Ci	Required, mg			-gm, wol4	Peak Flow,	Customer During	Peak Flow	Producted,	ni	(Place	ərb
Conditions; Repair or Maintenance Work that	MONEY (1) 11 14 14 14 15 15 15 15 16 16 16 17 17 17 17 17 17 17 17 17 17 17 17 17	Reduned,		Minimum CT		J	During Peak	Point During	Before or at First		Water	Hours plant	Operator	Day of
Emergency or Abnormal Operating	Concentration at	中国的大型的大型					Customer	Measurement	Сопсепиации (С)		boheini To		Visited by	
		OV Dose	Lowest) at (T)	・ 選手、作品をよる企業が、、作品が選手があった。		Net Quantity	1	Staffed or	
	hustoelinigid,	mummiM.					ızıiA		Dismicciant		Mat Owner	1		
[설명] 기업을 하는 사람들이 되었다.	Lowest Residual	19 4 - 100 - 1					Before or at	Contact Time	Lowest Residual		1	1	Days Plant	
	医生产的 医髓管	Page 25	Park Fig.	1850 p. 5			Provided	Disinfectant		1	.[1		
			1	2.5			LOWest CT				1	i '		
		15,200	4.7.6		1000					Paragraphic States	J		1	
[발생물통통] [1] : [1] [12] [1] : [1] [2]		2000	I AN	E ASC 1			suone	CT Calcu		Service Service	111	1		
				IVation, II A	virus inaci	our-Log	emostate F	OA DOSC' 10 T	T Calculations, or)	1			
											I	L L	221116167.1	o odf r
	əbixoi	Chlorine D	(⁶	Chloramines	ed Chlorine (Combine	ine ani	L Free Chlor	bution System:	inteiG ni ba	rietnieM leu			_
						_				(Descripe):	L Other	noitsiba	raviolet Ra	માત 🔟
	ines)	e (Chloram	ined Chlorin	[_ Сошрі	əuozo 🔟	əpix	Chlorine Dio	иопис 📙 (Virus Inactiva			
								3002 çılını		:30	o nth/Year o	M anti rol	sts(I vlis	
		- -					em lemace	Plant Name:		0750255			:(DMS ID

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



See Pages 4 for Instructions.

Public Water System (PWS) Information PWS Name Fern Terrace PWS Type	Conoral Information		Aurust 2005				
PWS Name	. General information	for the Wonth/Y	ear of: August, 2005		·		
PWS Name	A. Public Water System	(PWS) Informat	ion				
Number of Service Connections at End of Month: 125 Total Population Served at End of Month: 290						PWS Identification Number	er: 3350370
Pair Properties Propertie	PWS Type:	✓ Community	Non-Transient Non-Community	Transient Non-Com	nunity	Consecutive	
Contact Person's Mailing Address: PO Box 490310 City Leesburg State Florida Zip Code 34749	Number of Service Connec	tions at End of Month:	125		Total F	Population Served at End of	Month: 290
Contact Person's Mailing Address PO Box 490310 City Leesburg State Florida Zip Code 34749	PWS Owner:	Aqua Utilities Florida					
Contact Person's Telephone Number: (352) 787-0980 Contact Person's Fax Number: (352) 787-6333 Water Treatment Plant Information Plant Address 300 North Fern Drive Plant Clephone Number: (352) 787-0980 Plant Address 300 North Fern Drive Plant Clephone Number: (352) 787-0980 Premitted Maximum Day Operating Capacity of Plant, gallons per day: 129,600 Plant Claegory (per subsection 62-699-310(4), F.A.C.): V Plant Claes (per subsection 62-699-310(4), F.A.C.): D Licensed Operators Name License Class License Number Day(s) / Shift(s) Worked: Lead/Chief Operators: Marty Neal C 10027 Days 1st Shift Other Operators: Marty Neal C 6597 Days 1st Shift Other Operators Day State Shift Other Operators Day State Shift Contact Person's Fax Number: (352) 787-6333 Plant Clesson's Fax Number: (352) 787-6333 Plant Clephone Number: (352) 787-6334 Plant Clephone Number: (352) 787-6340 Plant Clephone Number: (352) 787-6980 Plant Clephone Number: (352)	Contact Person:	Brian Heath			Contac	et Person's Title:	Area Manager
Contact Person's E-Mail Address: beheath@aquaamerica.com Water Treatment Plant Information Plant Name Fern Terrace	Contact Person's Mailing A	ddress: F	PO Box 490310		City: Leesburg	State: Florida	Zip Code: 34749
Plant Name Fern Terrace Plant Telephone Number: (352) 787-0980	Contact Person's Telephone				Contac	et Person's Fax Number:	(352) 787-6333
Plant Name Fern Terrace Plant Telephone Number (352) 787-0980 Plant Address 300 North Fern Drive			beheath@aquaamerica.com				
Plant Address 300 North Fem Drive City: Leesburg State: Florida Zip Code: 32748 Type of Water Treatment by Plant: Raw Ground Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 129,600 Plant Clategory (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): D Licensed Operators: Name License Class License Number Day(s) / Shift(s) Worked: Day(s) / Shift(s) / Shif	. Water Treatment Pla	ant Information					
Type of Water Treatment by Plant:	Plant Name:	Fern Terrace				Plant Telephone Number:	(352) 787-0980
Permitted Maximum Day Operating Capacity of Plant, gallons per day: Plant Category (per subsection 62-699.310(4), F.A.C.): V Licensed Operators Lead/Chief Operator: Will Fontaine C G Hant Class (per subsection 62-699.310(4), F.A.C.): Day(s) / Shift(s) Worked: Day(s) / Shift(s) Worked: Day Ist Shift C G G G G G D D D D D D D D				<u></u>	City: Leesburg	State: Florida	Zip Code: 32748
Plant Category (per subsection 62-699 310(4), F.A.C.): V Licensed Operators Lead/Chief Operator; Will Fontaine Other Operators: Marry Neal John Worrell C C C C C C C C C C C C				ed Finished Water	 		
Licensed Operators Lead/Chief Operator: Will Fontaine C C 6813 Days 1st Shift Other Operators: Marty Neal John Worrell C C 6597 Days 1st Shift C C 6597 Days 1st Shift C C Certification by Lead/Chief Operator				129,600			
Lead/Chief Operator: Will Fontaine C 6813 Days 1st Shift Other Operators: Marty Neal C 10027 Days 1st Shift John Worrell C 6597 Days 1st Shift C 6597 Days 1st Shift C Certification by Lead/Chief Operator		ion 62-699.310(4), F.A					
Other Operators: Marty Neal John Worrell C C 10027 Days 1st Shift Days 1st Shift C Certification by Lead/Chief Operator		teressa i Albert (Name	License Class			y(s) / Shift(s) Worked
John Worrell C 6597 Days 1st Shift C 6597 C Days 1st Shift C C 6597 Days 1st Shift C C 6597 Days 1st Shift				С			
Certification by Lead/Chief Operator	Other Operators:						<u> </u>
Certification by Lead/Chief Operator		John Worrell		С	6597	Days 1st Shift	
Certification by Lead/Chief Operator					- 		
Certification by Lead/Chief Operator							
Certification by Lead/Chief Operator							
Certification by Lead/Chief Operator							
Certification by Lead/Chief Operator							
Certification by Lead/Chief Operator							
. Certification by Lead/Chief Operator							
		<u> </u>					
	Certification by Lead	d/Chief Operator					
				1/aliaf amanatan aftha	water treatment n	lant identified in nort I	of this report. I certify that the
information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to No.	International Standard	60 or other applic	cable standards referenced in subsection	62-555.320(3), F.A.C	C. I also certify that	it the following addition	onal operations records for this plant
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 da	ay that a licensed o	perator staffed or visited this plant during	ng the month indicated	d above: (1) record	ds of amounts of chem	icals used and chemical feed rates; an
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 the standard feed rates is a standard feed rate of the standard feed rates is a standard feed rate of the standard feed rates.	(2) if applicable, appre	opriate treatment p	process performance records. Furthermo	re, I agree to provide	these additional o	perations records to th	e PWS owner so the PWS owner can
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; at (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can	retain them, together v	with copies of this	report, at a convenient location for at lea	ast ten years.			
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 the standard feed rates is a standard feed rate of the standard feed rates is a standard feed rate of the standard feed rates.							
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; at (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can			Will Fo	ntaine			C-6813
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; at (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.	Signature and Date		Printed	or Typed Name			License Number
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; at (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years. Will Fontaine C-6813							

PWS ID: 3350370 Plant Name: Fern Terrace														
III. D	aily Data	for the M	onth/Year	of:		August, 2005								
			Virus Inactiv			hlorine [Chlorino Di	ovádo	Ozone	[Comb	aimed Chilomia	ac (Chloren	nings)	
	raviolet R			r (Describe):		morate [Chlorate Di	oxide	1 Ozone	t Come	inea Chiori	ie (Cinoran	illies)	
 -							· -	- C1:	- 1 (21.1:	(Chloramine		Chlorine E	Ni	
Type o	f Disinfed	ctant Resid	lual Maintaii			▼ Free Chlo					<u> </u>		Dioxide	
			2.1	C	T Calculations, or	UV Dose, to	Demostate l	Four-Log	Virus Inac	tivation, if				(1) 경우 시간 경우 전 경우
			,			CT Calc	ulations				UVI	Dose .		10 (10 m) 10
			,				Lowest CT					34		
					27.6	Disinfectant	Provided							
	Days Plant			1.	Lowest Residual	Contact Time	Before or at			【 1.17】字第		, 4 .	Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First	2.7			7.00	Minimum:	Disinfectant	
1900 11 Land 10	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV.Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator	Hours plant	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		Before or at First	Point During	During Peak			Minimum CI		Required,		Conditions, Repair or Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	1 temp of	pH of Water,	Required, mg	UV Dose,	sec/cm ²	Distribution	
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	water, C	if Applicable	min/L	mW-sec/cm ²	sec/cm	System, mg/L	Out of Operation
2	X	24.0 24.0	40,000 26,900		1.3			 		<u> </u>	-		0.8	
3	X	24.0	42,800		2.2				<u> </u>	 			1.2	
4	X	24.0	34,100		1.4		 	1					1.4	
5	X	24.0	33,000		2.0			 		 			1.5	
6		24.0	51,900					İ						
7		24.0	51,900					L						
8	X	24:0	51,900		1.6			<u> </u>					1.3	
9	Х	24.0	35,000		1.4			ļ					1.2	
10	X	24.0	47,700		1.5			ļ					1.2	
11	X	24.0	42,400 32,900	 	1.7			 					1.3	
13		24.0	40,133	-	1,0		 	 		 			1.5	
14		24.0	40,133	,			<u> </u>	†	<u> </u>					
15	Х	24.0	40,133		1.4			l			 		1.2	
16	Х	24.0	46,000	1	1.4			1					1.3	
17	Х	24.0	45,100		1.4								1.2	
18	Х	24.0	39,400		1,3								1.0	
19	X	24.0	30,000		1.3		ļ	ļ		<u> </u>	ļ	ļ	1.0	
20		24.0	37,633	ļ			<u> </u>	 						
21	<u> </u>	24.0	37,633		1,2			 	-	 	-		0,9	
22 2	X	24.0	37,633 30,200		1,3			 			 	 	1.0	
24	x	24.0	33,700		1.5			 	<u> </u>	 			1.1	
25	X	24.0	21,700		1.4			 	 	1	 		1.0	
26	X	24.0	28,900	-	1.3						1		1.0	
27		24.0	35,833	†		_	1					<u> </u>		
28	Ì	24.0	35,833											
29	Х	24.0	35,833		1.3								0.9	
30	Х	24.0	29,800		1.3								1.0	
31.	Х	24.0	35,400	L	1.2	l	J	<u> </u>				<u></u>	1.0	
Total			1,171,500]										
Avgerag	e .	· -	37,790											

51,900

Maximum

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



See Pages 4 for Instru	uctions.						
. General Information	for the Month/	Year of: Septem	ber, 2005				
A. Public Water System	(PWS) Informa	tion					
PWS Name:	Fern Terrace	CION				PWS Identification Number:	3350370
PWS Type:	✓ Community	Non-Transient Non-Com	munity T	ransient Non-Com	munity	Consecutive	
Number of Service Connect				onsiene men com		l Population Served at End of Mon	th: 290
PWS Owner:	Aqua Utilities Florid						
Contact Person:	Brian Heath				Con	tact Person's Title: Area	Manager
Contact Person's Mailing A	ddress:	PO Box 490310			City: Leesburg	State: Florida	Zip Code: 34749
Contact Person's Telephone	Number:	(352) 787-0980		· · ·	<u> </u>	tact Person's Fax Number: (352	7) 787-6333
Contact Person's E-Mail Ad		beheath@aquaamerica.	com	• • •			
B. Water Treatment Pla							
Plant Name:	Fern Terrace					Plant Telephone Number:	(352) 787-0980
Plant Address:	300 North Fern Drive	e			City: Leesburg	State: Florida	Zip Code: 32748
Type of Water Treatment by	/ Plant:	✓ Raw Ground Water	Purchased Fini	shed Water			
Permitted Maximum Day O	perating Capacity of	Plant, gallons per day:		129,600			
Plant Category (per subsecti	ion 62-699.310(4), F.	A.C.): \	V		Plant	Class (per subsection 62-699.310(4	1), F.A.C.): D
Licensed Operators		Name		License Class	License Number	r Day(s)	/ Shift(s) Worked
Lead/Chief Operator:	Will Fontaine			С	6813	Days 1st Shift	
Other Operators:	Marty Neal			С	10027	Days 1st Shift	
	John Worrell			С	6597	Days 1st Shift	
			, , , , , , , , , , , , , , , , , , , ,				
	. ,					<u> </u>	
I Certification by Leac	VChief Operator						
			la am tha laad/ahia	f amount on of the		plant identified in part I of the	his rapart. Leartify that the
							s used at this plant conform to NSF
							operations records for this plant
							s used and chemical feed rates; and
					these additional	operations records to the PV	VS owner so the PWS owner can
retain them, together v	vith copies of this	report, at a convenient loca	ation for at least ter	n years.			
			Will Fontaine				C-6813
Signature and Date			Printed or Typ	oed Name			License Number

											004,24		u	mmixsM
											LLL'7E			Avgerage
											1,016,100		1111	Lesto T
			<u></u>		<u> </u>							24.0		18
	6.0								€.1		20,700	24.0	X	30
	T.0				<u> </u>	<u></u>		1	€1		006,72	0.42	X	67
	7.0								11		32,000	24.0	X	- 87
	6.0		L						7.1		31,000	0.42	Х	7.7
	6.0								1.1		792,55	0.42	X	97
											732,EE	24.0	l	57
											792,55	24.0		74
	0.1								£.1		24,400	0.42	Х	73
	0.1								£.I		27,000	0.42	X	77
	0.1								€1		008,22	24.0	Х	17
	6.0								£.1		30,800	24.0	Х	0Z
	6.0								1.1		44,000	24.0	Х	61
											44,000	0.42		81
											000,44	24.0		LI
	6.0								7.1		32,300	24.0	X	91
	6.0								TT		35,000	24.0	X	:: S1
	6.0								1.2		34,000	0.42	Х	ÞΙ
	7.0								I I		34,000	24.0	X	εī
	0.1								£.1		40,000	24.0	Х	71
											40,000	24.0		П
											40,000	24.0		10
	£.1								S.I		24,200	24.0	Х	6
	τl								1.5		32,300	24.0	X	8
	S.I								·9'I		34,600	24.0	X	L
	1.3					1			9.1		004,24	0.4.0	X	9
	1 1								S.I		££\$'LE	24.0	Х	S
											££4,7£	0.42		7
			I					-			EE4,7E	24.0		ε
	61								0.2		32,000	24.0	Х	7
	91								0.2		27,700	24.0	X	I
nobsingO To tuO	System, mg/L	sec/cm ²	mW-sec/cm	J\nim	oldsoilqqA Ti	Water, ^o C	J/nim	- səmuru	Peak Flow, mg/L	Rate, gpd.	हिश्र	Operation	(uXu	Month
Involves Taking Water System Components	noindrusid	-Wm	UV Dose,	Required, mg	pH of Water,	to duis t	Flow, mg-	Peak Flow,	Customer During	Peak Flow	Producted,	uı	SoulT)	aqt
Conditions, Repair or Maintenance Work that	Remote Point in	Required,		Minimum CT			During Peak	Point During	Before or at First	1	Water	Hours plant		Day of
	Concentration at	UV Dose	Lowest				Customet	Measurement	Concentration (C)		bedsimi To		Visited by	
	Disinfectant	minimM		tar Albania			a sirit	Dis(T)	Disinfectant		Net Quantity		Staffed or	
	Lowest Residual						Before or at	Contact Time	Lowest Residual	Ì			Days Plant	
		Balada višk			100		Provided	Disinfectant					mold mich	
							Lowest CT				- 1			B. T.
	FYTAX					A total					15	e De Tipo		4.
		əso(ገለበ			1 1471.41	snotislu	CI Calca		*************	1			
				A 11 , notby i	Virus Inact	god-no	Jemostate F	UV Dose, to I	T Calculations, or	<u> </u>	. t = =================================			195 D. J.
	POXIGE	Chlorine D		•				old⊃ ær∃ 🔽	pution System:		HEIHIPIAI IPN	ימונו וצכצות	MINISTEL I	o adkı
		G -:110	<u> </u>	(Chloramine:	:			1403 🔼						_
	(com	imionio) s	miomo pom	auroa I	*****					(Descripe):			Raviolet R	
	(saujt	e (Chloran	nined Chlorin	4m0,) _1	əuozO 🗍	əpixo	viC blorine Div	hlorine	al: 🔽 Free C	vom5A\noits	virus Inactiv	god-mo4 ga	rivəidəA To	Means o
							ç	September, 200		:J0	onth/Year o	for the N	aily Data	III. D
						-		COLUMN L MURIC		0150555				77.0 1.1

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



See Pages 4 for Instr												
I. General Information	for the Month/	Year of: October, 2	2005									
A. Public Water System	(PWS) Informa	ition										
PWS Name:	Fern Terrace					PWS Identification Number:	3350370					
PWS Type:	✓ Community	Non-Transient Non-Comm	unityT	ransient Non-Com	munity	Consecutive						
Number of Service Connect	tions at End of Monti	125			· · · · · · · · · · · · · · · · · · ·	Population Served at End of M	onth: 290					
PWS Owner:	Aqua Utilities Florid	la										
Contact Person:	Brian Heath				Conta	ct Person's Title: A	rea Manager					
Contact Person's Mailing A	ddress:	PO Box 490310			City: Leesburg	State: Florida	Zip Code:	34749				
Contact Person's Telephone	Number:	(352) 787-0980			Conta	ct Person's Fax Number: (3	52) 787-6333					
Contact Person's E-Mail Ad		beheath@aquaamerica.co	<u>om</u>									
B. Water Treatment Pla	ant Information											
	Fern Terrace					Plant Telephone Number:	(352) 787-09	980				
Plant Address:	300 North Fern Driv	e			City: Leesburg	State: Florida	Zip Code:	32748				
Type of Water Treatment by		✓ Raw Ground Water	Purchased Fin	ished Water								
Permitted Maximum Day O				129,600								
Plant Category (per subsecti	ion 62-699.310(4), F.			•		lass (per subsection 62-699.310						
Licensed Operators		Name		License Class	License Number	Day(s	S)/Shift(s) Worked					
Lead/Chief Operator:	· · · · · · · · · · · · · · · · · · ·			С	6813	Days 1st Shift						
Other Operators:	Marty Neal			С	10027	Days 1st Shift						
John Worrell C 6597 Days 1st Shift												
												
												
				<u> </u>								
I Certification by Lead	/Chief Operato	•										
		operator licensed in Florida,	am the lead/chie	f operator of the	water treatment n	lant identified in part Lot	f this report I certify	that the				
		ue and accurate to the best of										
		cable standards referenced in										
		operator staffed or visited this										
		process performance records.			tnese additional o	perations records to the i	ws owner so the Pw	/S owner can				
retain them, together w	vith copies of this	report, at a convenient location	on for at least ter	i years.								
			Will Fontaine				C-6813					
Signature and Date			Printed or Typ	ed Name			License Nun	nber				

PWS II):			3350370		Plant Name:	Fern Terrace	;		· · · · · · · · · · · · · · · · · · ·				
III. D	ailv Data	for the M	lonth/Year	of:		October, 2005								
			y Virus Inactiv		ral: 🔽 Free C	hlorine C	Chlorine Di	arida	□ Ozana	┌ Comb	:1 CL1:	(Cl-1		
1	raviolet R		Othe		•	oraic	Chlorine Di	o.duc	1 Ozone	I Come	nnea Cmorn	ne (Chiorai	nuies)	
F						▼ Free Chlo	rine C	Combin	ed Chlorine	(Chloramine	م ٦	Chlorine I	Diovide	
Type o	Distilled	tant Kesic	idai Maiittaii										JOAIGE	
					T Calculations, or			our-Log	virus inac					
						CT Calc	ulations	Г	A CASACTIVA NO.		## UV :1	Dose		
							Lowest CT	-V)		146	Lowest Operating			
Į						Disinfectant	Provided				1.76			
	Days Plant Staffed or		Net Quantity		Lowest Residual Disinfectant	Contact Time	Before or at			Ser 1		Minimum	Lowest Residual	
7	Visited by		of Finished		Concentration (C)	(T) at C Measurement	First Customer		7 Arsa	,	Lowest	UV Dose	Disinfectant Concentration at	Emergency or Abnormal Operating
Day of		Hours plant	4 1 2 20 20 14		Before or at First	Point During	During Peak			Minimum CT	Operating	Required,	Remote Point in	Conditions, Repair of Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg	ÜV Dose,	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L :	mW-sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1		24.0	38,967								· · · · · · · · · · · · · · · · · · ·			
2	37	24.0	38,967											
4	X	24.0 24.0	38,967 26,700		1.5								1.1	
- 5	X	24.0	26,600		1.6			ļ		-			1.1	
6	X	24.0	22,100		1.5								1.4	
7	X	24.0	24,600		1.5								1.3	
8		24.0	30,567											
9		24.0	30,567											
10	X	24.0	30,567		1.5								1.3	
11	X	24.0 24.0	21,700 27,000		1.5								1.2	
13	<u>x</u>	24.0	33,400		1.3	,						-	1.0	
14	X	24.0	20,800	<u> </u>	1.2								0.9	
15		24.0	34,967											
16		24.0	34,967											
17	X	24.0	34,967		1.4								1.2	
18	X	24.0	30,500		1.5								1.2	
19	X	24.0 24.0	33,500 27,900		2.0			ļ				-	1.6 1.5	
21	X	24.0	28,500		1.8			ļ					1.5	
22	^_	24.0	29,200		1.7								1.5	
23		24.0	29,200	-				 						
24	Х	24.0	29,200		1.5								1.1	
25	X	24.0	35,000		1.3						''		1.0	
26	Х	24.0	22,000		1.3								1.0	
27	X	24.0	25,700	ļ	1.3								1.0	
28	X	24.0 24.0	28,300 34,000		1.3								1.1	
30		24.0	34,000					 						
31	X	24.0	34,000		1.3			<u> </u>					1.0	
Total	3 72		937,400			·								
A	1 1 1 1 1 1 1		20.220	1										

38,967

Maximum

[•] Refer to the instructions for this report to determine which plants must provide this information.



See Pages 4 for Instru													
I. General Information	for the Month/Y	ear of: November, 20	005										
A. Public Water System	(PWS) Informat	ion											
	Fern Terrace					PWS Identification Number	er:	3350370					
PWS Type:	✓ Community	Non-Transient Non-Communit	y Tr	ansient Non-Comi	nunity	Consecutive							
Number of Service Connect	ions at End of Month:	125			Tot	tal Population Served at End of	Month:	290					
PWS Owner:	Aqua Utilities Florida												
Contact Person:	Brian Heath				Cor	ntact Person's Title:	Area Manager						
Contact Person's Mailing A	ddress: I	PO Box 490310			City: Leesburg	State: Florida		Zip Code:	34749				
Contact Person's Telephone	Number: ((352) 787-0980			Cor	ntact Person's Fax Number:	(352) 787-6333						
Contact Person's E-Mail Ad	dress:	beheath@aquaamerica.com											
B. Water Treatment Pla	int Information												
Plant Name:	Fern Terrace					Plant Telephone Number:		(35 <u>2)</u> 787-0	980				
Plant Address:	300 North Fern Drive				City: Leesburg	State: Florida	<u>.</u>]:	Zip Code:	32748				
Type of Water Treatment by	Plant:	Raw Ground Water	Purchased Fini	shed Water									
Permitted Maximum Day O				129,600									
Plant Category (per subsecti						t Class (per subsection 62-699.		D	and the second s				
Licensed Operators		Name		License Class			y(s) / Shift(s)	Worked					
Lead/Chief Operator:	tor: Will Fontaine C 6813 Days 1st Shift												
Other Operators:	Marty Neal C 10027 Days 1st Shift												
100 mg (100 mg)	John Worrell C 6597 Days 1st Shift												
													
													
	· · · · · · · · · · · · · · · · · · ·												
													
<u>a beriatika (Elektria Ara</u>				l									
II Certification by Lead	/Chief Operator												
		operator licensed in Florida, am	the lead/chie	f operator of the	water treatmen	t plant identified in part I	of this report.	. I certify	that the				
		e and accurate to the best of my											
International Standard	iii iiiis report is uu 60 or othor annlis	cable standards referenced in sul	basetion 62.54	55 220(2) E A (Laka cartifu	that the following addition	anal operation	e recorde	for this plant				
international Standard	oo or other applic	able standards referenced in sur)).J20(3), F.A.\	debayor (1) mag	and of amounts of sham	sicals used and	Labomical	I food rates: and				
were prepared each da	y that a licensed o	perator staffed or visited this pl	ant during the	month indicate	a above: (1) rec	ords of amounts of chem	ncais useu and	CHCHICA	VC				
		process performance records. Fi			these additiona	ii operations records to th	ie Pws owner	so the Pv	ws owner can				
retain them, together w	vith copies of this	report, at a convenient location	tor at least ter	ı years.									
								0 (012					
			Will Fontaine					C-6813					
Signature and Date			Printed or Typ	ed Name				License Nu	mber				

PWS II	D:			3350370		Plant Name:	Fern Тегтасе	2						
ША	aily Data	for the N	lonth/Year	of:		November, 200)5			10				
			g Virus Inactiv		/al: ▼ Free C			anida	C 07070	☐ Comb	: .4CU :	(CL1	• • • • •	
ł	traviolet R	-	-	r (Describe):	•	inornic [Chlorine Di	oxide	1 Ozone	1 Come	oinea Uniori	ne (Chiorar	nines)	
-					ibution System:	₩ Farm Chile		Combin	ad Chlorina	(Chloramine	(c) [Chlorine I	Niavida .	
Type	Disille	Ctant Resid	luai Maintai							-			Jioxide	I reserve to the transfer of the order
					T Calculations, or					tivation, if				
				* + 4.2 *	<u> </u>	CT Calc	ulations				UV	Dose		
1							Lowest CT			1				
						Disinfectant	Provided			1.00				
	Days Plant				Lowest Residual	Contact Time	Before or at			lead and the			Lowest Residual	1.21
	Staffed or		Net Quantity	4	Disinfectant	(T) at C	First					Minimum	Disinfectant	152
	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	
Day of the	Operator (Place	Hours plant in	Water Producted	Peak Flow	Before or at First Customer During	Point During Peak Flow,	During Peak	Temp of	TT -EXV-4	Minimum CT Required, mg		Required, mW-	Remote Point in Distribution	Conditions, Repair or Maintenance Work that Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	Flow, mg- min/L		if Applicable		mW-sec/cm ²	sec/cm ²	The state of the s	
1	Х	24.0	27,900	Tutte, Bpu.	1.3	imitates	inau	1,440,	птіррії		III W - SCOTCHI	Scoron	1.0	Car of Optimion
2	Х	24.0	28,700		1.3						<u> </u>		1.1	
3	Х	24.0			1.4								1.1	
4	X	24.0	30,000		1.4								1.1	
5		24.0	34,000											
6		24.0	34,000				 			ļ		ļ		
8	X	24.0	34,000		1.5							ļ	1.3	
9	X	24.0 24.0	24,600 32,000	 	1.4		 			 			1.2	
10	X	24.0	27,000		1.3		 			 			1.1	
11	X	24.0	30,800		1.3		 	 	 	 		ļ	1.1	
12		24.0	35,767				 		<u> </u>					
13		24.0	35,767				l			1				
14	Х	24.0	35,767		1.3				<u> </u>				1.0	
15	X	24.0	32,400		1.3								1.0	
16	X	24.0	39,100		1.3								1.1	
17	X	24.0	36,500		1.3				ļ				1.1	
18	Х	24.0	34,100		1.3								1.1	
19		24.0	35,000				ļ	 			ļ	ļ		
20	х	24.0 24.0	35,000 35,000		1.2			ļ	 	ļ	 -		1.0	
22	X	24.0	23,300		1.2		 	 	 	l	 	-	1.0	
23	X	24.0	25,300		1.3		 	 	 			 	1.0	
24	X	24.0	32,200	<u> </u>	1.4			 		 	 	 	1.1	
25	X	24.0	36,300		1,4		<u> </u>					†	1.1	
26		24.0	36,167					1						
27		24.0	36,167							1				
28	Х	24.0	36,167		1.4								1.1	
29	Х	24.0	23,700		1.4							1	1.0	
30	X	24.0	26,400		1.3							<u> </u>	1.0	
31	L	24.0				l	L	l	L	<u> </u>	L	<u> </u>		L
Total	<u> </u>		954,100											
Avgerag			30,777 39,100	-										
LIVIAXIMU	111	1	1 39,100	I										

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



Polymer Page 3 Due in December

See	Pages	4	for	Instructions.
Ju	1 agus	7	101	mou uttons.

A Public Water System (PWS) Information PWS Name: Fem Terrace PWS Type
PWS Name: Fern Terrace PWS Identification Number: 3350370 PWS Type:
PWS Type:
Number of Service Connections at End of Month: 125 Total Population Served at End of Month: 290
Number of Service Connections at End of Month: 125 Total Population Served at End of Month: 290
Contact Person's Mailing Address: PO Box 490310 City: Leesburg State: Florida Zip Code: 34749
Contact Person's Mailing Address: PO Box 490310 City Leesburg State: Florida Zip Code: 34749 Contact Person's Telephone Number: (352) 787-0980 Contact Person's Fax Number: (352) 787-6333 Contact Person's E-Mail Address: beheath@aquaamerica.com 3. Water Treatment Plant Information Plant Name: Ferm Terrace Plant Address: 300 North Ferm Drive City: Leesburg State: Florida Zip Code: 32748 Type of Water Treatment by Plant: Raw Ground Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 129,600 Plant Category (per subsection 62-699 310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): D Licensed Operators: Name License Class License Number: Day(s) / Shift(s) Worked Lead/Chief Operator: Will Fontaine C 10027 Days 1st Shift Marty Neal C 10027 Days 1st Shift Other Operators: O 10027 Days 1st Shift
Contact Person's Telephone Number: (352) 787-0980 Contact Person's Fax Number: (352) 787-6333 Contact Person's E-Mail Address: beheath@aquaamerica.com 8. Water Treatment Plant Information Plant Name: Fern Terrace Plant Telephone Number: (352) 787-0980 Plant Address: 300 North Fern Drive City: Leesburg State: Florida Zip Code: 32748 Type of Water Treatment by Plant:
Contact Person's E-Mail Address: beheath@aquaamerica.com B. Water Treatment Plant Information Plant Name: Fern Terrace Plant Telephone Number: (352) 787-0980 Plant Address: 300 North Fern Drive City: Leesburg State: Florida Zip Code: 32748 Type of Water Treatment by Plant: Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 129,600 Plant Category (per subsection 62-699 310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): D Licensed Operators: Name License Class License Number Day(s) / Shift(s) Worked Didn Worrell C 10027 Days 1st Shift Other Operators: John Worrell C 6597 Days 1st Shift Day 1st Shift Days 1st Shift Days 1st Shi
Plant Name: Fern Terrace Plant Telephone Number: (352) 787-0980
Plant Name: Fern Terrace City: Leesburg State: Florida Zip Code: 32748 Plant Address: 300 North Fern Drive Raw Ground Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 129,600 Plant Category (per subsection 62-699 310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): D Licensed Operators: Name License Class License Number Day(s) / Shift(s) Worked Lead/Chief Operators: Will Fontaine C 6813 Days 1st Shift Other Operators: Marty Neal C 6597 Days 1st Shift Other Operators: D Day (s) / Shift(s) Worked Days 1st Shift
Plant Address: 300 North Fern Drive
Type of Water Treatment by Plant: Permitted Maximum Day Operating Capacity of Plant, gallons per day: Plant Category (per subsection 62-699 310(4), F.A.C.): Licensed Operators: Lead/Chief Operator: Will Fontaine C 6813 Days 1st Shift Other Operators: Marty Neal John Worrell C 6597 Days 1st Shift
Permitted Maximum Day Operating Capacity of Plant, gallons per day: Plant Category (per subsection 62-699.310(4), F.A.C.): Licensed Operators: Lead/Chief Operator: Will Fontaine C Street Operators: Marty Neal John Worrell C John Worrell John Worre
Plant Category (per subsection 62-699 310(4), F.A.C.): V Licensed Operators: Name Lead/Chief Operator: Will Fontaine Other Operators: Marty Neal John Worrell Day(s) / Shift(s) Worked C 6813 Days 1st Shift C 10027 Days 1st Shift C 6597 Days 1st Shift
Licensed Operators Name License Class License Number Day(s) / Shift(s) Worked Lead/Chief Operators: Will Fontaine C 6813 Days 1st Shift Other Operators: Marty Neal C 10027 Days 1st Shift John Worrell C 6597 Days 1st Shift
Lead/Chief Operator: Will Fontaine C 6813 Days 1st Shift Other Operators: Marty Neal C 10027 Days 1st Shift John Worrell C 6597 Days 1st Shift
Other Operators: Marty Neal C 10027 Days 1st Shift John Worrell C 6597 Days 1st Shift
John Worrell C 6597 Days 1st Shift
I Certification by Lead/Chief Operator
I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the
information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to N
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; a
(2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can
retain them, together with copies of this report, at a convenient location for at least ten years.
retain them, together with copies of this report, at a convenient location for at least ten years.
Will Fontaine C-6813
Signature and Date Printed or Typed Name License Number

								, 3			43,000	History of the	αı	umixeM
											32,330	- 10		Avgerag
											1,002,233	1 × 1 × 1		IntoT
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	6.0								2,1		34,300	0.4.0	Х	567
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	0.1								£.1		009'07	24.0	X	7.7
	6.0						_		2.1		008,15	24.0	X	97
											31,800	24.0		52
											31,700	24.0		54
	2.1								Þ'l		002,62	24.0	X	23
	1.1								£.1		30,000	0.42	X	77
	1.1								†¹I		002,82	0.4.0	X	71
	1.2								91		000,62	24.0	X	50
	2.1								91		29,000	24.0	X	61
	0.1									I	28,933	24.0		81
								 			28,933	0.4.0		LI
	€.1								LI		000,62	0.4.0	Х	91
	91								61		24,200	0 † 7	Х	SI
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	6.0		<u> </u>					l	7.1		008,82	0.42	X	εI
	8.0								7.1		41,100	24.0	X	15
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	6.0							<u> </u>	7.1		43,000	0.4.0	X	9
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	6.0		· · · · · · · · · · · · · · · ·						7.1		24,800	0.42	Х	7.
	0.1								£.1		30,00	0.42	Х	1
inotistion Olo inO	System, mg/L	"wo/oəs	mW-sec/cm	* - T/aiai	aldsoilggA li	Water, °C	J/nim	sənuiui	Peak Flow, mg/L	Rate, gpd	કિલ	Орегайоп	("X"	Month
Involves Taking Water System Components	nottudrusid	-Wm	OV Dose,	Required, mg	The of Water,	to qma i	Flow, mg-	Peak Flow,	Customer During	Peak Flow	Producted,	tri	(Place	гре
Conditions; Repair or Mannenance Work that		Required,		TO muminiM			During Peak	gniruG inio9	Before or at First		Water	Hours plant	Орегадог	Day of
Emergency or Abnormal Operating	Concentration at	UV Dose	Lowest				Customer	Measurement	Concentration (C)		bədzini Tio		Visited by	A 1
	Disinfectant	muminiM,				1	teniT	O is (T)	Disinfectant		Net Quantity		Staffed or	
	Lowest Residual	图 多的工					Before or at	Contact Time	Lowest Residual		* 1		Days Plant	
							Provided	Disinfectant						
			4.4.4.4				Lowest CT							
		2004	TACTOR STATE	graph Albert Berger Frank in November 1		2 3 3	SHODBIL	10100 10		1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1				
			I AN	r 11 6110000	ANTIT CO.	900		CT Calcu	10 (01101111111111111111111111111111111	<u> </u>				
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	əbixoide	Chlorine D	(s	(Chloramine	ed Chlorine	Combin	Tine frin	V Free Chlor	bution System:	ned in Distr	rianniaM lau	tant Resid	oolnisiG l	Type o
										. (Descupe):	Ц огре	noitsiba	raviolet R	ഥ വ്
	(sənir	e (Chloran	ined Chlorin	L Comb	ouozO	əpixo	Chlorine Dio	plorine [vitasent suriV ;			
														
								December, 2005		:}:	onth/Year	M adt sof	ete(1 vlie	
						-	Гет Тепасе	Plant Name:		9350370			(II SMd

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



See Pages 4 for Instr	uctions.										
. General Information		'ear of: January, 2	2004								
A. Public Water System PWS Name:		tion				Inuc Harie - dia Namba	3350370				
	Fern Terrace Community	The Tester New Course				PWS Identification Number	3330370				
PWS Type:		Non-Transient Non-Comm	unity [] I	ransient Non-Com		Consecutive	200				
Number of Service Connect					Total	Population Served at End of I	Month: 288				
PWS Owner: Contact Person:	Florida Water Service	es				AD LITTED	UD P				
	Craig Anderson	D.O. D (00520					VP Environmental Services	32860-9520			
Contact Person's Mailing A	. –.	P.O. Box 609520 (407) 598-4199			City: Orlando	State: Florida	Zip Code:	32800-9320			
Contact Person's Telephone Contact Person's E-Mail Ac		craiga@florida-water.com			Conta	ct Person's Fax Number:	(407) 598-4217				
3. Water Treatment Pla		craiga@nonda-water.com									
Plant Name:	Fern Terrace				***	Plant Telephone Number:	407-598-410	00			
Plant Address:	300 North Fern Drive				City: Leesburg	State: Florida	Zip Code:	32748			
Type of Water Treatment by		Raw Ground Water	Purchased Fin	iched Water	City. Leesburg	State. Florida	Zip Code.	32748			
Permitted Maximum Day C		_ ·	Furchaseu i in	129,600							
Plant Category (per subsect	<u> </u>		······································	125,000	Plant (class (per subsection 62-699.3	10(4), F.A.C.): D				
Licensed Operators	101 02 077.510(1),1.7	Name		License Class	License Number		(s) / Shift(s) Worked				
	Will Fountaine	Tune -	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	C	6813	Days 1st Shift	(b) / Dilite(b) II office				
Other Operators:	Brian Heath C 5825 Days 1st Shift										
omor operators.	John Worrell C 6597 Days 1st Shift										
	Gary Kissick			С	7846	Days 1st Shift					
	Mike Ponticelli			c	8450	Days 1st Shift					
			····································								
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						· · · · · · · · · · · · · · · · · · ·					
				· 	· · · · · · · · · · · · · · · · · · ·	<u></u>					
I Certification by Lead											
I, the undersigned wat	er treatment plant	operator licensed in Florida,	am the lead/chie	ef operator of the	e water treatment p	plant identified in part I	of this report. I certify	that the			
information provided	in this report is tru	e and accurate to the best of	my knowledge a	ind belief. I cert	ify that all drinkin	g water treatment chemi	icals used at this plant of	conform to NSF			
International Standard	60 or other applic	cable standards referenced in	subsection 62-5	55.320(3), F.A.	C. I also certify th	at the following addition	nal operations records t	for this plant			
		pperator staffed or visited this									
		orocess performance records.									
		report, at a convenient locati		-							
,	1	,		•							
		2/9/2004 0:00	Will Fountair	ne			C-6813				
Signature and Date			Printed or Ty				License Nur	mber			
5			7.	•							

Гет Тетасе

Plant Name:

3350370

											002,02			umixsM
											36,209		3	Avgenag
											1,122,467			IsoT
								1			L9E'SE	0.42		-16
	Þ'l								LI		24,200	24.0	X	30
	<i>p</i> ·1							_	LI		007,75	0.4.0	X	67
	8.0								€.1		007,15	0.42	X	87
	8.0								€.1		009,EE	0.42	Х	LZ
	1.1								5.1		£££,8£	24.0	X	97
											£££,8£	0.4.0		57
											EEE,8E	24.0		74
	8.0								£.1		006,82	24.0	X	73
	1.1			<u> </u>					S'I		006,25	24.0	X	77
	8.0						1		€.1		30,700	0.42	X	17
	0.1								þ'l		30,400	24.0	X	70
	2.1								<i>S</i> 'I		34,500	0.42	Х	61
											34,500	24.0		81
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	0.1								t'I		35,000	0.4.0	X	9
	6.0								£.1		41,800	24.0	X	ς
	<u> </u>										41,800	0.42	***	b
											008,14	24.0	Х	ε
	6.0								£.1		42,200	24.0	X	7
	2.1								5.1		43,000	0.4.0	X	I
arious risqO lo iuO	System, mg/L	zwo/oos	тМ-ѕес/ст		sldssilqqA ii	Water, "C	J/nim	səmuiu	Peak Flow, mg/L	Rate, gpd	gaj.	Ореганоп	("X"	Month
Involves Taking Water System Components	Distribution	-Wm		Required, mg	pH of Water,	rodunar	Flow, mg-	Peak Flow,	Customer During	Peak Flow	Producted,	uı	(Place	эцт
Conditions; Repair or Maintenance Work that	Remote Point in	Required,		TO muminiM		30 daloj	During Peak	Point During	Before or at First		Water	Hours plant	Operator	Day of
Emergency or Abnormal Operating	Concentration at	Dose UV Dose	Lowest	And the second second second			Customer	Measurement	Concentration (C)		bədzini To	, 11	Visited by	,
	Disinfectant	mount	100,110 1				First	O16(T)	Disinfectant		Net Quantity			
	Lowest Residual	muniniM		ELECTRICAL STREET			Before or at	Contact Time	The state of the s		Not Charles		To beffied or	
LE PERMIT	leubised travia I	Back Sugar I	AP INCHES		संदें संबंध प्रत				Lowest Residual		l		Days Plant	
							Provided	Disinfectant						
			。 2 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				Lowest CT				l,			1
					4,712,711 (1		~					1	1	
			Security Sec	515 W	- 28			CT Calcu	Same Parks			ļ [†]		
			*sldssilgq/	Ti noitsvii	Virus Inac	god-mo	T state F	UV Dose, to I	T Calculations, or)				
	əpixoi	Chlorine D	(s	(Chloramine	ed Chlorine	Combin	anin		bution System:	ned in Distr	nistnisM leu	tant Resid	ognisiQ Te	Type o
										. (Descupe):			traviolet R	-4
	(səun	зе (Срјогап	ined Chloriu	I Comp	euozo 🔟	ozige	Chlorine Dio	l amrour						- 1
	, · · · · · · · · · · · · · · · · · · ·	. 10/		· ~ -			Chies: - D.				Virus Inactiv			1
								January, 2004		:10	onth/Year	for the M	aily Data	III D

FWS ID:

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



See Pages 4 for Instru	uctions									
. General Information	for the Month/Y	ear of: February, 2	2004							
A. Public Water System	(PWS) Informa	tion								
PWS Name:	Fern Terrace					PWS Identification Number	r: 3350370			
PWS Type:	✓ Community	Non-Transient Non-Commu	nity T	ransient Non-Com	munity	Consecutive				
Number of Service Connect						d Population Served at End of	Month: 290			
PWS Owner:	Florida Water Service	es	***************************************				· · · · · · · · · · · · · · · · · · ·			
Contact Person:	Craig Anderson			·	Con	tact Person's Title:	VP Environmental Services	s		
Contact Person's Mailing A	ddress:	P.O. Box 609520			City: Orlando	State: Florida	Zip Code:	32860-9520		
Contact Person's Telephone	Number:	(407) 598-4199			Con	tact Person's Fax Number:	(407) 598-4217			
Contact Person's E-Mail Ad	ldress:	craiga@florida-water.com								
3. Water Treatment Pla	ant Information									
Plant Name:	Fern Terrace					Plant Telephone Number:	407-598-4			
Plant Address:	300 North Fern Drive	e			City: Leesburg	State: Florida	Zip Code:	32748		
Type of Water Treatment by	y Plant:	✓ Raw Ground Water	Purchased Fin	ished Water						
Permitted Maximum Day O				129,600						
Plant Category (per subsect	ion 62-699.310(4), F.		<u> </u>			Class (per subsection 62-699.3				
Licensed Operators		Name	i dia fito	License Class	License Number		y(s) / Shift(s) Worked			
	Will Fontaine			С	6813	Days 1st Shift				
Other Operators: Brian Heath C 5825 Days 1st Shift										
John Worrell C 6597 Days 1st Shift										
	Gary Kissick			C	7846	Days 1st Shift				
	Mike Ponticelli			C	8450	Days 1st Shift				
										
er e	·			ļ						
				 						
				 						
				 						
				<u> </u>	1					
I Certification by Lead	/Chief Operator	•								
		operator licensed in Florida,	am the lead/chie	of operator of the	water treatment	plant identified in part I	of this report. I certif	v that the		
		ue and accurate to the best of r								
		cable standards referenced in								
	oo or other appro	operator staffed or visited this		33.320(3), F.A.(dahara (1) maa	and of omounts of show	icals used and shamiss	ol food rotes; and		
		process performance records.			these additional	operations records to the	e PWS owner so the P	ws owner can		
retain them, together v	vith copies of this	report, at a convenient location	on for at least te	n years.						
		3/9/2004 0:00	Will Fontaine				C-6813			
Signature and Date			Printed or Ty				License No	umber		
- · · · · · · · · · · · · · · · · · · ·				,						

PWS IL):			3350370		Plant Name:	Fern Terrace							
III. D	H. Daily Data for the Month/Year of: February, 2004_													
			Virus Inactiv				Chlorine Die	oxide	Cope	Comb	ined Chloric	ne (Chloran	nines)	
1	raviolet Ra			r (Describe):	, .	•	-mornie Di		, ozone	1 Cont	and CHOID	(Cinoran	,	
F.					ibution System:	▽ Free Chlo	rine F	Combin	ed Chlorine	(Chloramine	s) [Chlorine I	Dioxide	
- ypc 0	1 13111100	Tune resid	idas ividintali		T Calculations, or									
				-				our-Log	virus mac	uvauon, n z	UVI			
			1.			CT Calc	ulations			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Post Redention of the analysis	Juse		
							Lowest CT		10.04					
				1		Disinfectant	Provided		Har ag		79			
	Days Plant Staffed or		NT-10	, j	Lowest Residual	Contact Time	Before or at					Minimum	Lowest Residual Disinfectant	
	Visited by		Net Quantity of Finished		Disinfectant Concentration (C)	(T) at C Measurement	First Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	- 1	Hours plant	Water		Before or at First	Point During	During Peak			Minimum CT	· 图像是20年 1864年 - 1707年	Required,	Remote Point in	Conditions; Repair or Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg	UY Dose,	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, ^O C	if Applicable	min/L	mW-sec/cm ²	sec/cm ²	System, mg/L	Out of Operation 7
1		24.0	53,050											
2	X	24,0 24.0	53,050		1.7		ļ		ļ		 -		1.3	
4	X	24.0	28,200 31,200		1.7						ļ		1.2	
5	X	24.0	28,300		1.5					<u> </u>			1.1	
-6	X	24.0	40,000		1.5								1.1	
7		24.0	37,933											
8		24.0	37,933											
9	X	24.0	37,933		1.7						L	<u></u>	1.3	
10	X	24.0	45,600		1.6						 		1.2	
11	X	24.0 24.0	45,800		1.4								1.0	
13	X	24.0	31,000 37,200		1.6					<u> </u>			1.3	
14		24.0	34,867		1.0		<u> </u>							
15		24.0	34,867											
16	Х	24.0	34,867		1.4								0.9	
17	X	24.0	35,400		1.0					ļ			0.7	
18	X	24.0	29,800		1.2		<u> </u>						0.8	
19 20	X	24.0	32,500		1.2		ļ		 	 	<u> </u>	<u> </u>	0.8	
21	X	24.0 24.0	30,800 40,867		1.3				<u> </u>				0.9	
22		24.0	40,867					<u> </u>		 			 	
23	X	24.0	40,867		1.0								0.7	
24	X	24.0	36,900		1.2								0.8	
25	X	24.0	27,900		1.0								0,6	
26	X	24.0	29,400		1.1								0.8	
27	X	24.0	37,400		1.2			ļ					0.8	
28		24.0	36,067 36,067					 -			 			
23		24.0	30,007	 	-			 		 	 	 	 	
<u> </u>				<u> </u>			 		 	 		 		
Total	<u></u>	<u> </u>	1,066,633						4	1	·	·····		
Аудегад	е		36,780]										
Maximu			53,050	1										

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



See Pages 4 for Instru								
. General Information	for the Month/	Year of: March, 200	4]
A. Public Water System	(PWS) Informa	ation		•				
	Fern Terrace					PWS Identification Number:	3350370	
PWS Type:	✓ Community	✓ Non-Transient Non-Commu	nity T	ransient Non-Com	munity	Consecutive		
Number of Service Connect		h: 123			To	otal Population Served at End of Mo	nth: 288	
PWS Owner:	Florida Water Servi	ces						
Contact Person:	Craig Anderson				C	ontact Person's Title: VP	Environmental Services	
Contact Person's Mailing A	ddress:	P.O. Box 609520			City: Orlando	State: Florida	Zip Code:	32860-9520
Contact Person's Telephone	Number:	(407) 598-4199			C	ontact Person's Fax Number: (40	7) 598-4217	
Contact Person's E-Mail Ad	ldress:	craiga@florida-water.com						-
3. Water Treatment Pla	ant Information							
Plant Name:	Fern Terrace					Plant Telephone Number:	407-598-410)0
Plant Address:	300 North Fern Driv	ve			City: Leesburg	State: Florida	Zip Code:	32748
Type of Water Treatment by	y Plant:	✓ Raw Ground Water	Purchased Fin	nished Water				
Permitted Maximum Day O	perating Capacity of	Plant, gallons per day:		129,600				
Plant Category (per subsecti	ion 62-699.310(4), F	.A.C.): V	<u></u>			nt Class (per subsection 62-699.310		
Licensed Operators		Name		License Class	License Num) / Shift(s) Worked	
Lead/Chief Operator:	Will Fontaine			С	6813	Days 1st Shift		
Other Operators:	Brian Heath			С	5825	Days 1st Shift		
	John Worrell			С	6597	Days 1st Shift		
	Gary Kissick			С	7846	Days 1st Shift		
	Adam Michaelsen				Ттаілее	Days 1st Shift		
							·	
			- <u>- , </u>					
	<u> </u>			1	<u> </u>			
I Certification by Lead	UChief Operate							
		at operator licensed in Florida,	ame the lead/abi	of an arotar of the	viotor traatma	at plant identified in part I of	this report Legify	that the
i, the undersigned wat	er treatment plan	it operator licensed in Florida,	am the lead/chi	er operator of the	: water treatme	in plant identified in part 1 of	da usad at this plant o	conform to NCE
information provided	in this report is ti	rue and accurate to the best of r	my knowledge a	and belief. I cert	iry that all drin	king water treatment chemica	iis used at uns plant d	Constitutions:
International Standard	l 60 or other appl	icable standards referenced in	subsection 62-5	55.320(3), F.A.	. I also certify	that the following additiona	operations records i	or this plant
were prepared each da	ny that a licensed	operator staffed or visited this	plant during the	e month indicate	d above: (1) re	cords of amounts of chemica	ils used and chemical	feed rates; and
		process performance records.			these addition	al operations records to the P	WS owner so the PW	/S owner can
retain them, together v	with copies of thi	s report, at a convenient location	on for at least te	en years.				
		4/8/2004 0:00	Will Fontaine	e			C-6813	
Signature and Date		11012001 0.00	Printed or Ty				License Nur	nber
Signature and Date			rimed of Ty	ped Name			Estection Page	

PWS II);			3350370	· · · · · · · · · · · · · · · · · · ·	Plant Name:	Fern Terrace	e						
	aily Data	for the N	lonth/Year	of:		March, 2004								
_			g Virus Inacti		val: ▼ Free C	· · · · · · · · · · · · · · · · · · ·								
	traviolet R			er (Describe):		niorine 1	Chlorine Di	ioxide	C Ozone	☐ Comb	oined Chlori	ne (Chlorar	nines)	
Ε'								_						
Type (of Disinfe	ctant Resid	dual Maintai	ned in Distr	ibution System:	▼ Free Chk	orine [Combir	ned Chlorine	(Chloramine	es)	Chlorine I	Dioxide	
				C	CT Calculations, or	UV Dose, to	Demostate	Four-Log	Virus Inac	tivation, if	Applicable	•		
				4 M 5 5			culations			The second second second second	UV			
								F						
							Lowest CT							
	Davis Blant				7 10 1	Disinfectant	Provided							
	Days Plant Staffed or		Not Oversity		Lowest Residual Disinfectant	Contact Time	Before or at					Minimum	Lowest Residual	
	Visited by		Net Quantity of Finished	1	Concentration (C)	(T) at C Measurement	First Customer				Lowest	UV Dose	Disinfectant Concentration at	Emergency or Abnormal Operating
Day of		Hours plant	The state of the s		Before or at First	Point During	During Peak			Minimum CT	# 47 A. T	Required,	Remote Point in	
the	(Place	in	Producted	Peak Flow	Customer During	Peak Flow	Flow, mg-		pH of Water	Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1	Х	24.0	36,066		1.2								0.8	
2	X	24.0	33,000		1.1					İ			0.7	
3	X	24.0	36,200		1.1								0.7	
4	Х	24.0	33,000		1.1								0.7	
5	Х	24.0	34,000		1.0			<u> </u>		ļ			0.7	
6		24.0	43,100							<u>.</u>				
7 8	7,	24.0	43,100	ļ — — — — — — — — — — — — — — — — — — —			ļ	ļ		ļ			ļ	
9	X	24.0	43,100		1.3			ł	ļ	ļ	 	<u> </u>	0.9	
10	X	24.0	36,300		1.0		 	 					0.6	
11	X	24.0	54,200 36,500		1.0	ļ	 		 	 			0.6	
12	X	24.0	45,200	 	1.1		 	 	 	 	ļ		0.9	
13		24.0	48,733	<u> </u>	***		-	 	<u> </u>	1			0.0	
14		24.0	48,733					1			 			
15	Х	24.0	48,733	†	1.1					İ			0.7	
16	Х	24.0	37,000		1.0			İ					0.6	
17	X	24.0	36,000		1.0								0.7	
18	X	24.0	35,000		1.3								0.9	
19	Х	24.0	28,200		1.1								0.8	
20		24.0	46,000							<u> </u>			1	
21		24.0	46,000	L										
22	X	24.0	46,000		1.0		ļ	ļ	 	ļ			0.6	
23	X	24.0	40,100		1.0			ļ					0.7	
25	X	24.0 24.0	46,700 36,500	 	1.1	·	 	<u> </u>		ļ	<u> </u>		0.7	
26	X	24.0	36,500		1.1		 	 				ļ	0.8	
27	_^_	24.0	50,700				1				 		0,8	
28		24.0	50,700	 	 			†			 	 	† · · · · · · · ·	
29	Х	24.0	50,700	 	2.0		 	 					1,7	
30	X	24.0	36,600	l — —	2.0			 			<u> </u>	 	1.7	
31	Х	24.0	42,200		2.0								1.6	
Total		•	1,284,966			-	•	-		•	•			
Avgerag			41,451]										
Maxim			54,200	1										

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



See Pages 4 for Instr								
. General Information	for the Month/	Year of: April, 2004						
A. Public Water Systen	n (PWS) Informa	ition						
PWS Name:	Fern Terrace					PWS Identification Numb	per: 33503	370
PWS Type:	✓ Community	Non-Transient Non-Commu	nity Tr	ransient Non-Com	munity	Consecutive		
Number of Service Connec	tions at End of Month	124				Total Population Served at End o	of Month: 290	
PWS Owner:	Florida Water Service	ces						
Contact Person:	Craig Anderson			***************************************		Contact Person's Title:	VP Environmental Ser	rvices
Contact Person's Mailing A	\ddress:	P.O. Box 609520			City: Orlando	State: Florida	Zip C	ode: 32860-9520
Contact Person's Telephone	e Number:	(407) 598-4199				Contact Person's Fax Number:	(407) 598-4217	
Contact Person's E-Mail A		craiga@florida-water.com						
3. Water Treatment Pl	ant Information							
Plant Name:	Fern Terrace					Plant Telephone Number:	407-5	98-4100
Plant Address:	300 North Fern Driv	re			City: Leesbur	g State: Florida	Zip C	ode: 32748
Type of Water Treatment b		✓ Raw Ground Water	Purchased Fini	shed Water				
Permitted Maximum Day (129,600				
Plant Category (per subsect	tion 62-699.310(4), F	.A.C.): V			P	lant Class (per subsection 62-699	0.310(4), F.A.C.):	D
Licensed Operators	Carry 1	Name		License Class	License Nur	nber Da	ay(s) / Shift(s) Worl	ked
				С	6813	Days 1st Shift		
Other Operators:	Brian Heath			С	5825	Days 1st Shift		
	John Worrell			С	6597	Days 1st Shift		
	Gary Kissick			С	7846	Days 1st Shift		
· 图 · · · · · · · · · · · · · · · · · ·	Adam Michaelsen				Trainee	Days 1st Shift		
							· <u>· · · · · · · · · · · · · · · · · · </u>	
			_					
								·····
	1							
l Certification by Lead	d/Chief Onewate	••						
			4b - 1 4/-b	£			I -Cal-is Y as	
		t operator licensed in Florida, a						
_	-	ue and accurate to the best of n			•	-	_	
		cable standards referenced in s				•	•	•
		operator staffed or visited this						
		process performance records.			these additio	nal operations records to the	ne PWS owner so th	ne PWS owner can
retain them, together v	with copies of this	report, at a convenient locatio	n for at least ten	years.				
		5/7/2004 0:00	Will Fontaine				<u>C-681</u>	
Signature and Date			Printed or Typ	ed Name			Licens	se Number

PWS II	PWS ID: 3350370 Plant Name: Fern Terrace													
III. D	III. Daily Data for the Month/Year of: April, 2004													
	_	-	y Virus Inactiv		ral: ▼ Free C		Chlorine Di		<u> </u>			(CL)		
1	raviolet R		-	r (Describe):		morne j	Chiorine Di	oxide	☐ Ozone	☐ Comb	oined Chlorii	ne (Chiorar	nines)	
-						T F GD	·	Cambin	- d Cl l	(Chloramine	<u>. </u>	Chlorine I	>: · 1	
Type o	Disinted	ctant Resid	luai Maintaii		ibution System:	▼ Free Chlo					• -		Jioxide	
				C	T Calculations, or									
	1.5					CT Calc	ulations			· 特别	·UV	Dose		
ļ .							Lowest CT					45		
		2.				Disinfectant	Provided				W.,	4		
	Days Plant	1 19			Lowest Residual	Contact Time	Before or at						Lowest Residual	
7.5	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of		Hours plant			Before or at First	Point During	During Peak	ogen (vilt. (t. 14)		Minimum CI		Required, mW-		Conditions, Repair or Maintenance Work that
the Month	(Place	in Operation	Producted,	Peak Flow Rate, gpd.	Customer During Peak Flow, mg/L	Peak Flow, minutes	Flow, mg- min/L	Temp or	pH of Water,	Required, mg min/L	UV Dose, mW-sec/cm ²	sec/cm ²	Distribution System, mg/L	Involves Taking Water System Components Out of Operation
1	X	24.0	44,350	Kaic, gpu.	1.2	nimutes	HIHAE	water,	п Аррисавіс	aimhr: 33	mw-sec/cm	sec/cm	0.9	Out of Operation
2	X	24.0	44,350		1.1							<u> </u>	0.9	
3		24.0	45,233									 	0.2	
4		24.0	45,233							1				
. 5	X	24.0	45,233		1.4								1.0	
6	X	24.0	42,700		1.3								0.8	
7	Х	24.0	49,600		1.4								1.0	
8	X	24.0	44,600		1.2								1.0	
9 10	X	24.0	42,900		1.3			ļ					0.9	
11		24.0 24.0	51,533 51,533					 			 			
12	Х	24.0	51,533		1.7			 			 		1.3	
13	X	24.0	32,300		1.7							_	1.4	
14	Х	24.0	32,000		1.8								1.4	
15	Х	24.0	27,600		1.4								1.0	
16	Х	24.0	47,300		1.3								0.8	
17		24.0	47,267											
18		24.0	47,267					 					1	
19	X	24.0	47,267 57,900		1.5			ļ				ļ	1.1	
21	X	24.0 24.0	57,900 58,600		1.4			-					0.8	
22	X	24.0	48,700		1.3			ļ				 	1.0	
23	X	24.0	44,600		1.2					-			0.9	
24		24.0	55,667			· · · · · · · · · · · · · · · · · · ·								
25		24.0	55,667	**										
26	X	24.0	55,667		1.4								1.0	
27.	X	24.0	61,400		1.4								0.9	
.28	X	24.0	41,600		1.4								0.9	
29	X	24.0	59,500		1.3								0.9	
30	X	24.0	43,000		1.4								1.0	
Total		L	1,422,100				L	L	<u> </u>	l	<u> </u>	L	<u> </u>	
1001		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1,422,100											

61,400

Maximum

[•] Refer to the instructions for this report to determine which plants must provide this information.



See Pages 4 for Instru									
l. General Information	for the Month/Year of: May, 2004								
A. Public Water System	(PWS) Information								
	Fern Terrace			PWS Identification Number:	3350370				
PWS Type:	✓ Community Non-Transient Non-Community	Transient Non-Comm	nunity	Consecutive					
Number of Service Connect				Population Served at End of Month:	290				
	Florida Water Services								
	Craig Anderson		Contac	ct Person's Title: VP Enviro	nmental Services				
Contact Person's Mailing Ac			City: Orlando	State: Florida	Zip Code: 32860-9520				
Contact Person's Telephone				et Person's Fax Number: (407) 598-	4217				
Contact Person's E-Mail Ad	dress: craiga@florida-water.com								
B. Water Treatment Pla									
Plant Name:	Fern Terrace			Plant Telephone Number:	407-598-4100				
Plant Address:	300 North Fern Drive		City: Leesburg	State: Florida	Zip Code: 32748				
Type of Water Treatment by	Plant:	Purchased Finished Water							
Permitted Maximum Day O	perating Capacity of Plant, gallons per day:	129,600							
Plant Category (per subsecti	on 62-699.310(4), F.A.C.):		. Plant Cl	ass (per subsection 62-699.310(4), F.A					
Licensed Operators	Name	License Class	License Number	Day(s) / Shi	ft(s) Worked				
Lead/Chief Operator:									
Other Operators:	Brian Heath	С	5825	Days 1st Shift					
	John Worrell C 6597 Days 1st Shift								
the second of the second of	Gary Kissick	C	7846	Days 1st Shift					
	Adam Michaelsen		Trainee	Days 1st Shift					
u e									
	· · · · · · · · · · · · · · · · · · ·								
			·						
II Cantilliantian builtan	VCI: CO								
II Certification by Lead		d 1 1/1: C 64		I	Itife that the				
	er treatment plant operator licensed in Florida, am								
	n this report is true and accurate to the best of my								
	60 or other applicable standards referenced in sub								
were prepared each da	y that a licensed operator staffed or visited this pla	ant during the month indicated	l above: (1) recor	ds of amounts of chemicals used	d and chemical feed rates; and				
	opriate treatment process performance records. Fur		these additional o	perations records to the PWS or	wner so the PWS owner can				
retain them, together w	vith copies of this report, at a convenient location f	for at least ten years.							
	6/8/2004 0:00	Will Fontaine			C-6813				
Signature and Date	0.0720010.00	Printed or Typed Name			License Number				
orginature and Date		Timed of Typed Ivalie			Sivinge Pullion				

Page 1

DEP Form 62-555 900(3)Alternate

									006,59	mumixeM				
											Avgerage 48,613			
											1,507,000		1.450	IstoT
	0.1		L						7.1		005,26	0.42	Х	1.5
											005,20	24.0		30
											002,50	24.0		67
	7.1								LT		006,59	0.4.0	X	82
	0.1							_	₽'I		006,£8	24.0	Х	LT
·	7.1							1	LI		000,82	24.0	Х	97
	£.1								LI		005,02	24.0	Х	. 52
	£.1			T					LI		L99'6S	24.0	X	74
											L99'65	24.0		23
											L99'6S	24.0		77
	0.1	1							S.I	· · · · · · · · · · · · · · · · · · ·	008,84	24.0	Х	17
	1.2								91		001'68	24.0	X	07
	£.1						i		8.1		000,62	24.0	X	61
	£.I								L'I		000,54	24.0	X	18
	I'I						 		8.1		L98'67	24.0	X	<u> </u>
		 	 				l				L98'67	24.0		91
					 		l	 			L98'67	24.0	-	- 91 - 12
	91		 	 	 	 	 		0.2		001,86	24.0	х	71 71
	£.1				 				<i>L</i> '1		001'95	24.0	X	
	2.1		 						9'1	ļ	43,200	24.0		εı
	2.1	 		<u> </u>		<u> </u>							X	71
	6.0	l	 	 	 	<u> </u>	 		9 l 7 l		42,500	24.0	X	11
	00		 			<u> </u>			71		L9†'9†	24.0	Х	10
						ļ <u>.</u>	ļ				L97'97	24.0		6
	0.0	 	_	ļ <u>.</u>		 		ļ			L97'97	24.0		8
	8.0				ļ	ļ			€.1		009,74	24.0	X	L
	8.0		ļ	ļ		.		<u> </u>	€.1	· · · · · · · · · · · · · · · · · · ·	007,88	0.4.0	X	9
	0.1			ļ	L	L			5.1		29,200	0.4.0	X	ς
	£.1	ļ	ļ		ļ. <u></u>				8.1		32,700	24.0	X	*
	1.1	ļ <u>.</u>				ļ <u>.</u>			5.1		792,75	24.0	X	ε
			ļ		ļ						L97, TE	24.0		7
A. A. A. A. A. A. A. A. A. A. A. A. A. A					L						792,7£	0.4.0		I
nouningO to nO	System, mg/L	zmɔ/ɔəs	^z mɔ/ɔəɛ-Wm	Jana -	oldsoilggA li	Water, OC	. Jaim	səmum	Peak Flow, mg/L	Rate, gpd.	Lag	Operation	("X"	Month
Anyolyes Taking Water System Components	nomidmisid	-Wm		Required, mg		Temp of	-gm,wol4	Peak Flow,	Customer During	Peak Flow	Producted,	ui	(Place	the
Conditions; Repair or Maintenance Work that		Required,	Operating	Minimum CT			During Peak	garmG taio9	Before or at First		Water	Hours plant	Орегают	Day of
Emergency of Abnormal Operating	Concentration at	UV Dose	Lowest				Этототги	Measurement	Concentration (C)		bodzini4 to		vd botiziV	100
	Disinfectant	muminiM					First	Ons (T)	Disinfectant		Net Quantity		Staffed or	
	Lowest Residual						Before or at	Contact Time	Lowest Residual				Days Plant	
							bebivor	Disinfectant		N				
							Lowest CT	1.00						
그러 그 이번 살으면 하는 항상분명 인보통속 폭력 보고 이 성속하는 물이 없고라고하였다.		2000	1.0					Mana To						
			IWI		12 x 6 x 6 15 1 1 1 1 1 1 1 1 1	An indicated a filled		CT Calca		4 11,1 38 cg				
			*sldssilqq	ivation, if	Virus Inaci	20/1-mo	Jemostate I	UV Dose, to I	T Calculations, or	O				3.5
ype of Disinfectant Residual Maintained in Distribution System: 🔽 Free Chlorine 🗆 Combined Chlorine (Chloramines)														1 Abe o
	Type of Disinfectant Residual Maintained in Distribution System: Ultraviolet Residual Maintained in Distribution System: Ease Oblogies Compileed Oblogies Coloring Distribution System:													
	(sauu	ic (Chioran	шеа съроци	Сошр	20070	anivo	NA SILIONIA	1						
	(souir						in eninold)	hlorine	Den T Free C	vation/Remov	vibsent suriV ;	ig Four-Log	iivəidəA To	Means
								May, 2004		:to	outh/Year	(4) off the	siky Data	III D
							Бет Тепасе	Plant Mame:		3350370			(II SMd

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



See Pages 4 for Instr										
I. General Information	for the Month/	Year of: June, 2004								
A. Public Water System	ı (PWS) Informa	ıtion								
PWS Name:	Fern Terrace						PWS Identification Number	: 33	50370	
PWS Type:	✓ Community	Non-Transient Non-Commu	unity T	ransient Non-Comi	munity		Consecutive			
Number of Service Connect	tions at End of Month	n: 119				Total I	Population Served at End of	Month: 27	18	
PWS Owner:	Florida Water Service	æs								
Contact Person:	Craig Anderson					Contac	et Person's Title:	VP Environmental	Services	
Contact Person's Mailing A	Address:	P.O. Box 609520			City:	Orlando	State: Florida	Zi	p Code:	32860-9520
Contact Person's Telephone	Number:	(407) 598-4199					et Person's Fax Number:	(407) 598-4217		
Contact Person's E-Mail Ad	ddress:	craiga@florida-water.com						· · · · · · · · · · · · · · · · · · ·		
B. Water Treatment Pla	ant Information									
Plant Name:	Fern Terrace						Plant Telephone Number:	40	7-598-410	0
Plant Address:	300 North Fern Driv				City:	Leesburg	State: Florida	Zi	p Code:	32748
Type of Water Treatment by	7	✓ Raw Ground Water	Purchased Fini	shed Water						
Permitted Maximum Day O				129,600						
Plant Category (per subsect	ion 62-699.310(4), F.	A.C.); V					ass (per subsection 62-699.3		D	
Licensed Operators		Name		License Class	Lice	nse Number	Jay Day	(s) / Shift(s) W	orked	
Lead/Chief Operator:	Will Fontaine			C		6813	Days 1st Shift			
Other Operators:	Brian Heath			С		5825	Days 1st Shift			
	John Worrell			C		6597	Days 1st Shift			
	Gary Kissick			C		7846	Days 1st Shift			
	Adam Michealsen -	Trainee					Days 1st Shift			
			·							
			····							
						- 1				
II. Certification by Lead	I/Chief Operator									
			41 - 1 4/-1:	C C41				Cili	T	
		operator licensed in Florida, a								
		ue and accurate to the best of r								
		cable standards referenced in s								
		operator staffed or visited this								
		process performance records.			these	additional of	perations records to the	PWS owner so	the PW	S owner can
retain them, together w	vith copies of this	report, at a convenient locatio	on for at least ten	years.						
			Will Fontaine					C	6813	
Signature and Date			Printed or Typ	ad Nama						1
Signature and Date			rinned of Typ	ed ivallie				Li	cense Num	Der

PWS II	D:			3350370	·	Plant Name:	Fern Terrace	2		· - · · · - · · · · · · · · · · · · · ·		-		
		for the N	lonth/Year											
				-		June, 2004								
		_	g Virus Inactiv		· ·	Chlorine	Chlorine Di	ioxide	☐ Ozone	☐ Comb	oined Chlori	ne (Chlorar	nines)	
ווי דו	traviolet R	adiation	C Othe	r (Describe):										
Туре с	of Disinfee	ctant Resid	dual Maintai	ned in Distr	ibution System:	▼ Free Chle	orine [Combin	ed Chlorine	(Chloramine	es) Γ	Chlorine I	Dioxide	
			I	C	T Calculations, or	UV Dose, to	Demostate 1	Four-Los	Virus Inac	tivation if	Applicable	taga a sa sa sa		
		•				, CT Calc					ÚV			
						l a	I	1				l		선생님 그리는 바람이 맛있다면서?
1		1					Lowest CT	1						[작용 기업 기업 기업 기업 기업 기업 기업 기업 기업 기업 기업 기업 기업
	, n					Disinfectant	Provided					44.		
	Days Plant Staffed or		N. 6	100	Lowest Residual	Contact Time	Before or at						Lowest Residual	
	Visited by		Net Quantity of Finished		Disinfectant Concentration (C)	(T) at C	First				Lowest	Minimum UV Dose		
Day of	Operator	Hours plant	i .		Before or at First	Measurement Point During	Customer During Peak			Minimum CI		Required,	Concentration at	
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	nH of Water	Required, mg	UV Dose,	mW-	Remote Point in Distribution	Conditions, Repair or Maintenance Work that Involves Taking Water System Components
Month	`"X")	Operation	gal	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
.1	Х	24.0	77,000		1.4		<u> </u>	 		1000		, pour one, care	1.0	Supplied the supplied to the s
2	X	24.0	67,400		1.4								1.0	
3_	X	24.0			1.6								1.2	
4	X	24.0			1.4								0.9	
5		24.0	+ - · - · ·		1.2								0.8	
7		24.0	37,600					ļ						
8	X	24.0	37,600		1,3		ļ						0.9	
9	X	24.0 24.0	36,000		1.4								1.0	
10	X	24.0	36,700 41,600		1.2			 	ļ		ļ		1.3	
11	X	24.0	29,300		1.5					-	<u> </u>		1,2	
12		24.0			1.5						<u> </u>		1.2	
13		24.0	40,333					<u> </u>	<u> </u>	 				
14	Х	24.0			1.4								1.0	
15	Х	24.0	33,700		1.4					<u> </u>			1.1	
16	Х	24.0			1.4							<u> </u>	1.0	
17	Х	24.0	36,500		1.4								1.0	
18	X	24.0			1.4								1.0	
19		24.0												
20		24.0								ļ				
21	X	24.0			1.3			-		ļ			0.9	
23	X	24.0 24.0	31,800 44,200		1.4 1.5			 			<u> </u>		1.0	
24	$\frac{\hat{x}}{x}$	24.0			1.3					<u> </u>		ļ	I.2 1.0	
25	X	24.0	· · · · · · · · · · · · · · · · · · ·		1.4						<u> </u>		1.0	
26		24.0			1.7					ļ	ļ		1.0	
27	•	24.0								<u> </u>				
28	Х	24.0	38,733		1.2	-					<u> </u>		0.8	
29	X	24.0	31,200		1.2								0.8	
30	X	24.0	49,500		1.2								0.9	
Total	<u> </u>		1,239,800											
Avgerag			41,327											
Maximu	m		77,000											

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



See Pages 4 for Instru								
l. General Information	for the Month/Y	'ear of: July, 2004						
A. Public Water System	(PWS) Informa	tion						
PWS Name:	Fern Terrace					PWS Identification Number:	3350370	
PWS Type:	✓ Community	Non-Transient Non-Commu	nity Tr	ransient Non-Com	munity	Consecutive		
Number of Service Connect	ions at End of Month				То	tal Population Served at End of Mo	onth: 278	
PWS Owner:	Aqua Utilities Florid	a			L			
Contact Person:	Brian Heath				Co	ntact Person's Title: Are	ea Manager	
Contact Person's Mailing A	ddress:	2315 Griffing Road			City: Leesburg	State: Florida	Zip Code:	34748
Contact Person's Telephone	Number:	(352) 787-0980			Co	ntact Person's Fax Number: (35	52) 787-6333	
Contact Person's E-Mail Ad		beheath@aquaamerica.cor	<u>n</u>				· · · · · · · · · · · · · · · · · · ·	
B. Water Treatment Pla	int Information							
Plant Name:	Fern Terrace					Plant Telephone Number:	407-598-410	00
Plant Address:	300 North Fern Drive	e			City: Leesburg	State: Florida	Zip Code:	32748
Type of Water Treatment by	/ Plant:	✓ Raw Ground Water	Purchased Fini	shed Water				
Permitted Maximum Day O				129,600				
Plant Category (per subsecti		A.C.): V			Plan	t Class (per subsection 62-699.310	(4), F.A.C.): D	
Licensed Operators		Name		License Class	License Numb	er Day(s) / Shift(s) Worked	产生的一种
Lead/Chief Operator:	Will Fontaine			С	6813	Days 1st Shift		
	Brian Heath			С	5825	Days 1st Shift		
	John Worrell			С	6597	Days 1st Shift		
				<u> </u>				
II Certification by Lead	Chief Operator	~						
		operator licensed in Florida, a	m the lead/abia	f anaratar of the		t plant identified in part I of	this report I cortifu	that the
_	-	ue and accurate to the best of n			•	•	•	
		cable standards referenced in s			•	•	•	•
		operator staffed or visited this						
		process performance records.			these additiona	I operations records to the P	WS owner so the PV	VS owner can
retain them, together w	vith copies of this	report, at a convenient locatio	n for at least ter	years.				
			Will Fontaine				C-6813	
Signature and Date			Printed or Typ	ed Name			License Nur	nber

Fem Тепасе

Plant Name:

3350370

											009,72		cur	Maximu
											917,95		. 9	двтэgvA
											1,231,000			IntoT
											41,200	0.42		Iε
	† 0								9.0		007,84	24.0	X	30
	7 '0								9.0		45,400	24.0	X	67
	2.0								L.0		45,500	0.4.0	X	82
	τl								LI		008,85	0.4.0	X	LZ
	T.0								01		L95'LV	0.4.0	X	56
											L95'Lb	24.0		57
											L95°L\$	24.0		74
	1.2								S.1		28,500	24.0	X	23
	£.1								9.1		95,360	24.0	X	77
	£'1 .								T.I		41,900	24.0	X	17
	7.1								9.1			0.4.0	X	70
	7.1								S.I		00£,8£	24.0	X	· 61
											00£,85	24.0		81
											00£,8£	24.0		LI
	1.1					L			5.1		006,88	24.0	X	91
	1.2								S.I		007,14	24.0	X	SI
	t I								L'I		005'18	24.0	X	ÞΙ
	1.3								9.1		005,54	24.0	X	£I
	£.1								L'I		291,24	24.0	X	71
											761,24	0.42		11
											761,24	24.0		01
	1.2								91		35,400	24.0	X	6
	νΊ								LI	.,,	34,500	24.0	X	8
	€,1								LI		001,72	24.0	X	. L
	5,1								91		38,900	24.0	X	9
	1.2								9 I		797,25	24.0	X	ς
											797,2£	24.0		7
											797,55	0.42		ε
	11								S.I		005,64	24.0	X	7
	7.1								S.I		009,72	24.0	X	%: L ;
Emergency or Abnormal Operating: Conditions, Repair or 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, mW- sectom ²	isowo.i	T⊃ muminiM gm ¦bənupəA `Mum	pH of Water, if Applicable		Lowest CT Provided Before or at First Customer During Peak Flow, mg-	Disinfectant Contact Time (T) at C (T) at C Measurement Point During Poak Flow,	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Customer During	Peak Flow Kate, gpd	Met Quantity of Finished Water Producted,	insiq swoH ni noits19qO	Days Plant Staffed or Visited by Operator (Place	Day of the Month
			IΛΩ								1			
CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*														
	əpixoide	Chlorine D	J (s	(Chloramine	ed Chlorine	Combin	arine	☑ Free Chlo.	bution System:	ned in Distri	ristnisM lsu	tant Resid	oolnisin fe	Type o
											L Otpe		raviolet Ra	+
	(səuit	е (Срюгая	ined Chloriu	L Comb	orone	əpixo	Chlorine Die	norme [
			_					5002 , ylut		:10	res'(\dino	M adi not	eirO vlis	u III

PWS ID:

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



See Pages 4 for Instru								
. General Information	for the Month/Y	ear of: August, 20	004					
A. Public Water System	(PWS) Informat	ion						
PWS Name:	Fern Terrace					PWS Identification Number:	3350370	
PWS Type:	✓ Community	Non-Transient Non-Commu	unity T	ransient Non-Com	munity	Consecutive		
Number of Service Connect	ions at End of Month:	119			Total	Population Served at End of M	fonth: 278	
PWS Owner:	Aqua Utilities Florida	ı				···		
Contact Person:	Brian Heath				Cont	act Person's Title: A	Area Manager	
Contact Person's Mailing A	ddress: 2	2315 Griffing Road			City: Leesburg	State: Florida	Zip Code:	34748
Contact Person's Telephone	Number: (352) 787-0980			Cont	act Person's Fax Number: (3	352) 787-6333	
Contact Person's E-Mail Ad	dress: <u>t</u>	peheath@aquaamerica.co	<u>m</u>					
3. Water Treatment Pla	int Information							
Plant Name:	Fern Terrace					Plant Telephone Number:	407-598-41	00
Plant Address:	300 North Fern Drive				City: Leesburg	State: Florida	Zip Code:	32748
Type of Water Treatment by		✓ Raw Ground Water	Purchased Fin	ished Water				
Permitted Maximum Day O				129,600				
Plant Category (per subsecti	on 62-699.310(4), F.A					Class (per subsection 62-699.31		
Licensed Operators		Name		License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:				С	6813	Days 1st Shift		
Other Operators:	Brian Heath			С	5825	Days 1st Shift		
A NA Exit of the	John Worrell			С	6597	Days 1st Shift		
	 							
friend the second								
						<u></u>		
				<u> </u>		<u> </u>		
				<u> </u>				
I Certification by Lead	/Chief Operator						<u> </u>	
		operator licensed in Florida,	am the lead/chie	f operator of the	water treatment	plant identified in part I o	of this report. I certify	that the
		e and accurate to the best of the						
		able standards referenced in						
		perator staffed or visited this						
		rocess performance records.			tnese additional	operations records to the	PW5 owner so the PV	v5 owner can
retain them, together w	in copies of this r	report, at a convenient location	on for at least ter	n years.				
			Will Fontaine				C-6813	
Signature and Date			Printed or Typ				License Nu	mber

PWS I):			3350370		Plant Name:	Fern Terrace	:			-			
П	aily Data	for the N	lonth/Year	of•		August, 2004								
			g Virus Inactiv		ul Ein o									
						niorine [Chlorine Di	oxide	☐ Ozone	Comb	oined Chlorii	ne (Chloran	nines)	
-	traviolet R			г (Describe):										
Type	of Disinfeo	ctant Resid	lual Maintai	ned in Distr	ibution System:	▼ Free Chlo	rine [Combin	ed Chlorine	(Chloramine	es) Γ	Chlorine I	Dioxide	
				C	CT Calculations, or	UV Dose, to I	Demostate l	Four-Log	Virus Inac	tivation, if	Applicable		19240.7432	
	75					CT Calc					UV			
						94,041 340	N. 19 1 45 2 1 20 3		T			100 A 100 A		
							Lowest CT	7.54 pt	į.				14.	
	Days Plant				Lowest Residual	Disinfectant Contact Time	Provided Before or at	198]			The first of the second	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Lowest Residual Disinfectant	
1,500	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator	Hours plant			Before or at First	Point During	During Peak	Self file		Minimum CT		Required,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Conditions; Repair or Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg		mW-	Distribution :	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1		24.0	61,750											
2	X	24.0	61,750		0.9								0.7	
4	X X	24.0	34,600		1.2						ļ <u>.</u>		0.9	
5	X	24.0 24.0	45,100 27,000		1.4			-	ļ				1.0	
6	X	24.0	48,700		1.2								1.0	
7	_ ^-	24.0	43,600		1.5		-				ļ		1.0	
8		24.0	43,600					<u> </u>			-			
9	Х	24.0	43,600		1.2						 		1.0	
10	Х	24.0	28,400		1.1								0.8	
11	X	24.0	41,400		0.8	·							0.7	
12	X	24.0	26,300		1.0								0.8	
13	X	24.0	32,600		1.1								0.9	
14	X	24.0	35,000		1.1								0.8	
15 16	- 1/	24.0	32,500		0.0									
17	X	24,0 24.0	32,500 36,100		0.7						ļ		0.6	
18	X	24.0	22,600		1.0					ļ			0.9	
19	X	24.0	34,900		1.1								0.9	
20	$\frac{\lambda}{X}$	24.0	27,800		0.9								0.8	
21		24.0	38,067										· · · · · ·	· · · · · · · · · · · · · · · · · · ·
22		24.0	38,067					-		<u> </u>	<u> </u>			
23	Х	24.0	38,067		0.7								0.5	
24	X	24.0	28,600		1.2								0.9	
25	X	24.0	33,800		1.3								1.0	
26	X	24.0	26,600		1.3								1.3	
27	X	24.0	31,100		1.0								0.9	
28		24.0	37,533											
30	х	24.0 24.0	37,533 37,533		1.1					ļ	ļ		10	-
31	X	24.0	26,700	~	0.9					-	 		1.0 0.8	
Total		21.0	1,133,400		0.7				L	L		l	0.8	
Avgerag	e		36.561											

61,750

Maximum

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



See Pages 4 for Instru						
l. General Information	for the Month/	Year of: September, 2004				
A. Public Water System	(PWS) Informa	ntion				
	Fern Terrace				PWS Identification Number:	3350370
PWS Type:	✓ Community	Non-Transient Non-Community	Transient Non-Com	munity	Consecutive	
Number of Service Connect	tions at End of Month		······································	Total	Population Served at End of Mon	th: 278
PWS Owner:	Aqua Utilities Florid	la				
Contact Person:	Brian Heath			Conta	act Person's Title: Area	a Manager
Contact Person's Mailing A	ddress:	2315 Griffing Road		City: Leesburg	State: Florida	Zip Code: 34748
Contact Person's Telephone	Number:	(352) 787-0980		Conta	act Person's Fax Number: (352	2) 787-6333
Contact Person's E-Mail Ad		beheath@aquaamerica.com				
B. Water Treatment Pla	ant Information					
Plant Name:	Fern Terrace				Plant Telephone Number:	407-598-4100
Plant Address:	300 North Fern Driv			City: Leesburg	State: Florida	Zip Code: 32748
Type of Water Treatment by	<u> </u>		Finished Water			
Permitted Maximum Day O			129,600			
Plant Category (per subsecti	ion 62-699.310(4), F.				class (per subsection 62-699.310(4	
Licensed Operators	Para de 11	Name	License Class	License Number	Day(s)	/Shift(s) Worked
Lead/Chief Operator:			C	6813	Days 1st Shift	
Other Operators:	Marty Neal		С	10027	Days 1st Shift	
	John Worrell		С	6597	Days 1st Shift	
		· · · · · · · · · · · · · · · · · · ·				
				_		
					<u> </u>	
				<u> </u>	<u> </u>	
I Certification by Lead	L/Chief Onewate	<u> </u>		 .	-	
			hi-Camanatan Cal		1 i 1 i 1 i i i i	Lisano de Tarreti Carthat Alan
_	•	t operator licensed in Florida, am the lead/c	•	-	•	•
•	•	ue and accurate to the best of my knowledge		•	_	<u>=</u>
		cable standards referenced in subsection 62				
		operator staffed or visited this plant during				
(2) if applicable, appro	opriate treatment	process performance records. Furthermore	, I agree to provide	these additional of	operations records to the PV	VS owner so the PWS owner can
retain them, together w	vith copies of this	report, at a convenient location for at least	ten years.			
		Will Fonta	ine			C-6813
Signature and Date			Typed Name			License Number
Signature and Date		Final of	r yped reame			Electise Number

Рет Тепасе

Plant Name:

											000,42		u	mmixeM
											38,058		2	Avgerage
					_						008,971,1	<u> </u>	1 1 1	ladoT
												0.4.0		16
	Þ'l								L'I		006,85	0.42	X	30
	2.1		<u> </u>						νΊ		38,100	24.0	X	67
	£.1		<u> </u>						L'I	1	32,000	0.4.0	Х	82
	p .1								9.1		££1,2£	0.42	Х	LZ
											££1,2£	24.0		97
			<u> </u>								EE1'SE	0.42		52
	0.2								2.2		32,400	24.0	Х	74
	6.1			<u> </u>					2.2		009,82	0.42	X	73
	€.1	· · · · · · · · · · · · · · · · · · ·			-			***	L'I	-	000,42	24.0	X	77
	£.1								91		42,300	0.4.0	Х	17
	t I								91		££4,02	24.0	X	07
		 									56,02	0.42		61
		 		 	<u> </u>		 	· · · · · · · · · · · · · · · · · · ·			££4,02	24.0		81
	91	 			-				0.2		000,24	24.0	X	LI
	p.1						 		9.1	 	000,24	24.0	X	91
	£.1	 							6.1		001,84	0 72	X	- SI
				 				<u> </u>	2.1	<u> </u>	000,84	24.0	X	71
	8.0						 		0.1		000 25	24.0	X	£1
	80						 		01		000,52	24.0	^	71
	0.1		ļ	-	<u> </u>		 		7.1	 	000,62	0.42	X	
	0.1						ļ		£.I		008,25	24.0	X	П
		 	 		l				2.1		005 55	24.0	X	01
	0.1								£.1		38,700	0.42	X	6 .
	1.1		<u> </u>		 		 				002.88	24.0		8
	1.2	 _	ļ	<u> </u>	_		 	<u> </u>	†`l		007,15		X	L
	0.1		<u> </u>				ļ		τI	<u> </u>		0.42	X	9
				ļ			<u> </u>				31,700	0,42		S
	n:o		 	 			 	 	ļ.,.			0.4.0		Þ
	8.0		ļ			<u> </u>	ļ		11		001,22	24.0	X	ε
	8.0						 		6.0		005,15	24.0	X	2
Carte or many of the	6.0		****					GOMPLES CO.	0.1	must Phas	001,62	74.0	X	I
Out of Operation	System, mg/L	2007)39S	mɔ/ɔəɛ-Wm	J/nim	sldssilqqA li	O 1918W	J\nim	muntes	Peak Flow, mg/L	Rate, gpd	gal	Operation	("X"	rbnoM
Involves Taking Water System Components	nonuditizid	-Wm		Required, mg	rateW to Hn	To qmaT	-Sun, wold	Peak Flow,	Customer During	Peak Flow	Producted,	ui	(Place	ətt
Conditions; Repair or Maintenance Work that		Required;	Operating	TO muminiM			During Peak	Point During	Before or at First			Hours plant		Day of
Emergency or Abnormal Operating	Concentration at	UV Dose:	Lowest				Customer	Measurement	Concentration (C)	j	bədzini To		Vd botiziV	
	Disinfectant	mmmM					First	D18(T)	Disinfectant		Net Quantity	to the state of	Staffed or	
	Lowest Residual						Before or at	Contact Time	Lowest Residual				Days Plant	
							Provided	Instantial			!	1.5		
							Lowest CT							
		വാവ	<u> </u>	 	<u> </u>	19 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Snousii	CT Calcu	The state of the s	<u> </u>	14			1.3
				I H HODDE	Optil on it .	Sou inc	The second section of the second	1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	10 (citotibinomo +		1			
		*							T Calculations, or		<u> </u>	L	<u> </u>	1
	obixoi	Chlorine D	((Chloramines	ed Chlorine	Combine		▼ Free Chlor	bution System:	inteid ni bə	ristnisM Isu	tant Resid	oofnisid 1	Type of
										(Descripe):	L Otpet	noitsiba	raviolet R	யா டி
	(səni	e (Chloram	ned Chlorin	📙 Сошрі	Ozone	əpixo	Chlorine Dio	T entrold			Virus Inactiv	go-1-noa gi	и Асыечи	Mesus o
								ooz 'izouradae			1921/1110			

9330370

DI SMd

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



See Pages 4 for Instru			w						
. General Information	for the Month/Y	ear of: October, 2	004						
A. Public Water System	(PWS) Informat	on							
PWS Name:	Fern Terrace					PWS Identification Number	per:	3350370	
PWS Type:	✓ Community	Non-Transient Non-Commi	unityT	ransient Non-Com	munity	Consecutive			
Number of Service Connect	ions at End of Month:	119			Total I	Population Served at End of	of Month:	278	
PWS Owner:	Aqua Utilities Florida				•		-		
Contact Person:	Brian Heath			- · · · · · · · · · · · · · · · · · · ·	Contac	ct Person's Title:	Area Manager		
Contact Person's Mailing A	ddress: 2	315 Griffing Road			City: Leesburg	State: Florida		Zip Code:	34748
Contact Person's Telephone	Number: (352) 787-0980			Contac	et Person's Fax Number:	(352) 787-6333		
Contact Person's E-Mail Ad		eheath@aquaamerica.co	<u>m</u>						
3. Water Treatment Pla	nt Information								
Plant Name:	Fern Terrace					Plant Telephone Number		407-598-410	
Plant Address:	300 North Fern Drive				City: Leesburg	State: Florida		Zip Code:	32748
Type of Water Treatment by		✓ Raw Ground Water	Purchased Fini	ished Water					
Permitted Maximum Day O				129,600					
Plant Category (per subsecti	ion 62-699.310(4), F.A					lass (per subsection 62-69		D	Sub-WW
Licensed Operators		Name		License Class	License Number		ay(s) / Shift(s)	Worked	
Lead/Chief Operator:				С	6813	Days 1st Shift	<u> </u>		
Other Operators:	Marty Neal			С	10027	Days 1st Shift			
	John Worrell			С	6597	Days 1st Shift			
									
			······································	 					
				ļ					
				ļ					
I Certification by Lead	I/Chief Operator								
		operator licensed in Florida,	am the lead/chie	ef operator of the	water treatment n	lant identified in part	Lof this report	t Lcertify	that the
		and accurate to the best of							
		able standards referenced in							
		perator staffed or visited this							
		rocess performance records.			these additional o	perations records to t	ne PWS owner	r so the PV	vS owner can
retain them, together v	with copies of this	report, at a convenient locati	on for at least ter	n years.					
			Will Fontaine	;				C-6813	
Signature and Date	· · · · · · · · · · · · · · · · · · ·		Printed or Typ	ped Name				License Nur	mber

PWS II	D:			3350370		Plant Name:	Fern Terrace	;						
mar.	aily Data	for the M	lonth/Year	of:		October, 2004								
_			Virus Inactiv				Chlorine Di			-				
	traviolet R	-	-	r (Describe):		morne 1	Chlorine Di	oxade	☐ Ozone	1 Comb	ined Chlorin	ne (Chiorar	nines)	
1														
Type o	of Disinfe	ctant Resid	lual Maintai:			▼ Free Chlo				(Chloramine		Chlorine I	Dioxide	
				C	T Calculations, or	UV Dose, to	Demostate I	Four-Log	Virus Inac	tivation, if A	Applicable*	trake Will		
1					reveri egikalı ir	CT Calc	ulations				UVI	Oose		
					All the second of the second o		Lowest CT		and the sea					
						Disinfectant	Provided	ł					Lowest Residual	
	Days Plant Staffed or		Net Quantity	1.7	Lowest Residual Disinfectant	Contact Time (T) at C	Before or at First		📗 i ji ka Arate			Minimum	Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer		4 11 12		Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	1	Hours plant			Before or at First	Point During	During Peak	i .		Minimum CT	The state of the second	Required,	Remote Point in	Conditions, Repair or Maintenance Work that
the	(Place	in	Producted.	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1	X	24.0	35,000		1.5								1.3	
2		24.0	35,400											
3		24.0	35,400											
4	Х	24.0	35,400		1.5				<u> </u>				1.2	
5	X	24.0	30,100		1.5		<u> </u>						1.2	
6	X	24.0	35,400		1.0				ļ	<u> </u>			0.8	
7	Х	24.0	27,200		1.5					ļ			1.2	
8	Х	24.0	21,600		1.4		<u> </u>	ļ	 	 			1.1	
9		24.0	35,767			· · · · · · · · ·			ļ	 				
10		24.0			1.3	ļ		l	 	 		ļ	1.1	
12	X	24.0	35,767		1.3			 	<u> </u>	ļ			1.0	
13	X	24.0	26,500 30,400	-	1.4		 	 	 	 			1.0	
14	X	24.0	31,000		1.5				 			 	1.2	
15	X	24.0	17,900	 	1.4			 		 -		<u> </u>	1.2	
16	 ^` -	24.0	32,200					 	<u> </u>	 		<u> </u>		
17	 	24.0												
18	х	24.0	32,200		1.3			1					1.0	
19	Х	24.0			1.3								0.9	
20	Х	24.0			1.5								1.1	
21	Х	24.0	24,800		1.6			<u></u>					1.3	
22	X	24.0	27,900		1.5			ļ	<u> </u>	<u> </u>	ļ		1.3	
23		24.0	30,767						ļ	<u> </u>				
24		24.0	30,767			<u> </u>	↓ _		ļ	ļ			· , ,	
25	X	24.0	30,767		1.4			 	 	 			1.1	
26	X	24.0	31,700		1.3				 	 	ļ		1.0	
28	X	24.0	37,700 35,400	ļ -	1.4		 	 	_		 		1.0	
29	X	24.0	22,200	 	1.3				 	 	 		1.1	
30	 ^	24.0		 	1.4		 	 	 	 	 		T	
31	X	24.0	32,700	 	 	 		 	 		 -	 	T	
Total		24.0	962,000		I	L			<u> </u>	J				
Avgera	e	- (a)	31,032	1										

37,700

Maximum

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



See Pages 4 for Instructions. General Information for the Month/Year of: November, 2004 A. Public Water System (PWS) Information PWS Name: PWS Identification Number: 3350370 Fern Terrace PWS Type: ✓ Community Transient Non-Community Consecutive Total Population Served at End of Month: 278 Number of Service Connections at End of Month: 119 PWS Owner: Aqua Utilities Florida Contact Person: Brian Heath Contact Person's Title: Area Manager City: Leesburg State: Florida Zip Code: 34748 Contact Person's Mailing Address 2315 Griffing Road Contact Person's Telephone Number: (352) 787-0980 Contact Person's Fax Number: (352) 787-6333 beheath@aguaamerica.com Contact Person's E-Mail Address: **B.** Water Treatment Plant Information 407-598-4100 Plant Name: Fern Terrace Plant Telephone Number: Plant Address: 300 North Fern Drive Florida Zip Code: 32748 City: Leesburg State: Type of Water Treatment by Plant: Raw Ground Water Purchased Finished Water 129,600 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.) v D Day(s) / Shift(s) Worked **Licensed Operators** License Class | License Number Name Lead/Chief Operator: Will Fontaine 6813 Days 1st Shift Days 1st Shift Other Operators: C 10027 Marty Neal John Worrell 6597 Days 1st Shift II Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to 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. C-6813 Will Fontaine License Number Signature and Date Printed or Typed Name

PWS II	WS ID: 3350370 Plant Name: Fern Terrace													
III. D	aily Data	for the M	onth/Year	of:		November, 200	4							
			Virus Inactiv		al: ▼ Free C	hlorine [Chlorine Di	oxide	☐ Ozone	Com!	ined Chlorii	ne (Chloren	nines)	
	raviolet R			r (Describe):			Chiorate Dr	- Aug	, Ozone	1 Come	med Chiorn	ic (Cinorai	inics j	
-					ibution System:	▼ Free Chlo	rine 「	Combin	ed Chlorine	(Chloramine	-s) T	Chlorine [Dioxide	
1 ype o	Distilled	tant Kesid	uai Maiiitali								·			
39"				C	T Calculations, or			our-Log	virus inac	uvation, if			METAL SE	
						CT Calc	ulations	 	- 453 <u>5</u>		, UV	Jose		
	4						Lowest CT							
						Disinfectant	Provided	100			44			
	Days Plant			3.00	Lowest Residual	Contact Time	Before or at						Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First				Lowest	Minimum UV Dose	Disinfectant	
Dayof	Visited by Operator	Hours plant	of Finished Water		Concentration (C) Before or at First	Measurement Point During	Customer During Peak		10.00	Minimum CT	Allow Services	Required,	Concentration at Remote Point in	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that
Day of the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	nH of Water	Required, mg		mW-	Distribution	Involves Taking Water System Components:
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
713	x	24.0	32,700	, 61	1.5								1.2	
2	X	24.0	43,100		1.4			L	<u> </u>				1,5	
3	Х	24.0	39,000		1.3								1.2	
4	Х	24.0	26,400		1.3								1.1	
5	X	24.0	34,500		1.2								1.0	
6		24.0	36,300					ļ						
8	Х	24.0 24.0	36,300 36,300		1.4					 	!-		1,1	
9	$\frac{\lambda}{X}$	24.0	30,600		1.5						 	 -	1.3	
10	X	24.0	22,900		1.3			 		 			1.1	
11	X	24.0	34,600		1.3					 			1.2	
12	Х	24.0	32,100		1.3						· · · · · · · · · · · · · · · · · · ·		1.1	
13		24.0	31,400											
14		24.0	31,400											
15	X	24.0	31,400		1.3								1.0	
16	X	24.0	28,100	<u> </u>	1.4					<u> </u>	ļ		1.2	
17	X	24.0 24.0	32,700 20,900		1.5		<u> </u>	-	<u> </u>	{			1.3	
19	$\frac{\lambda}{X}$	24.0	26,800		1.4					 	 		1.3	
20		24.0	34,000							 				
21		24.0	34,000											
22	Х	24.0	34,000		1.4								1.2	
23	Х	24.0	26,400		1.5								1.2	
24	X	24.0	31,800		1.5								1.3	
25	X	24.0	28,900		1.4					ļ <u></u>	<u> </u>	ļ	1.1	
26	Х	24.0	31,100		1.5	 _			<u> </u>	ļ		ļ	1.3	
27		24.0	30,333				 	 	 	 	 	 		
28	x	24.0	30,333 30,333		1.4		 	 	<u> </u>		 		1.2	
30	X	24.0	32,400		1.4		<u> </u>	 	 	 		 	1.1	
31	·	24.0	52,400	 				 	†	†	1			
Total		1	951,100				4			<u> </u>				
Avgerac	0		30.681	1										

43,100

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



Polymer Page 3 Due in December

A public Water System (PWS) Information	See Pages 4 for Instr								
PMS Name Fen Terrace PMS Stance PmS Type: 2 Connections 3330370	. General Information	for the Month/Y	ear of: December	r, 2004					
PMS Name Fen Terrace PMS Stance PmS Type: 2 Connections 3330370	A. Public Water System	(PWS) Informa	tion						
Number of Service Connections at End of Month 119	PWS Name:	Fern Теггасе					PWS Identification Number	r: 3350370	
PWS Owner Aqua Utalities Florids Contact Person's Title Area Manager	PWS Type:	✓ Community	Non-Transient Non-Comm	unityT	ransient Non-Com	munity	Consecutive		
Contact Person's Table Area Manager	Number of Service Connect	tions at End of Month	: 119			Total	Population Served at End of	Month: 278	
Contact Person's Mailing Address 2315 Griffing Road City Leesburg State Florida Zip Code 34748	PWS Owner:	Aqua Utilities Florid	a						
Contact Person's Flex hole Number: (352) 787-0989 Contact Person's Fax Number: (352) 787-0333 Read State State	Contact Person:	Brian Heath				Cont	act Person's Title:	Area Manager	
Research Person E-Mail Address Deheath@aquamerica.com	Contact Person's Mailing A	ddress:	2315 Griffing Road			City: Leesburg			34748
Plant Name: Fern Terace Plant Telephone Number: 407-598-4100 Plant Address 300 North Fern Drive Plant Address Plant Telephone Number: 407-598-4100 Plant Address Plant Telephone Number: 407-598-4100 Plant Address Plant Telephone Number: 407-598-4100 Plant Category (Per subsection 62-699 310(4), FA.C.) V Plant Category (Per subsection 62-699 310(4), FA.C.) D Licensed Operators Name License Class License Number Day(s) / Shift(s) Worked Lead/Chief Operator: Will Fontaine C 6813 Days 1st Shift Other Operators: Marry Neal C 10027 Days 1st Shift Other Operators: Marry Neal C 6597 Days 1st Shift Other Operators: Marry Neal C 6597 Days 1st Shift Other Operators: Marry Neal C 6597 Days 1st Shift Other Operators: Marry Neal C 6597 Days 1st Shift Other Operators: Marry Neal C 10027 Days 1st Shift Other Operators: Marry Neal C 10027 Days 1st Shift Other Operators: Marry Neal C 10027 Days 1st Shift Other Operators: Marry Neal C 10027 Days 1st Shift Other Operators: Marry Neal C 10027 Days 1st Shift Other Operators: Marry Neal C 10027 Days 1st Shift Other Operators: Marry Neal C 10027 Days 1st Shift Other Operators: Marry Neal C 10027 Days 1st Shift Other Operators: Marry Neal C 10027 Days 1st Shift Other Operators: Marry Neal C 10027 Days 1st Shift Other Operators: Marry Neal C 10027 Days 1st Shift Other Operators: Marry Neal C 10027 Days 1st Shift Other Operators: Marry Neal N	Contact Person's Telephone	Number:	(352) 787-0980			Cont	act Person's Fax Number:	(352) 787-6333	
Plant Name: Fem Terrace Plant Telephone Number: 407-598-4100 Plant Address: 300 North Fem Drive	Contact Person's E-Mail Ad	ldress:	beheath@aquaamerica.co	<u>om</u>					
Plant Address 300 North Fern Drive	B. Water Treatment Pla	ant Information							
Type of Water Treatment by Plant:	Plant Name:	Fern Terrace					Plant Telephone Number:	407-598-410	00
Permitted Maximum Day Operating Capacity of Plant, gallons per day. Plant Claegor (per subsection 62-699-310(4), F.A.C.): D License Operators: Name License Class License Number Day(s) / Shift(s) Worked Lad/Chief Operator: Will Fontaine OC 6813 Days 1st Shift Days 1st Shift Dhin Worrell Oc 6597 Days 1st Shift CC 6597 Days 1st Shift CC 6597 Days 1st Shift Dhin Worrell Occ 6597 License Output Days 1st Shift CC 10027 Days 1st Shif	Plant Address:	300 North Fern Drive				City: Leesburg	State: Florida	Zip Code:	32748
Plant Clategory (per subsection 62-699 310(4), F.A.C.): V Licensed Operators: Name License Class License Number C				Purchased Fini	shed Water				
Licensed Operators Lead/Chief Operator: Day(s) / Shift(s) Worked		· · · · · · · · · · · · · · · · · · ·			129,600	· · · · · · · · · · · · · · · · · · ·		<u> </u>	
Certification by Lead/Chief Operator Will Fontaine C 6813 Days 1st Shift Days 1st Shift Dohn Worrel C 6897 Days 1st Shift Dohn Worrel C 6897 Days 1st Shift Days 1st Shift Dohn Worrel C 6897 Days 1st Shift Days 1st Shift Days 1st Shift Days 1st Shift Days 1st Shift Dohn Worrel C 6897 Days 1st Shift Days 1st		ion 62-699.310(4), F.							
Other Operators: Marty Neal			Name		License Class			(s) / Shift(s) Worked	
John Worrell C 6597 Days 1st Shift C 6597 D					С				
I. Certification by Lead/Chief Operator I. the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years. Will Fontaine C-6813	The state of the				C		Days 1st Shift		
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				Will Fontaine				C-6813	
	Signature and Date			Printed or Typ	oed Name			License Nu	mber

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Involves Taking Water System Components Out of Operation	Distribution System, mg/L	sec/cm ²	mW-sec/cm ²	Required, mg 	pH of Water, if Applicable	Vater, ^O C	-gm ,woFf J\nim	Peak Flow, minutes	Customer During Peak Flow, mg/L	Peak Flow Rate, gpd.	Producted, gal	nn Operation	(Place	the
Conditions, Repair of Maintenance Work that	Remote Point in	Required,	Operating	TO mminiM			During Peak	Point During	Before or at First		Water	Hours plant		Day of
Emergency or Abnormal Operating	Concentration at	DOSC IN DOSC	[səmo]				Customer	Measurement	Concentration (C)		bedsimi To	-	Visited by	
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^{*} Refer to the instructions for this report to determine which plants must provide this information.