

Harmony Homes

Docket No. 060368-WS

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

Florida

VOLUME 6

CMP _____ Book 7 COM _____ CTR Set 12 of 57 ECR Containing GCL Additional Engineering Requirements OPC ____ RCA ____ Monthly Operating Reports SCR ____ SGA ____ SEC ____ OTH ____

Aqua Utilities Florida, Inc.

00842 JAN 26 & FPSC-COMMISSION CLERK

Aqua Utilities Florida, Inc. Monthly Operating Reports

Harmony Homes

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Year: 2004			
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Year: 2005			
January	1	27	
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December	12	48	



See Pages 4 for Instru	uctions.							
. General Information	for the Month/Y	Year of: January, 2	2004					
A. Public Water System	(PWS) Informa	ition						
PWS Name:	Harmony Homes					PWS Identification Number	er: 3590497	
PWS Type:	✓ Community	Non-Transient Non-Comm	nunity Ti	ansient Non-Com	munity	Consecutive		
Number of Service Connect	ions at End of Month	61			Т	tal Population Served at End of	Month: 158	
PWS Owner:	Florida Water Service	es						
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		(407) 598-4199			C	ontact Person's Fax Number:	(407) 598-4217	
Contact Person's E-Mail Ad	ldress:	craiga@florida-water.com						
B. Water Treatment Pla	ent Information							
	Harmony Homes					Plant Telephone Number:	407-339-54	24
Plant Address:	101 Plymouth Avenu				City: Altamonte	Spr State: Florida	Zip Code:	32701
Type of Water Treatment by		✓ Raw Ground Water	Purchased Fini	shed Water				
Permitted Maximum Day O				216,000				
Plant Category (per subsecti	on 62-699.310(4), F.		A 44			nt Class (per subsection 62-699.		
Licensed Operators	arter grat	Name		License Class			y(s) / Shift(s) Worked	
	Charles Richmond		·-·	С	12429	Days 1st Shift		
1	Jimmy Johnson			С	4354	Days 1st Shift		
	Martin Neal			С	10027	Days 1st Shift		
	Dwight Green		· · · · · · · · · · · · · · · · · · ·	В	6309	Days 1st Shift		
en la state de la companya de la com							·····	
			· · · · · · · · · · · · · · · · · ·					
A STATE OF THE STATE OF								

ere de la companya d	<u> </u>					i		
I Certification by Lead	/Chief Operator	r						
		t operator licensed in Florida,	am the lead/chie	f operator of the	water treatmen	nt plant identified in part I	of 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.	· ·		these additiona	il operations records to the	e PWS owner so the PV	VS owner can
retain them, together w	vith copies of this	report, at a convenient locati	ion for at least ter	ı years.				
			Charles Richn	nond			C-12429	
Signature and Date			Printed or Typ	ed Name			License Nur	nber

PWS Id	lentification	n Number:		3590497		Plant Name:	Harmony H	omes						
	aily Data	for the N	lonth/Year	of:		January, 2004								
			g Virus Inactiv		ol: F.c.									
i .						Chlorine	Chlorine Di	ioxide	☐ Ozone	☐ Comb	oined Chlori	ne (Chlorar	nines)	i
L	traviolet R			r (Describe):										
Туре с	of Disinfe	ctant Resid	lual Maintai:	ned in Distr	ibution System:	✓ Free Chlo	orine [Combin	ed Chlorine	(Chloramine	s) [Chlorine I	Dioxide	
				C	CT Calculations, or	UV Dose, to	Demostate	Four-Log	Virus Inac	tivation, if	Applicable	S ORTH I		
		1		1911	A MARKET BARLOS	CT Calc					UV			
]			11 July 1941	(1) Sales				The second	The strong of		ZADINES KI	,		
			4,				Lowest CT		7.0					
			7			Disinfectant	Provided				EE A	(# C) 5 W W Y		
	Days Plant				Lowest Residual	Contact Time	Before or at	1 2 4 3 3 1 1 2 3		4. 7. 7. 7. 6.			Lowest Residual	
]	Staffed or		Net Quantity		Disinfectant	(T) at C	First				17922	Minimum	Disinfectant	
D 6	Visited by		of Finished		Concentration (C)	Measurement	Customer	[1374] 5 745		Minimum CT	LOWCOL	UV Dose	Concentration at	
Day of the	Operator		1.72	n	Before or at First Customer During	Point During	During Peak	Temp of	-11 -C111-4-	Required, mg	IN Doce	Required, mW-	The second of th	Conditions, Repair or Maintenance Work that
Month	(Place "X")	in Operation	Producted,	Peak Flow	Peak Flow, mg/L	Peak Flow,	Flow, mg- min/L	Water Oc	pH of Water,	, Kequirea, mg	UV Dose,		Distribution	Involves Taking Water System Components Out of Operation
1	X	24.0	[1,100	Rate, gpd.	3.2	minutes	HBIVL	Water, C	п Аррисаоте	i iminiti.	mw-sec/cm	sec/cm	System, mg/L	Out of Operation 1 3
2	X	24.0	11,100		4.7			<u> </u>	-		 		3.8	
3	X	24.0	12,900		3.5		 	 		 	 		3.2	
4	X	24.0	17,500		3.5	 -	 	 		 	 		3.1	
5	X	24.0	16,300	-	3.0		<u> </u>	 -		<u> </u>		t	2.5	
6	X	24.0	11,000		1.8			<u> </u>			f	f	1.5	
7	Х	24.0	12,200		1.5								1.3	
8	Х	24.0	13,400	·	1.9								1.4	
9	Х	24.0	14,400		1.0			ļ					1.0	
10	X	24.0	9,600		1.7							Î	1.4	
11	X	24.0	13,800		1.4								1.1	
12	X	24.0	9,000		1.6								1.3	
13	X	24.0	12,000		1.5			<u> </u>					1.2	
14	X	24.0			3.0	ļ		ļ					2.8	
15	X	24.0	12,200		3.0			ļ					2.6	
16	X	24.0	15,800		2.0			<u> </u>		<u> </u>	 	 _	1.6	
17	X	24.0	10,400	ļ	2.2		ļ	 	<u> </u>	ļ			1.6	
18	X	24.0	22,700		1.8					<u> </u>			1.5	
19	X	24.0	10,600		1.8			ļ <u></u>					1.6	
20	X	24.0	8,000	<u> </u>	2.6			ļ	ļ	 			1.8	
22	X	24.0 24.0	7,000 13,000	 	2.2	 -		}		 	 		1.7	
23	X	24.0	14,000		2.6	<u></u>	 	 		 	 	 	1.9	
24	X	24.0	11,200		2.5	··· ··-	 	 					1.7	
25	X	24.0	10,100	l	2.3		 	 		 	ļ		1.9	
26	X	24.0	14,600		2.6			†				 	2.0	
27	X	24.0	13,600		1.7	-		1		 		———	1.4	
28	X	24.0	9,900	ļ ·	2.2		†	1		<u> </u>	†		1.9	
29	X	24.0	10,100		2.5			1		T			2.0	
30	Х	24.0	11,200		2.6				1				2.0	
31	Х	24.0	9,000		2.4								1.9	
Total			383,900			-								
Avgerag	e		12,384	1										

22,700

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



DEP Form 62-555..900(3)Alternate

See Pages 4 for Instru									
I. General Information	for the Month/	Year of: February, 20	004						
A. Public Water System	(PWS) Informa	ntion							
	Harmony Homes					PWS Identification Numb	per:	3590497	
PWS Type:	✓ Community	Non-Transient Non-Commun	nity Tr	ransient Non-Com	munity	Consecutive			
Number of Service Connect	tions at End of Month	1: 61	· ,		Total	Population Served at End of	of Month:	158	
PWS Owner:	Florida Water Service	es							
Contact Person:	Craig Anderson				Cont	act Person's Title:	VP Environmen	ntal 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			Cont	act Person's Fax Number:	(407) 598-4217		
Contact Person's E-Mail Ad	ldress:	craiga@florida-water.com							
B. Water Treatment Pla	ant Information								
Plant Name:	Harmony Homes					Plant Telephone Number	-	407-339-54	
Plant Address:	101 Plymouth Aven	ue			City: Altamonte Sp	or State: Florida		Zip Code:	32701
Type of Water Treatment by		✓ Raw Ground Water	Purchased Fini	shed Water					
Permitted Maximum Day O	· · · · · · · · · · · · · · · · · · ·			216,000					
Plant Category (per subsect	ion 62-699.310(4), F					Class (per subsection 62-69		С	
Licensed Operators	fare of the second	Name	jeho gringsterijskal	License Class		r r D	ay(s) / Shift(s)	Worked	
Lead/Chief Operator:	Charles Richmond			С	12429	Days 1st Shift			
Other Operators:	Jimmy Johnson			С	4354	Days 1st Shift			
	Martin Neal			С	10027	Days 1st Shift			
	Dwight Green			В	6309	Days 1st Shift			
The state of the s									
						<u> </u>			
II Continue la Land	1/CL:-6 O								
II Certification by Lead			1 1 1/1:	C 4 C.1			Lafthia rapar	t Loortifi	that the
I, the undersigned wat	er treatment plan	t operator licensed in Florida, a	m the lead/chie	operator of the	water treatment	piant identified in part	Tor uns repor	1. 1 Centily	mat the
information provided	in this report is tr	rue and accurate to the best of m	ny knowledge a	nd belief. I cert	ify that all drinkii	ig water treatment che	micais used at	uns plant	Comorni to NSF
International Standard	l 60 or other appl	icable standards referenced in s	ubsection 62-5:	55.320(3), F.A.0	C. I also certify t	hat the following addit	ional operation	is records	for this plant
were prepared each da	y that a licensed	operator staffed or visited this	plant during the	month indicate	d above: (1) reco	ords of amounts of che	micals used an	d chemica	I feed rates; and
(2) if applicable, appro	opriate treatment	process performance records.	Furthermore, I	agree to provide	these additional	operations records to t	the PWS owne	r so the P\	WS owner can
		s report, at a convenient locatio							
	•	-							
			Charles Richr	nond				C-12429	
Signature and Date			Printed or Typ					License Nu	mber
Signature and Date				,					

PWS Id	lentification	n Number:		3590497		Plant Name:	Harmony Ho	omes						
III. D	aily Data	for the N	lonth/Year	of:		February, 2004								
Means	of Achievii	ng Four-Los	g Virus Inactiv	ation/Remov	/al: ▽ Free C	hlorine \Box	Chlorine Di	ovide	☐ Ozone	Comb	ined Chlori	ne (Chlorar	nines)	
	traviolet R	-		r (Describe):		,	emorate Di	o, ddc	. 020	Come	nica emori	ne (emora	illines)	
Γ.					ibution System:	▼ Free Chlo	rine [Combin	ed Chlorine	(Chloramine	s) [Chlorine I	Dioxide	
13000	1 121311110	lant resid	lan wantan		T Calculations, or									
					1 Calculations, of			rout-rog	virus inac	tivation, ii /	UV			
1		İ			r	CT Calc	ulations			girl () 「) 「) ・ ・ ・ ・ ・ ・ ・	79.2	Dose		
[Lowest CT							
i						Disinfectant	Provided		- 5-4					
	Days Plant				Lowest Residual	Contact Time	Before or at	41,719					Lowest Residual	
}	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	Emergency or Abnormal Operating
1	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	Town of		Minimum CT Required, mg		Required, mW-	Remote Point in	Conditions, Repair or Maintenance Work that Involves Taking Water System Components
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg- min/L	Weter 0c	if Applicable	Required, mg	mW-sec/cm ²		Distribution System, mg/L	Out of Operation
Month 1	"X") X	Operation 24.0	gal. 10,400	Rate, gpd.	Peak Flow, mg/L 2.5	minutes	mivL	water, C	п Аррисавіс	TIME X	III W-SCC/CIII	Sec/citi	2.0	a soutor operation
2	X	24.0	13,200		2.4			 	 	 -		 	2.0	
3	X	24.0	8,100		2.5	 	† — — — — — — — — — — — — — — — — — — —		 	 		 	2.2	
4	X	24,0	10,600		2.4				 				2.0	
5 .	Х	24.0	11,000		2.2				1			1	1.8	
6	X	24.0	15,100		2.0								1.5	
7	Х	24.0	10,200		2.1								1.8	
8	X	24.0			2.2						<u></u>		1.9	
9	X	24.0	9,000		2.0		ļ		ļ	_		ļ	1.6	
10	X	24.0	13,600	ļ	1.8		ļ	 	}	ļ ———			1.5	
11	X	24.0	15,400		1.7	 	 	<u> </u>	 	<u> </u>			1.7	
13	X	24.0 24.0	10,800		2.0	 			 	 		 	1.7	
14	\rightarrow \frac{\cappa_{\text{x}}}{\text{x}}	24.0		· · · · · · · · · · · · · · · · · · ·	2.2			 		 		 	1.8	
15	$\frac{x}{x}$	24.0	12,200		2.1			 		 			1.4	
16	X	24.0			2.2	 			 				1.6	
17	X	24.0	10,400		2.1								1.6	
. 18	X	24.0	16,200		2.2								1.7	
19	Х	24.0			2.0		<u> </u>	↓	<u> </u>	<u> </u>		<u> </u>	1.6	
20	Х	24.0			2.0		ļ	ļ	ļ	<u> </u>		<u> </u>	1.7	
21	Х	24.0	13,700	ļ	2.0		l	 	 	<u> </u>			1.8	
22	X	24.0			2.0	ļ	 	 	 	 		 	1.7	
23	X	24.0 24.0	20,000 16,100		1.9		 	 	 -	 		 	1.4	
25	X	24.0			2.2	 	 	 	 	 		 	1.6	
26	X	24.0			2.6		1		 	1	 -	<u> </u>	2.0	
27	X	24.0		-	2.2				 				1.8	
28	X	24.0			1.4								1.0	
29	Х	24.0	2,200		2.2								1.7	
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					L	<u> </u>	<u> </u>	L	<u> </u>	<u> </u>	L	<u> </u>	<u> </u>	
Total		3 1 <u>1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</u>	348,400	l										
Avgera	ge	100	12,014	I										

20,000

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



See Pages 4 for Instr	uctions.								
General Information	for the Month/	Year of: March, 20	004						
Public Water System	(PWS) Informa	rtion -							
WS Name:	Harmony Homes					PWS Identification Number:	3590497		
PWS Type:	✓ Community	Non-Transient Non-Comm	nunity T	ransient Non-Com	munity	Consecutive			
Sumber of Service Connect				Tanbiene Horr Com		otal Population Served at End of M	Month: 158		
WS Owner:	Florida Water Service					t opulation served at 2nd or i-	100		
ontact Person:	Craig Anderson				IC.	ontact Person's Title:	/P Environmental Services		
ontact Person's Mailing A		P.O. Box 609520		· · · · · · · · · · · · · · · · · · ·	City: Orlando	State: Florida		860-9520	
ontact Person's Telephone	: Number:	(407) 598-4199			1 <u></u>		407) 598-4217		
ontact Person's E-Mail Ac	ddress:	craiga@florida-water.com	· · · · · · · · · · · · · · · · · · ·						
Vater Treatment Pla	ant Information			· · · · · · · · · · · · · · · · · · ·					
ant Name:	Harmony Homes					Plant Telephone Number:	407-339-5424		
ant Address:	101 Plymouth Avenu	ue			City: Altamonte	Spr State: Florida	Zip Code: 327	701	
pe of Water Treatment by	y Plant:	✓ Raw Ground Water	Purchased Fin	ished Water					
ermitted Maximum Day C	Operating Capacity of	Plant, gallons per day:		216,000					
ant Category (per subsect	tion 62-699.310(4), F.	A.C.): IV			Pla	nt Class (per subsection 62-699.31	10(4), F.A.C.): C		
Licensed Operators		Name		License Class	License Num	ber Day(s) / Shift(s) Worked	45000	
ead/Chief Operator:	Charles Richmond			С	12429	Days 1st Shift			
ther Operators:	Jimmy Johnson	son C 4354 Days 1st Shift							
	Martin Neal	C 10027 Days 1st Shift							
	Dwight Green			В	6309	Days 1st Shift			
•									
				1					
					<u> </u>				
	1.616								
ertification by Lead									
		t operator licensed in Florida,							
		ue and accurate to the best of							
ternational Standard	l 60 or other appli	icable standards referenced in	subsection 62-5	55.320(3), F.A.(C. I also certify	that the following addition	al operations records for the	this plant	
ere prepared each da	ay that a licensed	operator staffed or visited thi	s plant during the	e month indicated	d above: (1) re	cords of amounts of chemic	cals used and chemical feed	d rates;	
2) if applicable, appro	opriate treatment	process performance records	. Furthermore, I	agree to provide	these addition	al operations records to the	PWS owner so the PWS o	owner ca	
	-					-			
etain them, together v	with copies of this	report, at a convenient locat	ion for at least te	n years.					
etain them, together v	with copies of this	s report, at a convenient locat	non for at least te Charles Richi	·			C-12429		

Page 1

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											12,800	 		Avgerag
											008,61		<u>·</u>	Total
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	£.1				ļ				9'1		17,000	24.0	X	50
	2.1				1				91		13,700	24.0	X	87
	£.1						i		5.1		005,11	0.42	Х	77
	5.1								<i>L</i> 1		006'6	0.4.0	Х	97
	9.1								61		15,800	24.0	X	52
	8.1								0.2		10,400	0.4.0	X	74
	LT								61		002,21	0.4.0	Х	. 23
	9.1								8.1		002,81	0.4.0	Х	33
	S.I				İ				8.1	i	008'6	24.0	X	17
	91								6'1		12,900	24.0	X	70
	1.0								L'I		007,81	24.0	Х	- 6I
	1 0								9.0		10,400	24.0	X	- 81
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	€.0								9'0		008,01	24.0	X	- 11
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	t .0					L			L'0		11,000	0.4.0	X	6
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	LI								7.7		000'11	24.0	X	9
	8.I								1.2		11,300	24.0	X	ς
	8.1				<u> </u>	ļ			2.2		000,21	0.42	X	7
	L'1								0.2		13,200	0.40	X	3
	91								2.0		10,800	24.0	X	. 7
	S.I	1770 000	2 1110 /000 1 1 1 1 T	H Car					8.1	10 (000't	0.4.0	X	9 1 1
Out of Operation	J\gm ,msicy2	wo/oos	my-sec/cm ²	J/aim	sidsoilggA ii	Water, ^O C	J/aim	səmuim	Peak Flow, mg/L	Rate, gpd.	lsg	Operation	("X"	rbnoM
Involves Taking Water System Components	noindinaid	-Wm			, TSIRW To Hq	lo qmaT	-gm, wol-	Peak Flow,	Customer During	Peak Flow	Producted,	uı	(Place	ətp
Conditions, Repair or Maintenance Work that	the first of the contract of the first of the contract of the	Required,	S. COLOR P. MARCHATTALL	TO muminiM			During Peak	Point During	Before or at First		Water	Hours plant		Day of
Emergency or Abnormal Operating	Concentration at	W Dose	Lowest			60.	Customer	Measurement	(O) nousanoon(O)		bərlzini To		vd batiziV	
	Disinfectant	muminiM		美国 使工作之中			J21i4	O is (T)	Disinfectant	\$50.00	Net Quantity	1 44 4	Staffed or	
	Lowest Residual	19. 5					Before or at	Sontact Time	Lowest Residual			[]	Days Plant	
	1.5						bobivord	Disinfectant			1. 5. 5. 7			
		Figur.				3/4	TO year CT						; ,	
		osor	1.VU:	203.2	<u>na sa na marin di</u> Babbaharan mendan		Suoma	CT Calcı	to the to the section of the total of the					
					OPIN CHICA	8001-IPO		The state of the s	T Calculations, or		2.5			
	\$ 33.50													1 1 5 5 5 1
	əbixoi	Chlorine D	(s	(Chloramine	ed Chlorine	Combine	T anin	▼ Free Chlo	bution System:	rteiG ni bər	rietnisM leu	stant Resid	of Disinfec	Type o
										. (Descupe):	📙 Огрег	noiniba	raviolet R	וֹנ_ מוּי
	(sənir	е (Срјотап	ined Chlorin	L Comb	əuozO 🔟	əbixo	Chlorine Die	hlorine			vinsent suriV			1
				 	·									
								March, 2004		.,,,	onth/Year	M odt gol	erell Alie	للتحد
						səw	Натопу Но	Plant Name:	· · · · · · · · · · · · · · · · · · ·	7640625		Mumber:	lentification	ol SW4

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: April, 2004		·		
A. Public Water System	(PWS) Information				
	Harmony Homes			PWS Identification Number	r: 3590497
PWS Type:	✓ Community Non-Transient Non-Commu	unity Transient Non-Co	mmunity	Consecutive	
Number of Service Connect	ions at End of Month: 61		Total I	Population Served at End of	Month: 158
PWS Owner:	Florida Water Services				
Contact Person:	Craig Anderson		Contac	ct 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		Contac	ct Person's Fax Number:	(407) 598-4217
Contact Person's E-Mail Ad	dress: craiga@florida-water.com				
B. Water Treatment Pla	ant Information				
Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424
Plant Address:	101 Plymouth Avenue		City: Altamonte Spr	State: Florida	Zip Code: 32701
Type of Water Treatment by	y Plant:	Purchased Finished Water			
Permitted Maximum Day O	perating Capacity of Plant, gallons per day:	216,000	-		
Plant Category (per subsect	ion 62-699.310(4), F.A.C.): IV			lass (per subsection 62-699.3	
Licensed Operators	Name	License Clas	s License Number		(s) / Shift(s) Worked
Lead/Chief Operator:	Charles Richmond	C	12429	Days 1st Shift	
Other Operators:	Jimmy Johnson	C	4354	Days 1st Shift	
1.24	Martin Neal	C	10027	Days 1st Shift	
	Dwight Green	В	6309	Days 1st Shift	
	Terry McCarthy	C	4617	Days 1st Shift	
er kanger i de en er en en en en					
in the second second					
I Coutification by	I/Chief Onewater				
II Certification by Lead	i/Chief Operator	41 - 1 - 4/-1: 6	L =	lant identified in most I	of this report. I cortifu that the
i, the undersigned wat	er treatment plant operator licensed in Florida,	am the lead/chief operator of t	ne water treatment p	nant identified in part i	in the second of this plant conform to NCE
information provided	in this report is true and accurate to the best of	my knowledge and belief. I ce	rtify that all drinking	g water treatment chem	icals 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 the	at the following additio	onal operations records for this plant
were prepared each da	y that a licensed operator staffed or visited this	s plant during the month indica	ted above: (1) recor	ds of amounts of chemi	icals used and chemical feed rates; and
(2) if applicable, appro	opriate treatment process performance records.	Furthermore, I agree to provide	de these additional o	perations records to the	e PWS owner so the PWS owner can
retain them, together v	with copies of this report, at a convenient locati	on for at least ten years.			
		Charles Richmond			C-12429
Signature and Date		Printed or Typed Name			License Number
Signature and Date		vr - jpan - mile			

PWS I	lentification	n Number:		3590497		Plant Name:	Harmony H	omes						
III. D	III. Daily Data for the Month/Year of: April, 2004													
	Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Combined Chlorine (Chloramines)													
	traviolet R		-	r (Describe):			Chiornic Di	Oxide	1 Ozone	1 Come	inea Chiori	ne (Chiorai	nines)	
←					ibution System:	▼ Free Chlo	rino [Combin	ed Chlorine	(Chloramine	.e)	Chlorine I	Niovida .	
Type	r Distilled	Tant Kesic	iuai iviaiiitai		·								Joxide	
	1				T Calculations, or			our-Log	virus Inac	tivation, if I				
		ļ				CT Calc	ulations		1 1 1 1 1 1 1 1 1		Ser UV.	Dose		
							Lowest CT							
	İ			ļ		Disinfectant	Provided		· .					
1	Days Plant		}		Lowest Residual	Contact Time	Before or at	Ī					Lowest Residual	
	Staffed or		Net Quantity:	1	Disinfectant	(T) at C	First					Minimum	Disinfectant	
ļ	Visited by		of Finished	1.0	Concentration (C)	Measurement	Customer	· .			Lowest	UV Dose	Concentration at	■ 2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
Day of		Hours plant		1.0	Before or at First	Point During	During Peak	T		Minimum CT	Operating	Required,		Conditions; Repair or Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	1 emp 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 3	mW-sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
2	X	24.0	13,200 13,200		1.8		 		 				1.5	
3	X	24.0	15,200		1.7		 					<u> </u>	1.3	
4	X	24.0	15,900		1.8				 	·		ļ	1,6	
5	X	24.0	14,100		2.0				†			ļ	1.8	
6	X	24.0	13,800		2.0								1.6	
7	Х	24.0	14,200		1.8								1.5	
- 8	Х	24.0	15,000		1.6								0.9	
9	X	24.0	12,400		2.1								1.8	
10		24.0	18,500											
· 11.	Х	24.0	18,500		1.8				_				1.6	
12	X	24.0	14,000		2.0					ļ		ļ	1.7	
13	Х	24.0	12,000	<u></u>	2.2	·				ļ		<u> </u>	1.8	
14	X	24.0	13,200		2.0							 	1.7	
15 16	X	24.0 24.0	9,000		2.1		 	ļ	<u> </u>			 	1.8	
17		24.0	16,100 18,100		1.8				 				1.5	
18	X	24.0			1.6			 	 				1.4	
19	X	24.0	11,800		1.7			 	 	 		 	1.5	
20	X	24.0			1.6		-			 			1.7	
21	X	24.0			1.3		 		 	1			1.2	
22	Х	24.0		i	1.6		·		_	· -		· · · · · · · · · · · · · · · · · · ·	1.3	
23	Х	24.0	19,600		1.4								1.0	
24	Х	24.0	17,500		1.8								1.4	
25	Х	24.0	15,300		1.5								1.1	
26	Х	24.0	16,200		1.6								1.2	
27	Х	24.0	18,500		1.7					ļ			1.3	
28	Х	24.0	10,000		1.8			 	<u> </u>	 	ļ		1.4	
29	Х	24.0	22,000	<u> </u>	1.8					ļ	<u> </u>		1.5	
30	X	24.0	16,100	<u> </u>	2.2		 		 				1.7	
Total	1	1	165 700		<u> </u>	1	l	L	<u> </u>	<u> </u>	L	J		
Avgera			465,700 15,523	1										
Iv rafer of	,c		13,323	I										

23,600

Maximum

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



See Pages 4 for Instr	uctions.							
. General Information		Year of: May, 2004	· · .]
A. Public Water System						· · · · · · · · · · · · · · · · · · ·		
PWS Name:	Harmony Homes					PWS Identification Number:	3590497	
PWS Type:	✓ Community	Non-Transient Non-Commu	nityTi	ransient Non-Com	munity	Consecutive		
Number of Service Connec	tions at End of Mont	h: 61			Total	Population Served at End of Mo	onth: 158	
PWS Owner:	Florida Water Servi	ces						
Contact Person:	Craig Anderson				Conta	ct 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			Conta	ct Person's Fax Number: (40	07) 598-4217	_
Contact Person's E-Mail Ac		craiga@florida-water.com						
B. Water Treatment Pla	ant Information							
Plant Name:	Harmony Homes					Plant Telephone Number:	407-339-542	24
Plant Address:	101 Plymouth Aven	ue			City: Altamonte Spi	State: Florida	Zip Code:	32701
Type of Water Treatment by		✓ Raw Ground Water	Purchased Fini	shed Water				
Permitted Maximum Day C				216,000				
Plant Category (per subsect	ion 62-699.310(4), F					lass (per subsection 62-699.310)		
Licensed Operators		Name		License Class	License Number		/ Shift(s) Worked	(1) (1) (1)
Lead/Chief Operator:				С	12429	Days 1st Shift		
Other Operators:	Jimmy Johnson			С	4354	Days 1st Shift		
	Dwight Green			В	6309	Days 1st Shift		
	Terry McCarthy			С	4617	Days 1st Shift		
A minimum district								
	 							
I Certification by Lead	I/Chief Operato	r						
		t operator licensed in Florida, a	m the lead/chie	f operator of the	water treatment n	lant identified in part I of	this report. Legitify	that the
_	•	ue and accurate to the best of n		•	•		-	
-	-	icable standards referenced in s	•		-			
		operator staffed or visited this						
	-	process performance records.		•	these additional o	perations records to the P	WS owner so the PW	vs owner can
retain them, together v	with copies of this	s report, at a convenient locatio	n for at least ter	ı years.				
			Charles Richn	nond			C-12429	
Signature and Date			Printed or Typ	ed Name			License Nur	mber

PWS I	dentificatio	n Number:		3590497		Plant Name:	Harmony H	omes			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
	aily Data	for the N	lonth/Year	of:		May, 2004								
			g Virus Inacti		•	Chlorine	Chlorine Di	oxide	C Ozone	☐ Comb	oined Chloria	ne (Chlorar	nines)	
իլ տ	traviolet R	Radiation	[Othe	r (Describe):	:									
Type o	of Disinfe	ctant Resid	lual Maintai	ned in Distr	ibution System:	▼ Free Chle	orine [Combin	ned Chlorine	(Chloramine	es) Γ	Chlorine I	Dioxide	
	1			(CT Calculations, or	LIV Dose to	Demostate	Four-Loc	Vinus Inac	tivation if	Applicable!	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
	1				- Calculations, or		ulations	Cur Log	5 7 H G5 H GC	A COA	UV			
					1	Create	Juladons		1 6 20 35		- U V al	DUSC		
					4.8		Lowest CT							
						Disinfectant	Provided							
	Days Plant				Lowest Residual	Contact Time	Before or at						Lowest Residual	
	Staffed or	1	Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	
	Visited by	1	of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	
Day of	Operator	Hours plant	and the state of t		Before or at First	Point During	During Peak			Minimum CT		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		mW-		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		Out of Operation
2	X	24.0	15,800		1.8			ļ	 				1.5	
3	X	24.0	14,800 18,400		1.8				<u> </u>			ļ	1.5	
4	X	24.0	11,700	-	3.5		 	<u> </u>	 	1			1.4	
5	X	24.0	18,600		2.2				 	 			2.0	
6	X	24.0	18,200		1.8			 	· 	 			1.6	
7	X	24.0	14,600		3.5		 		 	 			2.3	
8	X	24.0	22,200		3.5		!			 		-	2.5	
9	Х	24.0	25,100	· · · · · · · · · · · · · · · · · · ·	2.5				<u> </u>				2.1	
10	Х	24.0	29,200		2.4				·				2.2	
11	Х	24.0	23,000		2.0	- 1							1.7	
12	X	24.0	20,400		2.0				i				1.6	
13	X	24.0	20,400		2.0					l .			1.7	
14	Х	24.0	18,100		3.5								2.5	
15	X	24.0	20,700		1.8				ļ				1.5	
16	Х	24.0	15,400		2.0								1.7	
17	Х	24.0	29,000		2.0								1.8	
18	X	24.0	21,000	ļ	2.0								1.7	
.19	X	24.0	39,600	ļ	3.5		ļ	<u> </u>		ļ			2.8	
20	X X	24.0 24.0	25,600 26,700	 	3.0			ļ		<u> </u>			2.0	<u> </u>
22	X	24.0	24,600	-	2.0								2.2 1.5	<u> </u>
23	X	24.0	26,900		3.0				†	-			2.1	
24	X	24.0	29,000		2.6	· · · · · · · · · · · · · · · · · · ·			 				1.8	
25	X	24.0	18,400		1.6			 	 	 			1.0	
26	X	24.0	24,400		2.2				 				1.5	
27	X	24.0	15,600		2.5								2.0	
28	X	24.0	38,500	<u> </u>	2.0			<u> </u>	<u> </u>	 			1.5	
29	Х	24.0	29,900	 	2.5								2.5	
30	Х	24.0	16,900		2.6	•				T			2.0	
31	Х	24.0	27,400		1.5					1			1.1	
Total	14 Aug 1		700,100											
Avgerag	е		22,584]										

39,600

Maximum

^{*} 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: June, 2004				
A. Public Water System	(PWS) Information				
PWS Name:	Harmony Homes			PWS Identification Number:	3590497
PWS Type:	✓ Community Non-Transient Non-Communit	y Transient Non-Com	munity	Consecutive	
Number of Service Connec	tions at End of Month: 61		Total 1	Population Served at End of Month:	158
PWS Owner:	Florida Water Services				
Contact Person:	Craig Anderson		Conta	et Person's Title: VP Env	vironmental 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		Contac	ct Person's Fax Number: (407) 5	98-4217
Contact Person's E-Mail Ac	ldress: craiga@florida-water.com				
B. Water Treatment Pla	ant Information				
Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424
Plant Address:	101 Plymouth Avenue		City: Altamonte Spr	State: Florida	Zip Code: 32701
Type of Water Treatment b		Purchased Finished Water			
	Pperating Capacity of Plant, gallons per day:	216,000			
	ion 62-699.310(4), F.A.C.):		Plant Cl	ass (per subsection 62-699.310(4), 1	F.A.C.): C
Licensed Operators	Name	License Class	License Number	Day(s) / S	hift(s) Worked
Lead/Chief Operator:		C	12429	Days 1st Shift	
Other Operators:	Jimmy Johnson	С	4354	Days 1st Shift	
	Dwight Green	В	6309	Days 1st Shift	
	Terrence McCarthy	С	4617	Days 1st Shift	
		· · · · · · · · · · · · · · · · · · ·			
I. Certification by Lead	I/Chief Operator				
	er treatment plant operator licensed in Florida, am	4h 1 - 1/4h: 6		14:1-4:6:-1:	Took'Cathataha
	in this report is true and accurate to the best of my				
	ndard 60 or other applicable standards referenced				
piant were prepared ea	ich day that a licensed operator staffed or visited t	his plant during the month in	dicated above: (1)	records of amounts of chem	icals used and chemical feed
rates; and (2) if applica	able, appropriate treatment process performance r	ecords. Furthermore, I agree	to provide these a	dditional operations records t	to the PWS owner so the PWS
owner can retain them	, together with copies of this report, at a convenie	nt location for at least ten yea	rs.		
Me of					
Marles 90 Ki	chmond 6-6-04	Charles Richmond			C-12429
Signature and Date		Printed or Typed Name			License Number

S	Identification Number: 3590497 Plant Name: Harmony Homes													
Till.	III. Daily Data for the Month/Year of: June, 2004													
			g Virus Inactiv		val: 🔽 Free (Chlorine Di		Ozone				• .	
	Itraviolet R	-		r (Describe):		,	CHIOTHIE DI	Muc	1 Ozone	1 Com	ined Chlori	ne (Chioran	nines)	
L					ibution System:	▼ Free Chlo	in T	Combin	ed Chlorine	(Chloramine		Chlorine I	N	
Type	or Dismice	mant Acsic	luai Maintan		•								Dioxide	
					T Calculations, or			om-rog	Virus Inac	nvation, it.				
					ı	CT Cale	ulations				UVI	Dose		
						Disinfectant	Lowest CT Provided							
	Days Plant				Lowest Residual	Contact Time	Before or at						Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	
n of	Visited by	Hours plant	of Finished Water		Concentration (C) Before or at First	Measurement	Customer			in a	Lowest Operating	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of the	(Place	in	Producted,	Peak Flow	Customer During	Point During Peak Flow.	During Peak Flow, mg-	Temp of	nH of Water	Minimum CT Required, mg	UV Dose,	Required, mW-	Remote Point in Distribution	Conditions; Pepair or Maintenance Work that Involves Taking Water SystemComponents
Month	`"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	xnin/L	mW-sec/cm²	sec/cm²	System, mg/L	Out of Operation
1	X	24.0	23,300		2.2								1.7	
2	X	24.0	21,200		2.4								1.8	
3 4	X	24.0	20,800		2.7								2.5	
5	X	24.0 24.0	17,700 23,200		2.5 2.2								2.0	
6	X	24.0	14,900		3.5					ļ			2.0	
7	X	24.0	22,300		2.4								1.9	
8	Х	24.0	16,400		2.6								2.0	
9	Х	24.0	17,400		2.6								2.2	
10	X	24.0			2.4								2.0	
11	X	24.0	22,000		2.2								1.9	
12 13	X	24,0 24,0	17,900 29,800		3.5								3.0	
14	X	24.0	22,000		2.3	<u> </u>							1.8	
15	X	24.0	28,700		2.4								1.8	
16	х	24.0	24,000		3.5								3.0	
17	Х	24.0	16,400		3.5								3.0	
18	X	24.0	33,800		1.6								1.0	
19	X	24.0	27,900		3.0								2.0	
20 21	X	24.0 24.0	23,700 1,300		1.0								0.7	
22	$\frac{\hat{x}}{x}$	24.0	1,300		0.9								0.6	
23	X	24.0			0.9								0.8	
24	Х	24.0	20,600		2.0								1.6	
25	Х	24.0	33,000		2.4								1.7	
26	X	24.0	26,000		3.5								3.0	
27	X	24.0	25,600		3.5								3.0	
28 29	X X	24.0	28,800		1.8								1.5	
30	X	24.0 24.0	30,600 17,600		2.0 3.5								1.6	
Ju		24.0	17,000		3.5								3.0	
Total	·		619,100			اــــــا							l	
Avgera	e		20,637											
Maximu	m		33,800											

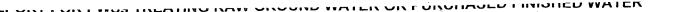
^{*} Refer to the instructions for this report to determine which plants must provide this information.



See Pages 4 for Instru								
l. General Information	for the Month/Yo	July, 2004						
A. Public Water System	(PWS) Informati	ion						
PWS Name:	Harmony Homes					PWS Identification Number:	: 3590497	
PWS Type:	✓ Community	Non-Transient Non-Commun	ity 🔲 Tı	ransient Non-Com	munity	Consecutive		
Number of Service Connecti	ons at End of Month:	61				Population Served at End of M	Month: 158	
PWS Owner:	Aqua Utilities Florida				· · · · · · · · · · · · · · · · · · ·			
Contact Person:	Brian Heath				Contac	ct Person's Title;	Area Manager	
Contact Person's Mailing Ad	dress: 2	315 Griffin Rd			City: Leesburg	State: Florida	Zip Code:	34748
Contact Person's Telephone	Number: (3	352) 787-0980			Contac	t Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Add	iress: <u>b</u>	eheath@aquaamerica.con	<u>n</u>				· · · · · · · · · · · · · · · · · · ·	
B. Water Treatment Pla	ınt Information							
Plant Name:	Harmony Homes					Plant Telephone Number:	407-339-542	24
Plant Address:	101 Plymouth Avenue				City: Altamonte Spr	State: Florida	Zip Code:	32701
Type of Water Treatment by	Plant:	✓ Raw Ground Water	Purchased Finis	shed Water				
Permitted Maximum Day O				216,000				
Plant Category (per subsection	on 62-699.310(4), F.A.					Class (per subsection 62-699.3	10(4), F.A.C.): C	
Licensed Operators		Name		License Class	License Number	Day	r(s) / Shift(s) Worked	
	Will Fontaine			С	6813	Days 1st Shift		
1 1	Terry McCarthy			С	4617	Days 1st Shift		
		· · · · · · · · · · · · · · · · · · ·						
to the section of the fig								
						<u> </u>		
				<u> </u>				
II. Certification by Lead	/Chief Operator							
		perator licensed in Florida, am	the lead/shief	anarator of the	vatan traatmant =1	tidentified in new T -Ca	himmonal Tambershie	Ale information
		e to the best of my knowledge						
Standard ou or other a	oplicable standards	referenced in subsection 62-5	55.320(3), F.A.	.C. I also certify	that the following	additional operations re	cords for this plant were	e prepared each
		ted this plant during the month						
		e records. Furthermore, I agre	e to provide the	ese additional op	erations records to	the PWS owner so the	PWS owner can retain t	hem, together
with copies of this repo	<i> </i>	location for at least ten years.						
	112-	=8604						
	29-	-616-04	Will Fontaine				C-6813	
Signature and Date			Printed or Typ	ed Name			License Num	iber

										ï	008,74	3.00		
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	¿.0								8.0		14,800	24.0	Х	≠ 0€
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	2.0	†							L'0		14,800	24.0		<i>L</i> 7₹
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	6.0								6.0		33,800	0.42	Х	****
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	L'I	· · · · ·							2.5		22,800	24.0	Х	4.9
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· .	7.7								0.£		008'81	24.0	Х	***
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nothersqO to tuO	J\gm, mstst2	sec/cm ²	my-sec/cm	J\nim	eldsoilqqA li	O ^O , JajaW	ŋ/шш 👯	səmum	Peak Flow, mg/L	Rate, gpd.	gal.	noinmagO	("X")	dinolv
Involves Taking Water System Components	noituditien	-Wm	117	gui thaumhair	tonnii to rad		Flow, mg-	Peak Flow,	Customer During	Peak Flow	Producted,	uj)	Place :	adı
Conditions; Repair or Maintenance Work that	Remote Point in	Required,	Operating -	T) mumulM			During Peak	Point During	Belore or at First		Water	Hours plant	The work was a first of the second	To YEC
Emergency or Abnormal Operating	Conceptration at	UV Dose	Lowest -	1			Customet	Measurement	Concentration (C)		bədzini To	5.5	Visited by	
	Disinfectant.	muminiM	. (12) - T			14	First	7 D in (T)	Disinfectant		Met Quantity		Staffed or	
	Lowest Residual			140	4.30		Before or at	Contact Time	Lowest Residual		Viting 15W	*	Days Plant	19.00 m.
	Property of	11.2521				J	Provided	Disinfectant						13.0
The State of the S	100	T. Carlotte	4.2	18.4		44 C	TO reswort	- F		1.00	A	a dinashi	17	
the property of the second of the second of the second		000	T 10	100			CHOURI	omo to						
		930(1://11	Page 1999	111111111111111111111111111111111111111	<u> </u>	*** adoltele	WIND TO TO		<u> </u>	4			
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	əbixoi	Chlorine D	(5	(Chloramines	d Chlorine	Combine	inc	Free Chlor	ution System:	dirtsiG ni be	onistnisM let	ant Residi	Disinfect	to sav
										(Descripe):	l_ Other	noitsib	raviolet Ra	ալո _
	(səur	e (Chloram	ined Chlorin	l Combi	ouozo l	əpixo	Cujorine Dio	lorine	vai. IV Free Ci		itoenI suriV g			
						•								
								July, 2004		- 3	onth/Year o			
						səwo	Нагтопу Но	Plant Name:		L67065E		Ултрег:	noitsation	PPI SM
· · · · · · · · · · · · · · · · · · ·														

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





See	Pages	4	for	Instructions.

I. General Informatio	n for the Month/	Year of: August,	2004				· · · · · · · · · · · · · · · · · · ·		
A. Public Water Syste									
PWS Name:	Harmony Homes						PWS Identification Number:	3590497	
PWS Type:	✓ Community	Non-Transient Non-Comr	nunity	Transient Non-Com	munity		Consecutive		
Number of Service Conne						Total	Population Served at End of Month	n: 158	
PWS Owner:	Florida Water Service	ces				·			
Contact Person:	William Trendel	······································	· · · · · · · · · · · · · · · · · · ·	, 		Conta	act Person's Title: Senio	or Operator	-
Contact Person's Mailing	Address:	PO Box 490310	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	City: Leesbu	ită	State: Florida	Zip Code:	34749-0310
Contact Person's Telephon	e Number:	(407)339-5424				Conta	act Person's Fax Number: (407)	339-7490	
Contact Person's E-Mail A	ddress:			the second second		•			
B. Water Treatment P	lant Information								
Plant Name:	Harmony Homes						Plant Telephone Number:	407-339-54	24
Plant Address:	101 Plymouth Avenu	ie			City: Altamo	nte Sp	r State: Florida	Zip Code:	32701
Type of Water Treatment b		✓ Raw Ground Water	Purchased	Finished Water					
Permitted Maximum Day (216,000					
Plant Category (per subsec	tion 62-699.310(4), F.A	A.C.): IV					Class (per subsection 62-699.310(4)		
Liversoll@perators	CALL AND LESS TO THE COURT OF THE PARTY OF T	en pueds Longers spesi		dicense Class	Lucinessy	mbei	Bartista San Bay(S)(Shili(S) Workeds	
Lead Cinc Flyperator	William Trendel			C	6411				· · · · · · · · · · · · · · · · · · ·
Other Operators in			· · · · · · · · · · · · · · · · · · ·		ļ				
		<u> </u>	<u> </u>			·		<u> </u>	
	Terrence McCarthy	<u> </u>		C	4617		Days 1st Shift	~ /	·
	5 2								
		19/1	· 			·			
	<u> </u>	· · · · · · · · · · · · · · · · · · ·							
			•						
					-				
STEEL PARTIES SELECTION	Š			<u> </u>	<u> </u>		<u> </u>		
I Certification by Lea	d/Chief Operator								
			am the lead/cl	nief operator of the	water treatm	ent n	ant identified in part I of thi	s report I certify	that the
							water treatment chemicals		
							t the following additional or		
							ds of amounts of chemicals u		
					these addition	nai op	perations records to the PWS	owner so the PW	5 OWIEL Call
retain them, together v	with copyres of this	report, at a convenient locati	on for at least	ten years.					

Printed or Typed Name
Page 1

William Trendel

Signature and Date

C-6411 License Number

√S Id	entification	Number:		3590497		Plant Name:	Harmony	Homes						
AL D	aily Data	for the M	lonth/Year	of:		August, 2004	4						- · · · · · · · · · · · · · · · · · · ·	
			g Virus Inacti			hlorine [Chlorine	Dioxide	Ozone	Comb	ined Chlor	ine (Chloran	nines)	
			√ Othe			•								
					ibution System:	▼ Free Cl	hlorine	Combin	ed Chlorine	(Chloramines	s) [Chlorine I	Dioxide	
T ype o	Distinc	Les de la contraction de la co		Research 2	T.Calculations or	IIIV Dasa						*		The strength of the strength o
÷67.1				1720022777		Termination						Dose France		and the second s
	100				Park Service Makes Ma					Levi err				Cf. Limicacone von Abbornique Peraluig conditions greepast als Martenapres Workshin graval ves Taking Waters Stem Combonent scoup of Operation 2.
							Lowest		148.00			1	0.24	
						- Distriction	l - Provide						Power Residual	
	Days Plant				Lowest sestimate	t contactalin	e l'atenare o					Mercunitor	Districtant	
	SERVICE OF						de Custom				, Lowest	PCV Doc	Concentration at	Linergency of Automital Operating
	Contract	23 In 18 A	Water		a Before or a liant	Louis Duch	Diring F	aki san	in the	Minimum 6 P	Operating	RenureL	Remote Point in	Goodingns Reput di Maintenance Workilla
uer	Place		Producted	peak frow	of Cashimer Daring	Peak Liew	r liow m		pH of Water,	Required ing	JEV Dose,	in.W	Distribution.	annual es I aking Water System Components
Words	NIXX.	ereration.	61	Rate Spor	F heardings me/F	minute	e njinja.	A Water 6	if Applicable	S Juini E	mW-set/cm	stelem i	System of Black	per service control esperation six services
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	X	24.0	14,000		1.7					 		 	1.0	
	X	24.0	12,600	 	0.8					 			0.5	
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716 E	Х	24.0	13,900		2.5							<u> </u>	1.8	
417	Х	24.0	21,700		1.8					 		ļ	1.5	
	Х	24.0	16,700		1.6						·		1.0	
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25	X	24.0	26,400	 	0.7		·						0.9	
26.	X	24.0	21,500		1.2							ļ	0.9	
7.27	Х	24.0	14,400		1.6				ļ				1.0	
28	Х	24.0	13,000	ļ	2.0							 	1.5	·
29	X	24.0	15,200	 	1.8			 -	 	 		 	1.3	
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		Section 1	14,948	1										
24.25.76		CALLY SALES	26.400	1										

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



	tem (PWS) Informa	ition				PWS Identification Number:	3590497
WS Name:	Harmony Homes		· 	1 17		Consecutive	10407
WS Type;	∠ Community	Non-Transient Non-Com	munity	Transient Non-Co			158
	nections at End of Month	61		<u></u>		otal Population Served at End of Month:	90,1
WS Owner:	Agua Utilities,Fl.					D. I. Title	
ontact Person:	William Trendel			<u> </u>		Contact Person's Title: Senior O	Zip Code: 32750
ontact Person's Mailir		140 Hope St.	alan lagaran bara		City: Longwoo		
Contact Person's Telepi		407-339-5424				ontact Person's Fax Number: 407-339	7490
Contact Person's E-Ma		<u> </u>	<u> </u>	<u> </u>	- <u></u>	<u> Albania da Albania d</u>	
	Plant Information						407, 220, 2424
lant Name:	Harmony Homes		<u>حمد کی دیکو بیک</u>	بالراجات وبأبر بهوا فتعالب وسور		Plant Telephone Number:	407-339-5424
lant Address:	101 Plymouth Avenu				City: Altamont	e Spri State: Florida	Zip Code: 32701
ype of Water Treatme		∠ Raw Ground Water	Purchase	d Finished Water			
	y Operating Capacity of I			216,000		<u> </u>	
	section 62-699.310(4), F.A	A.C.):	V			ant Class (per subsection 62-699.310(4), F	
Picensed Opera	or William Trendel	非实现发现实现的现在分词				igen et la ser en en de de la servicione	HIRIS MADINEGER ELEMENTS
	William Trendel	أبي والتعم يحمد والمهونية فيحار والمستمر مريدات		C	6411	Days 1st Shift	
idro-colpiendans		 			<u> </u>		
			<u> </u>		- 		
	Terry McCarthy			E	4617	Days 1st Shift	
							
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4.5			- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			<u> </u>	<u></u>
					<u>-</u>		
ertification by L	ead/Chief Operator	•		15, 40		- No. 1 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -	
the undersigned	water treatment plant	operator licensed in Florida	a, am the lead/	chief operator of the	e water treatmer	nt plant identified in part I of this r	eport. I certify that the
formation provid	ed in this report is tru	ue and accurate to the best o	f my knowled	ge and belief. I cer	tify that all drin	king water treatment chemicals use	ed at this plant conform to
ternational Stand	ard 60 or other applie	cable standards referenced i	n subsection 6	2-555.320(3), F.A	C. I also certify	that the following additional oper	ations records for this pla
en en en en en en en en en en en en en e	day ibat a tirensed d	merator crafted ar visited th	is clant durin	the month indicat	d above: (1) re	cords of amounts of chemicals use	d and chemical feed rates
) if applicable ar	propriate treatment r	rocess performance record	s Furthermor	e. Lagree to provid	e these additiona	I operations records to the PWS o	wner so the PWS owner
		repert, at a convenient loca					
min mem, togeth	with copies of this	, at a convenient loca	don tot at teat	st ton yours.			

MONTHLY OPERATION REPORT FOR PW"Ss TREATING RAW GROUND WATER OR PURCHASED

1	entificatio	n Number:		3590497		Plant Name:	Harmony	Homes							
D	aily Data	a for the N	lonth/Year	of:		September, 2	004								
_				ivation/Remov		Chlorine [Dioxide	Cone	□ Corr	hined Chlor	ine (Chlorar	nines)		. '
				er (Describe):			Cinor Bio L	rioxage	, 020110	1 Con	ionica Cinoi	uie (Cinorai	illics)		
					ibution System:	▼ Free Cl	lorine	Combi	ned Chlorin	e (Chloramin	nes)	Chlorine I	Dioxide		
					E Calculations of			lion la	e Winsdin	et wat the an					2000
												Transfer	A Part of the		
				4-5-20			P Ves CI								
	100					1100									
	Staticator		Net on anilis									Mariation	a Disme and		and the state of t
	Visitatiiv		i i i i i i i i i i i i i i i i i i i		edConcentration (C)	e vie spiemen	Gislandi	100		1.25	du diang k	Taxaa ka	entre il rationa	Emetere	cylondy pourrel Operation 13
	Operator	Eterns plant	30 10 ptg		et closely dilution	Form During	a Privilege		100	Managem C	Operating.	Reducted.	Ren vie Politin	Condition &	pauric Manierance Workshi
	t (lekse (Profittion of the	P 16-14-10 (V)	Cation is planted	PLION.	a di divini		paltity welle	Recured in	gill UV Moses	100	elasti tution	fnyoly: 9 Tak	ire water we terracol rivercus
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1000	х	24.0	12,600		1.7		1		1	1	 	†	1.3		
	Х	24.0	15,900		1.2								0.8		· · · · · · · · · · · · · · · · · · ·
TES A	х	24.0	9,800												
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14.2	X	24.0	16,000	 	1.3			 					0.8	[
105.4 76	X	24.0 24.0	8,000 12,300		2.4		· ·	<u> </u>		 	-		1.5		
	X	24.0	17,300	1	1.0		+	 	ļ	 	-	ļ	0.7		
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Q0 %	Х	24.0	14,800		2.2								1.5		
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30	Х	24.0	8,600		1.8		1						1.0		
otal	AMERICAN ENGINEERS	6.3	350,100	ļ	1		1	L	1	L					
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aximun	1 1 5 L	de a la companya de la companya de la companya de la companya de la companya de la companya de la companya de	17,300												

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



See Pages 4 for Instructions.

	tion for the Month/	ear of: October	, 2004				
Y. Public Water Sys	tem (PWS) Informa	ion	de ar estas contentos a por atorios.	E Grown the Lorenz of College College	man salar tak pana dari da partaw	Company of the second s	en de la competencia de la competencia de la competencia de la competencia de la competencia de la competencia
PWS Name:	Harmony Homes		 			PWS Identification Number:	3590497
PWS Type:	✓ Community	Non-Transient Non-Com	munity [Transient Non-Con	nmunity	Consecutive	
	nnections at End of Month				Tota	I Population Served at End of Month:	158
PWS Owner:	Aqua Utilities,Florid	a					
Contact Person:	William Trendel		**************************************		Con	tact Person's Title: Senior	Facilities Operator
Contact Person's Maili	ng Address:	140 Hope Street			City: Longwood	State: Florida	Zip Code: 32750
Contact Person's Telep	hone Number:	(407)339-5424			Con	tact Person's Fax Number: (407) 3	39-7490
Contact Person's E-Ma	il Address:	btrendel@aquaamerica.	com				
. Water Treatment	Plant Information						
Plant Name:	Harmony Homes					Plant Telephone Number:	407-339-5424
Plant Address:	101 Plymouth Avenu	le.			City: Altamonte S	pr State: Florida	Zip Code: 32701
Type of Water Treatme	ent by Plant:	✓ Raw Ground Water	Purchased	Finished Water			
Permitted Maximum D	ay Operating Capacity of	Plant, gallons per day:		2:16;000			
	osection 62-699.310(4), F.					Class (per subsection 62-699.310(4), 1	
		Manus .		en Tribanse Chis			bill(c) Wolked : 15 15 15
Lead (Chic Leader)	William Trendel			je –	6411		
Contest Treatment							<u></u>
	Terrence McCarthy			C	4617	Days 1st Shift	Andrew Company of the
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		<u> </u>			l		
Cartification by I	.ead/Chief Operator						
			4-1-37	Li-f		plant identified in part I of this	raport I certify that the
						ng water treatment chemicals us	
						nat the following additional ope	
						rds of amounts of chemicals us	
	· · ·	•			these additional	operations records to the PWS	owner so the PWS owner ca
retain them, togeth	er with copies of this	report, at a convenient loca	tion for at least	t ten years.			
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Signature	Villa -		William T				
Signature and Date			Printed or	Typed Name			License Number

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									13,226			ad a disa
		·			·				410,000		and state of	(PPP)
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				omes	Harmony F	Plant Name:		2290 4 97		Mumber:	noiteaitina	PNS IA
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^{*} Refer to the instructions for this report to determine which plants must provide this information.



See Pages 4 for Instructions.						
I. General Information for the Month/Year of	November, 2004					
A. Public Water System (PWS) Information				•		
PWS Name: Harmony Homes	a de la composição de 			PWS Identification Num	ber: 3590497	
	Non-Transient Non-Community	Transient Non-Comm	nunity	Consecutive		
Number of Service Connections at End of Month:	61	• • • • • • • • • • • • • • • • • • •	Total	Population Served at End	of Month: 158	
PWS Owner: Aqua Utilities;Ff.	The second secon					
Contact Person: William Trendel			Cont	act Person's Title:	Senior Operator	
Contact Person's Mailing Address: 140 Hop	je St.		City: Longwood	State: Blouda	Zip Code:	32750
Contact Person's Telephone Number: 407-339	5424		Cont	act Person's Fax Number:	407-339-7490	
Contact Person's E-Mail Address:					The state of the s	
B. Water Treatment Plant Information						
Plant Name: Harmony Homes		The second state of the second state of the second state of the second state of the second state of the second		Plant Telephone Number	407-339-54	24
Plant Address: FOT Plymouth Avenue:			City: Altamonte Si	State: Florida	Zip Code:	32701
Type of Water Treatment by Plant:	aw Ground Water Purchase	ed Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gal	llons per day:	216,000	en l'Europe de la company de la company de la company de la company de la company de la company de la company La company de la company d	and the second s	and the second s	and the second second second second second second second second second second second second second second seco
Plant Category (per subsection 62-699.310(4), F.A.C.):	IX.		Plant (class (per subsection 62-69	9.310(4), F.A.C.):	ii.
		e e la la la la la la la la la la la la la	Econscionate		Forest Assistance in Vision Con-	
Exercit Crotic is Office to the William Trendel		je za	6411	Days Ist Shitt		
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Terry McCarthy		C	4647	Days Ist Shift		
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II Certification by Lead/Chief Operator					The state of the s	
I, the undersigned water treatment plant operate	or licensed in Florida, am the lead	l/chief operator of the v	water treatment p	plant identified in part	I of this report. I certify	that the
information provided in this report is true and a	accurate to the best of my knowled	dge and belief. I certif	y that all drinkin	g water treatment cher	micals used at this plant of	conform to NSF
International Standard 60 or other applicable sta	andards referenced in subsection	62-555.320(3), F.A.C.	I also certify th	at the following additi	ional operations records f	for this plant
were prepared each day that a licensed operator						
(2) if applicable, appropriate treatment process						
retain them, together with copies of this report,			nose additional	polations robot = 5 to the		
the state of the s	at a convenient location for at ica	oc con yours.				
White site A	17/7/04 0000	· Feoradial			C-6411	
		Trendel			License Nun	
Signature and Date	Printed	or Typed Name			License Nun	tinei

PWS Identification Number: 3590497	Plant Name	: Harmony Homes			
III. Daily Data for the Month/Year of:	November	, 2004			
Means of Achieving Four-Log Virus Inactivation/Remova	al: Free Chlorine	Chlorine Dioxide	Comb	ined Chlorine (Chloramines)	· ·
Ultraviolet Radiation Other (Describe):		, emornie Bioxide	, comb	med emorate (emoratames)	
Type of Disinfectant Residual Maintained in Distri	bution System: Free	Chlorine Com	bined Chlorine (Chloramines	Chlorine Dioxide	
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[•] 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. I. General Information for the Month/Year of: December, 2004 A. Public Water System (PWS) Information 3590497 PWS Name: Harmony Homes PWS Identification Number: Consecutive PWS Type: ✓ Community Non-Transient Non-Community Transient Non-Community 158 Number of Service Connections at End of Month: Total Population Served at End of Month: PWS Owner: Aqua Utilities Florida Contact Person's Title: Senior Pacilities Operator Contact Person: William Trendel Zip Code: 32750 State: Elorida Contact Person's Mailing Address: 140 Hope Street City: Longwood (407) 339-7490 Contact Person's Fax Number: Contact Person's Telephone Number: (407)339-5424 Contact Person's E-Mail Address: btrendel@aguaamerica.com: **B. Water Treatment Plant Information** 40.7-339-5424 Plant Name: Plant Telephone Number: Harmony Homes 32701 Plant Address: City: Altamonte Spr State: Florida Zip Code: 101 Plymouth Avenue Type of Water Treatment by Plant: ✓ Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000 Plant Class (per subsection 62-699.310(4), F.A.C.): Plant Category (per subsection 62-699.310(4), F.A.C.): 4617 Days 1st Shift ferrence McCarthy 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-6411 William Trendel License Number Printed or Typed Name Signature and Date

Page 1

PWS Identification Number: 3590497	Plant Name: Harmor	ıy Homes			
III. Daily Data for the Month/Year of:	December, 2004				
	Free Chlorine Chlorin	e Dioxide Coone	Combined Ch	lorine (Chloramines)	
Type of Disinfectant Residual Maintained in Distribution System	n: Free Chlorine	Combined Chlorine	(Chloramines)	Chlorine Dioxide	
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[•] Refer to the instructions for this report to determine which plants must provide this information.



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See Pages 4 for I		CAL DATA CONTROL OF	W. Gran					
I. General Informa	tion for the Moi	nth/Year of:	Jan. 2(, 5					
A. Public Water Sys	stem (PWS) Info	rmation		•				
PWS Name:	Harmony Hom	es				PWS Identification Nu	imber: 359	90497
PWS Type:	✓ Communi	ity Non-Tran	sient Non-Community	Transient Non-Co		Consecutive	<u></u>	
Number of Service Co	nnections at End of N	Aonth:	64			otal Population Served at En	d of Month: 158	<u>}</u>
PWS Owner:	Aqua Utilities,l	Florida				<u> </u>	 	
Contact Person:	William Trende			and the second second second		Contact Person's Title:	Senior Facilities Of	1. 16-17
Contact Person's Maili		140 Hope Street		,	City: Longwood		The state of the s	Code: 32750
Contact Person's Telep		(407)339-5424]c	Contact Person's Fax Number	(407) 339-7490	
Contact Person's E-Ma			јиаатенса.соп		<u></u>	<u> </u>	<u> </u>	The second secon
B. Water Treatmen	t Plant Informat	ion						
Plant Name:	Harmony Home	BS .	A STATE OF THE STA			Plant Telephone Numb		7-339-5424
Plant Address:	IOI Plymouth A	Avenue	en en en en en en en en en en en en en e		City: Altamont	e Spr State: Florida	Zip	Code: 32701
Type of Water Treatme		✓ Raw Groun		chased Finished Water			·	
Permitted Maximum D				216,000	<u></u>		e <u>nnyeng sakan kanangan dagap</u>	
Plant Category (per sul		4), F.A.C.):	ŤV.			nt Class (per subsection 62-6		C
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Certa/Cirrel Criteria	iora: William Trende	J.		e .	6411			, , , , , , , , , , , , , , , , , , ,
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								751 537 7 8 3 6
II. Certification by I	_ead/Chief Oper	ator 🚜			والمراجع المراجع			
I, the undersigned	water treatment p	lant operator licen:	sed in Florida, am the l	lead/chief operator of th	e water treatme	at plant identified in par	rt I of this report. I	certify that the
information provid	led in this report i	is true and accurate	to the best of my know	wledge and belief. I cer	tify that all drin	king water treatment ch	emicals used at this	plant conform to N
International Stanc	lard 60 or other a	pplicable standards	referenced in subsecti	ion 62-555.320(3), F.A.	C. I also certify	that the following add	itional operations re	cords for this plant
were prepared each	h day that a licens	sed operator staffed	l or visited this plant di	uring the month indicate	d above: (1) re	cords of amounts of che	emicals used and ch	emical feed rates; a
				rmore, I agree to provide				
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VS Identification	n Number:		3590497		Plant Name:	Harmony	Homes							
. Daily Data	for the Mo	nth/Year o	f:		Jan. 2005									
ans of Achievir	ng Four-Log \	/irus Inactiva	tion/Remova	il: Free	Chlorine I	Chlorine I	Diovide	C 0700	- I Co	mbined Chlor	ine (Chlora	mines)		
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^{*} Refer to the instructions for this report to determine which plants must provide this information.



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See Pages 4 for	Instructions.	#VALUE!			·		
I. General Inform	ation for the Month	/Year of: Eebu	ary 2005	<u> </u>	عملته فالمليب والمسروون		
A. Public Water S	ystem (PWS) Inform	nation					
PWS Name:	Harmony Homes					PWS Identification Number:	3590497
PWS Type:	✓ Community	Non-Transient Non-C	ommunity	Transient Non-Com	munity	Consecutive	
Number of Service C	Connections at End of Mon	th: 61				Total Population Served at End of Mo	onth: 158
PWS Owner:	Aqua Utilities,Fl.						
Contact Person:	Bill Trendel				10	Contact Person's Title: Se	enior Facility Operator
Contact Person's Ma	iling Address:	140 Hope Street			City: Longwood	od State: Florida	Zip Code: 32750
Contact Person's Tele	ephone Number:	(407) 339-5424				Contact Person's Fax Number: (4	07) 339-7490
Contact Person's E-M	1ail Address:	betrendel@aguaamer	ica.com				
B. Water Treatmen	nt Plant Information	1					
Plant Name:	Harmony Homes			·		Plant Telephone Number:	407-339-5424
Plant Address:	101 Plymouth Ave				City: Altamon	te Spr State: Florida	Zip Code: 32701
Type of Water Treatm		✓ Raw Ground Water	Purchased	Finished Water			
	Day Operating Capacity o			216,000		<u> </u>	
Plant Category (per s	ubsection 62-699.310(4),	F.A.C.):	IV			ant Class (per subsection 62-699.310	
		Nung 3		Lacense Class)-/Shrifi(s).Worked(0_s)-/-(
Lead/Chief Oper				C	6411	Days 1st Shift	
Oner:Operators:	Terry McCarthy			C	4617	Days 1st Shift	
							
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the state of the s	22022		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	<u> </u>			
I. Certification by	Lead/Chief Operato)r					
I, the undersigned	l water treatment plan	it operator licensed in Flor	ida, am the lead/c	hief operator of the	water treatme	nt plant identified in part I of	
•	-	-		-		- ·	als used at this plant conform to N
•	•				•	_	I operations records for this plant
							als used and chemical feed rates;
	*	-					WS owner so the PWS owner ca
		s report, <u>at</u> a convenient lo			mese auumuui.	an operations records to the r	TO OWNER SO THE LAND OWNER CO
retain them, toget	inci with copies of this	s report, at a convenient to	eation for at least	ten years.			
111/11	ian Deecc	11/3/2/06	William T	randal			C 6411
	WILLIAM	4/0/03					C-6411
Signature and Date			rnnied or	Typed Name			License Number

PWS Identific	cation Number:	359049	97	Plant Name: Harm	ony Homes					
II. Daily D	Oata for the N	Ionth/Year of:		Febuary 2005						
leans of Ach	ieving Four-Log	g Virus Inactivation/R	emoval: Free C	Chlorine Chlo	rine Dioxide	Ozone C	ombined Ch	lorine (Chlora	min e s)	
Ultraviol	let Radiation	Other (Desc	ribe):			•				
vne of Disi	infectant Resid	lual Maintained in I	Distribution System:	Free Chlorine	Combined	Chlorine (Chloran	nines)	Chlorine	Dioxide	
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the Tela		Brid School School	HW. Costone During	Parking Line	a la la compolici	kof Water Remined	ma UV.Do	ic mw.	Journal of the Contro	dovolves lakure Waters with Compo
Month : #X	Du Operation	t palt Kac	pd/= Peak/Flow.ine/Life	se amoutes	in/L Water Con-	Applicable : min/E	mW sec	em secient	System my/las	*Anneree as vior Athormat Operator Conditions Reposers Mathematics We divolve slating Water Society Compo Which Operation
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8	24.0	10,000	1.5						1.0	
50	24.0	15,000	1.8						1.3	
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315	24.0	15,200	0.9						1,1	
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10.5	24.0	13,000	1.8						1.2	
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205	24.0	12,000	1.5						1.1	
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gerage: 55.0		11,553								

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

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DEP Form 62-555.903(3)Allemate

#VALUE!

See Pages 4 for Instructions.					
. General Information for the Mon	there of: [an 2005]	Wanch Hers			
A. Public Water System (PWS) Infor				· · · · · · · · · · · · · · · · · · ·	
PWS Name: Harmony Home	s		····	PWS Identification Number:	3590497
PWS Type:	y Non-Transient Non-Commu	nity Transient Non-Co	ommunity	Consecutive	
Number of Service Connections at End of M	оль: 64		Total	Population Served at End of Mo	oth: 158
PWS Owner: Aqua Utilities,F	londa				
Contact Person: William Trendel			Contr	set Person's Title: Sen	ior Facilities Operator
Contact Person's Mailing Address:	140 Hope Street		City: Longwood	State: Florida	Zip Code: 32750
Contact Person's Telephone Number.	(407)339-5424			act Person's Fax Number: (40	7) 339-7490
Contact Person's E-Mail Address:	btrendel@aquaamerica.com	m			
B. Water Treatment Plant Informati	on				
Plant Name: Harmony Homes	S			Plant Telephone Number.	407-339-5424
Plant Address: 101 Plymouth A			City: Altamonte Sp	r State: Florida	Zip Code: 3270i
Type of Water Treatment by Plant:	Raw Ground Water	Purchased Finished Water			
Permitted Maximum Day Operating Capacity		216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV			lass (per subsection 62-699.310(4), F.A.C.): C
STEEL STATE OF THE				TO THE STATE OF TH	
William Trendel		lc	6411	<u> </u>	
以图1925年1920年193					
Телтенсе МсСан	thy	c	4617	Days 1st Shift	
					
					
(2000) 0.00 (2000) 0.00 (2000)				<u> </u>	
II. Certification by Lead/Chief Opera	ator				
I, the undersigned water treatment pl		m the lead/chief operator of t	he water treatment o	lant identified in part Loft	his report. I certify that the
information provided in this report is					
International Standard 60 or other ap					
were prepared each day that a license					
(2) if applicable, appropriate treatme					
			de these additional o	perations records to the PV	vs owner so the PWS owner can
retain them, together with copies of	mus report, ar a convenient locatio	n for at least ten years.			
11/11/21/1/	1/0/25				
William	7/0/03	William Trendel			C-6411
Signature and Date	•	Printed or Typed Name			License Number

Page 1



See Pages 4 for Instructions. I. General Information for the Month/Year of: April, 2005 A. Public Water System (PWS) Information PWS Identification Number. 3590497 PWS Name: Harmony Homes ✓ Cammunity Non-Transient Non-Community Transient Non-Community Consecutive PWS Type: Total Population Served at End of Month: 158 Number of Service Connections at End of Month: Agna Utilities Florida PWS Owner: Contact Person's Title: Senior Facilities Operator Contact Person: William Treadel City: Longwood State: Florida Zio Code: 32750 Contact Person's Mailing Address: 140 Hope Street Contact Person's Telephone Number: (407)339-5424 Contact Person's Fax Number: (407) 339-7490 bfrendel@aquaamerica.com Contact Person's E-Mail Address: B. Water Treatment Plant Information 407-339-5424 Harmony Homes Plant Telephone Number: Plant Name: Zip Code: 32701 IOF Phymouth Avenue City: Altamonte Spri State: Florida Plant Address: ✓ Raw Ground Water Purchased Finished Water Type of Water Treatment by Plant: Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000 IV Plant Class (per subsection 62-699.310(4), F.A.C.): Plant Category (per subsection 62-699.310(4), F.A.C.): William Trendel 6411 4617 Days 1st Shift Ferrence McCarthy II. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator ficeused 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

Priored or Typed Name
Page 1

William Trendel

DEP Form 62-555..900(3)Alternate

Signature and Date

retain them, together with copies of this report, at a convenient location for at least ten years.

5/4/05

C-6411

License Number

PWS Identifica	tion Number:	3	590497		Plant Name.	Harmony I	lomes							
III. Daily Da	ata for the N	IontlyYear of	:		April, 2005									
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•			d in Distribution	System:	Free Chic	vice [Comb	ined Chlorine	(Chloramin	~ F	Chlorine	Diorida		
Type of Disin	Heciant Kesh	and relative	O III DISTITUTIO	i System.					(Cinorana)		CNOTHE	Omade		
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^{*} Refer to the instructions for this report to determine which plants must provide this information.



General Inform	Instructions. ation for the Mont						
			May, 2005				
Public Water Sy	stem (PWS) Infor	mation					
PWS Name:	Harmony Homes	s					
PWS Type:	✓ Community	Y Non-Trans	ient Non-Community			PWS Identification Nu	mber: 3590497
Number of Service Co	onnections at End of Mc	onth:	64	☐ Transient Non	-Community	Consecutive	3390491
PWS Owner.	Aqua Utilides,Flo				Total	al Population Served et End	d of Month: 158
Contact Person:	William Trendel						138
Contact Person's Maili	ing Address:	140 Hope Street			Con	ract Person's Title:	Senior Facilities Operator
Contact Person's Telep	ohone Number.	(407)339-5424			City: Longwood	State: Florida	
Contact Person's E-Ma	iil Address:	htrondalia	aamerica.com		Con	aci Person's Fax Number:	Zip Code: 32750 (407) 339-7490
Water Treatment	t Plant Informatio	nn	idditichtea.txxiii				(409) 339-7490
Plant Name:	Hannony Homes						
Plant Address:	101 Plymouth Avr					Plant Telephone Numbe	F 402 232 6 6 7
ype of Water Treatme	int by Plant:	J Paus Craused	Matri	<u> </u>	City: Altamonte St	State: Florida	307-359-3-924
consisted Maximum Da	ay Operating Capacity	of Plant gallons and	water Purch	ased Finished Water			Zip Code: 32703
unit CHICKOLL (DCL 2017)	Section 62,600 310(a)	FACI		216,000			
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THE PARTY OF THE	Terrence McCarrlin	v				-	
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ertification by Le	ad/Chlef Operator	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	3				
uic widersigned w	aler treatment plant	Language III					of this report. Feeling that his
formation provided	d in this report is to	He and accurate to	m riorida, am me lea	encine obstator of t	he water freshment pl	ant lakiminen menari	tai tai
re prepared each o	day that a licensed .	Capie 2(au03).02 [C]	larenced in subsection	162-55 5.320(3), F. A	C. Laiso certify that	the following addition	رياد . هي الأموال و و موسوم هوان المدال بالأمواد هواند. - المانية
if applicable app	Montanta treatment	sherator statted or	visited this plant duri	ng the month indicat	ed above: (1) record	Cut associate of the	mai operations records for this plan.
					le these additional on	aration in a contract	mal operations records for this plan- icals used and chamical feed rates an
)	wini cobies of this	report, at a conver	ce records. Furthermonient location for at le	ast ten years.	adminonar op	ciations records to the	mai operations records for this plant leals used and chamical feed recost an PWS owner so the PWS owner can
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11 /111 -		11061					
Willes	Lady.	(d2105	William	1 Trendel			
nature and Date	and 1	42,05		or Typed Name			C-641f

PWS Identifi	ication N	Vamber:	35	90497	Plac	nt Name:	Harmony I	lames								
III. Daily	Data fo	ir the M	outhA'ear of:		Ma	y. 2005										
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^{*} Refer to the instructions for this report to determine which plants must provide this information.

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MONIHLY OPERATION REPORT FOR PWSS TREATING DAW GROUND WATER OR CONCRASED FINGUES HOLES



See Pages 4 for L	structions.					
. General Informa	tion for the Month/	Year of: June, 200	05			
A. Public Water Sys	tem (PWS) Inform:	ation				
PWS Name:	Harmony Homes				PWS Identification Number:	3590497
PWS Type:	Community	Non-Transient Non-Comm	nunity Transient Non-C	ommunity	Consecutive	
Number of Service Con	nections at End of Mont	h: 64	•	Total	Population Served at End of Month	: 158
PWS Owner:	Aqua Utilities Flori	da				
Contact Person:	William Trendel			Cont	act Person's Title: Senior	Facilities Operator
Contact Person's Maili	ng Address:	140 Flope Street		City: Longwood	State: Florida	Zip Code: 32750
Contact Person's Telep	hone Number:	(407)339-5424		Cont	act Person's Fax Number: (407)	339-7490
Contact Person's E-Ma	il Address:	btrendel@aquaamerica.o	om			
3. Water Treatment	Plant Information	ı				
Plant Name:	Harmony Homes				Plant Telephone Number:	407-339-5424
Plant Address:	101 Plymouth Aven	iγc		City: Allamonte Sp	r State: Florida	Zip Code: 32701
Type of Water Treatm:	ent by Plant:	Raw Ground Water	Purchased Finished Water			
	ay Operating Capacity of		216,000			
Plant Category (per sul	section 62-699.31((4), F	-A.C.): IV			Class (per subsection 62-699.310(4),	
			THE RESERVE OF THE PERSON NAMED IN			
	William Trendel		Ċ	6411		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		<u> </u>				
			· · · · · · · · · · · · · · · · · · ·			
	Terrence McCarthy	· · · · · · · · · · · · · · · · · · ·	<u>C</u>	4617	Days 1st Strift	<u> </u>
						en en en en en en en en en en en en en e
					<u> </u>	
I Cariffordian by I	cad/Chief Operato					
			1) 1/1-5			
_	-	· -	, am the lead/chief operator of	-		
	•		-	•	-	ised at this plant conform to NSF
				-	-	perations records for this plant
were prepared eac	h day that a licensed	operator staffed or visited thi	s plant during the month indic	ated above: (1) recor	rds of amounts of chemicals t	ised and chemical feed rates; and
				ide these additional of	operations records to the PWS	Sowner so the PWS owner can
retain them, togeth	er with copies of this	s report, at a convenient locati	ion for at least ten years.			
	/					
(1./11/10)	a Dudel	7 7/5/05	William Trendel			C-6411
Signature and Date			Printed or Typed Name			License Number

VS lácn	ufication	Number		3590497		Plant Nanie:	Harmony H	lomes							
		for the Mon				June, 2005									•
ans of	Achieving	g Four-Log Vi	ros Inactiva	ation/Removal:	√ FrœCi	nlorine	Chlorine D	ioxide	Ozone	Coml	uined Chlo	rine (Chloran	nines)		
		naiJeibe				_									
ne of I	Disinfect	tant Residual	l Maintain	ed in Distrib	ution System:	Free Chi	orinc [Combin	ed Chlorine	(Chloramine	rs) [Chlonne E	Dioxide		
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ou mu		X	19,600												

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



See Pages 4 for Instructions.				
I. General Information for the Month/Year of: July, 2005				
A. Public Water System (PWS) Information		. ,	<u> </u>	
PWS Name: Harmony Homes	•		PWS Identification Num	ber: 3590497
PWS Type:	nity Transient Non-C	Community	Consecutive	
Number of Service Connections at End of Month: 64		Tota	al Population Served at End	of Month: 158
PWS Owner: Aqua Utilities, Florida				
Contact Person: William Trendel		Con	tact Person's Title:	Senior Facilities Operator
Contact Person's Mailing Address: 140 Hope Street		City: Longwood	State: Florida	Zip Code: 32750
Contact Person's Telephone Number: (407)339-5424		Con	tact Person's Fax Number:	(407) 339-7490
Contact Person's E-Mail Address: btrendel@aquaamerica.com	n			
3. Water Treatment Plant Information				
Plant Name: Harmony Homes			Plant Telephone Number	
Plant Address: 101 Plymouth Avenue		City: Altamonte S	pr State: Florida	Zip Code: 32701
Type of Water Treatment by Plant:	Purchased Finished Water		· · · · · · · · · · · · · · · · · · ·	
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000		<u> </u>	
Plant Category (per subsection 62-699.310(4), F.A.C.):	AS THE STREET OF		Class (per subsection 62-69	
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Pear/Print Presiden William Trendel	<u>[C</u>	6411		
Other Opperators (1982)				
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Terrence McCarthy		4617	Days 1st Shift	
				
				
				
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l Certification by Lead/Chief Operator				
I, the undersigned water treatment plant operator licensed in Florida, a	m 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 m	_		-	
International Standard 60 or other applicable standards referenced in si	•	•	-	
were prepared each day that a licensed operator staffed or visited this p			•	- · · · · · · · · · · · · · · · · · · ·
(2) if applicable, appropriate treatment process performance records. If				
retain them, together with copies of this report, at a convenient location		de these additional	operations records to t	the 1 775 Gwilet so the 1 775 Gwilet can
- William & Gudel) 8/3/05	William Trendel			C-6411
Signature and Date	Printed or Typed Name			License Number

PWS Identificat	ion Number:	35	590497	Plant Name: Harmony	Homes			
I. Daily Da	ta for the M	onth/Year of:		July, 2005				
eans of Achie	ving Four-Log	Virus Inactivation	on/Removal: Free C	Chlorine Chlorine	Dioxide	Combined C	hlorine (Chloramines)	
Ultraviolet	Radiation	Other (1	Describe):					
voe of Disint	fectant Resid	ual Maintained	in Distribution System:	▼ Free Chlorine	Combined Chlorine	(Chloramines)	Chlorine Dioxide	
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^{*} Refer to the instructions for this report to determine which plants must provide this information.

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WS Type:	PWS Name: Harmony Ho					
WS Type:		mes			PWS Identification Number:	3590497
WS Owner: Aqua Utilities, Florida	'WS Type: ✓ Commu		Community Tran	sient Non-Community	Consecutive	
Contact Person: William Trendel Contact Person's Mailing Address: 140 Nope Street Contact Person's Mailing Address: 140 Nope Street Contact Person's Telephone Number: (407)339-5424 Contact Person's E-Mail Address: Contact Person's E-Mail Address: Contact Person's E-Mail Address: Contact Person's E-Mail Address: Contact Person's E-Mail Address: Contact Person's E-Mail Address: Contact Person's E-Mail Address: Contact Person's E-Mail Address: Contact Person's E-Mail Address: Contact Person's E-Mail Address: Contact Person's Fax Number: (407) 339-7490 Contact Person's Fax Number: (407) 339-7490 Contact Person's Fax Number: (407) 339-7490 Contact Person's Fax Number: (407) 339-7490 Contact Person's E-Mail Address: Contact Person's E-Mail Address: Contact Person's Fax Number: (407) 339-7490 Contact Person's Fax Number:	lumber of Service Connections at End of	f Month: 64		[7]	otal Population Served at End of Mon	th: 158
City: Longwood State: Florida Zip Code: 32750 contact Person's Telephone Number: (407) 339-5424 Contact Person's E-Mail Address: Ontact Person's E-Mail Address: Offendel@aquaamnerica.com	WS Owner: Aqua Utilitie	s,Florida				
Contact Person's Telephone Number: (407) 339-5424 Contact Person's Ex Number: (407) 339-7490 Contact Person's E-Mail Address: offended acquatamental accommendation of the Plant Information Contact Person's Ex Number: City: Altramonte Spr State: Florida Zip Code: 32701 Code: 32701 Code: C	Contact Person: William Tren	ıdel		C	Contact Person's Title: Seni	or Facilities Operator
Nater Treatment Plant Information Iant Name: Flarmony Homes Roll Plymouth Avenue Purchased Finished Water Purchased Fin	Contact Person's Mailing Address:	140 Hope Street		City: Longwoo	d State: Florida	Zip Code: 32750
Vater Treatment Plant Information Int Name: Harmony Homes Plant Telephone Number: 407-339-5474 Int Address: IOI Plymouth Avenue Purchased Finished Water Purchased F	Contact Person's Telephone Number:	(407)339-5424	The second secon	(Contact Person's Fax Number: (407) 339-7490
lant Name: Harmony Homes City: Altramonte Spr State: Florida Zip Code: 32701 Appe of Water Treatment by Plant: Plant against permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000 Plant Class (per subsection 62-699.310(4), F.A.C.): Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant Class (per subsection 62-699.310(4), F.A.C.): City: Altramonte Spr State: Florida Zip Code: 32701 Plant	Contact Person's E-Mail Address:		ica.com			
Int Address: IOI Plymouth Avenue City: Altramonte Spr State: Florida Zip Code: 32701 ype of Water Treatment by Plant:	Vater Treatment Plant Informs	ation				- Company
yee of Water Treatment by Plant: Purchased Finished Water 216;000 ant Category (per subsection 62-699.310(4), F.A.C.): Plant Class (per subsection 62-699.310(4), F.A.C.): Plant Class (per subsection 62-699.310(4), F.A.C.): Plant Class (per subsection 62-699.310(4), F.A.C.): Comparison of the property of the pr	lant Name: Harmony Hor	mes	, may version	a contract of the second secon	Plant Telephone Number:	Special de l'opposité de la constitue de la co
ermitted Maximum Day Operating Capacity of Plant, gallons per day: ant Category (per subsection 62-699.310(4), F.A.C.): Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(4), F.A.C.): Capacity of Plant Class (per subsection 62-699.310(The second secon		e Spr State: Honda	Zip Code: 32701
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	ertification by Lead/Chief Ope the undersigned water treatment		rida am the lead/chief or	parator of the water treatme	at plant identified in part Lof th	is report. I certify that the

PWS I	dentification	on Number:		3590497	······································	Plant Name:	Нагтопу І	Iomes								
III. D	Daily Data	a for the N	Ionth/Year	of:		August, 2005										
			g Virus Inacti		al:	Chlorine	Chlorine F	Dioxide	Ozone	Comi	hined Chlor	ine (Chlora	mines)			
	ltraviolet I			er (Describe)		,	Chiornic L	····	, 525/10	, com		(
-					ibution System:	Free Chl	orine I	Combi	ned Chlorin	e (Chloramine	es)	Chlorine	Dioxide			
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1 10 1	X	24.0	10,700		1.0					 			0.9			
29AE.24	Х	24.0	11,000		1.6			<u> </u>		 		<u> </u>	1.1			
Hotal -			418,700							····						
Aygerage			13,506								-					
Maximum			17,700	-												

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



See Pages 4 for Instructions.					
I. General Information for the Mont	th/Year of: September,	2005	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		
A. Public Water System (PWS) Infor	mation	•			
		建制的基件 120.5 10.4 14		PWS Identification Number:	3590497
PWS Type:		nity Transient Non-Con	nmunity 🔲	Consecutive	
Number of Service Connections at End of M		erenegatic gerung:	Total 1	Population Served at End of Month:	158
	ocida (1977)	A POTE OF THE PARTY OF THE PART			
Contact Person: William Trendel	The state of the s		Conta	ct Person's Title: Senior Facil	lities Operator
Contact Person's Mailing Address:	140 Höpe Street		City: Longwood		Zip Code: 32750
Contact Person's Telephone Number:	(407)339-5424		Conta	ct Person's Fax Number: (407) 339-7	490
Contact Person's E-Mail Address:	btrendel@aquaamerica.com	n de la la la la la la la la la la la la la	ANAS AS ASSESSED.		
B. Water Treatment Plant Informati					The state of the s
Plant Name: Harmony Homes				Plant Telephone Number:	407-339-5424
Plant Address: 101 Plymouth A			City: Altamonte Spi	State: Florida	Zip Code: 32701
Type of Water Treatment by Plant:	✓ Raw Ground Water	Purchased Finished Water	•	· · · · · · · · · · · · · · · · · · ·	
Permitted Maximum Day Operating Capacity		216,000			
Plant Category (per subsection 62-699.310(4			Plant C	lass (per subsection 62-699.310(4), F.A.	
The insert operators that the first		Licenso Clas	AT THE RESERVE OF THE PARTY OF	PLEASE PROPERTY DAY GOVERNOR	(s) Worked
(Lead) (Circle Departer (William Trendel			6411		
	在19 50年的第二人。1950年代,1950年				
Terrence McCan	thy seems to the s	were the continue	4617	Days 1st Shift	
Harrie Santage					
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		INTER SE DE VINCE SE LE COMPANION DE LE COMPAN		The second secon	
工作等的现在分词形式的					
II. Certification by Lead/Chief Opera	ator				
I, the undersigned water treatment p		m the lead/chief operator of th	e water freatment r	lant identified in part L of this re	port. I certify that the
information provided in this report is		v Ingulados and baliaf Tos	tific that all drinkin	o water treatment chemicals used	at this plant conform to NSF
International Standard 60 or other ap		ty knowledge and benefit i co	C I also south th	at the following additional opera	tions records for this plant
Ware transfer of the day of the A	pheaole standards referenced in s	noscendiroz-555.520(5), i	.C. I also certify in	de formula of chamicals used	and chemical feed rates: and
were prepared each day that a licens	ed operator statied or visited this	orant during the month indicat	ed above. (1) lecoi	us of amounts of chemicals used	more as the DWC owner can
(2) if applicable, appropriate treatme			e these additional c	peranons records to the F w 5 ov	viiei so tite i wa ownei can
retain them, together with copies of	this report, at a convenient locatio	n for at least ten years.			
1.1.				A CONTROL DESCRIPTION OF THE CONTROL	and the second s
Mulliantal	1 10/6/05	William Trendel	weether family		C-6411
Signature and Date		Printed or Typed Name			License Number
		,			

PWS Identification	n Number:		3590497	To see the day of	Plant Name:	Harmony H	omes		A political			amawa Alika		
III. Daily Data	for the M	onth/Year	of:		September, 200)5	i. Ta i II.		Treath a spi		Literiki.		kyto jila, tenjeja	
Means of Achievi	ng Four-Log	Virus Inactiv	vation/Remova	al: 🔽 Free C	hlorine	Chlorine D	oxide	Ozone	Com	oined Chlori	ne (Chloran	nines)		
Ultraviolet F	Radiation	Cthe	er (Describe):					· ·		<u> </u>				
Type of Disinfe	ctant Resid	lual Maintai	ned in Distri	bution System:	Free Chk	orine [Combin	ed Chlorine	(Chloramine	es)	Chlorine I	ioxide		
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and the second	100	Producti	De le provinción	Custing Forms	to Feat Dick	ugless HgJ	Lenger	pil privato	ge givred and			Distributions	t Ingo yes Bacine Water	System components
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Aveologe sembles		12,630										,		
Maximum -	A Committee	17,700		•	•									

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



See Pages 4 for Instructions.					
1. General Information for the Month/Year of: October, 200)5				
A. Public Water System (PWS) Information					
PWS Name: Harmony Homes			PWS Identification Numb	ber: 3590497	
PWS Type: Community Non-Transient Non-Commun	ity Transient Non-Comn	nunity	Consecutive		
Number of Service Connections at End of Month: 64			Population Served at End o	of Month: 158	
PWS Owner: Aqua Utilities, Florida					
Contact Person: William Trendel		Conta	et Person's Title:	Senior Facilities Operator	
Contact Person's Mailing Address: 140 Hope Street		City: Longwood	State: Florida	Zip Code:	32750
Contact Person's Telephone Number: (407)339-5424		Conta	et Person's Fax Number:	(407) 339-7490	
Contact Person's E-Mail Address: btrendel@aquaamerica.com	1				
B. Water Treatment Plant Information					
Plant Name: Harmony Homes			Plant Telephone Number:	407-339-54	24
Plant Address: 101 Plymouth Avenue		City: Altamonte Spr	State: Florida	Zip Code:	32701
Type of Water Treatment by Plant:	Purchased Finished Water	L			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):			lass (per subsection 62-699		
Licensed Operators	License Class	License Number	No Company of Di	ay(s) / Shift(s) Worked	
Lead/Chief Operator: William Trendel	C	6411			
Other Operators:					
Terrence McCarthy	C	4617	Days 1st Shift		
Surger (1979) 1.2. 18					
II. Certification by Lead/Chief Operator					
I, the undersigned water treatment plant operator licensed in Florida, ar					
information provided in this report is true and accurate to the best of m	y knowledge and belief. I certi	fy that all drinking	g water treatment cher	micals used at this plant	conform to NSF
International Standard 60 or other applicable standards referenced in su	ubsection 62-555.320(3), F.A.C	C. I also certify tha	at the following additi	ional operations records	for this plant
were prepared each day that a licensed operator staffed or visited this p	lant during the month indicated	l above: (1) recor	ds of amounts of cher	micals used and chemical	I feed rates; and
(2) if applicable, appropriate treatment process performance records. F					
retain them, together with copies of this report, at a convenient location			1		
	The route ton yours.				
William Gurdel 11/3/05	William Trendel			C-6411	
Signature and Date				1.icense Nu	
Signature and Date	Printed or Typed Name			License Nui	HOCI

PWS I	dentification	on Number:		3590497		Plant Name:	Harmony H	lomes							
111.	aily Dat	a for the N	lonth/Year	of:	,	October, 2005									
			g Virus Inacti		val: Free (Thlorine I	Chlesias D	in a de	ŕ- 0		bined Chlori	(CL1)	.:		
		Radiation		er (Describe)		ontornic ,	Chiorine D	oloxide	, Ozone	j Com	bined Chlori	ne (Unioran	nines)		
⊦					ibution System:	Free Chl		Combi	and Chlorina	(Chloramin		Chlorine [Vavida		
Type) Distille												Dioxide	TOWN THE PERSON OF THE PERSON	1000012
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	Days Plan	UP HA		1977	Loyest Residual	ContactTime	Before or at	上的可	10.753	Life con	1000	Caratra	Lower Residual	CARACTER SOLVEN	
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Month	S TO STATE OF	Coperation	g 0 1	Ramerpd	areak Flow, mult	Peak Flow	minut	Water, Co	if Applicable	Anim 4	mW-sec/cm	sec/cm	System mg/ts	hinopives Taking Water System G Out of Operation	
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^{*} Refer to the instructions for this report to determine which plants must provide this information.



See Pages 4 for Instructions.					
I. General Information for the Month/Year of: Nov. 20	05				
A. Public Water System (PWS) Information					
PWS Name: Harmony Homes			PWS Identification Number	er: 3590497	
PWS Type:	munity	Community	Consecutive		
Number of Service Connections at End of Month: 64		Total	Population Served at End of	f Month: 158	
PWS Owner: Aqua Utilities, Florida			****		
Contact Person: William Trendel		Conta	ct Person's Title:	Senior Facilities Operator	
Contact Person's Mailing Address: 140 Hope Street		City: Longwood	State: Florida	Zip Code:	32750
Contact Person's Telephone Number: (407)339-5424		Conta	ct Person's Fax Number:	(407) 339-7490	
Contact Person's E-Mail Address: <u>btrendel@aquaamerica.</u>	<u>com</u>				
B. Water Treatment Plant Information					
Plant Name: Harmony Homes			Plant Telephone Number:	407-339-542	24
Plant Address: 101 Plymouth Avenue		City: Altamonte Sp	r State: Florida	Zip Code:	32701
Type of Water Treatment by Plant:	Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):			lass (per subsection 62-699.		
Lieensed Operators Name	License Cla		Da	y(s) l Shift(s) Worked	19. 19. 19. 19. 19. 19. 19. 19. 19. 19.
Lead/Chief Operator: William Trendel	C	6411			
Other Operators:					
					
Terrence McCarthy	C	4617	Days 1st Shift		
II. Certification by Lead/Chief Operator					
I, the undersigned water treatment plant operator licensed in Florid	a, am the lead/chief operator of	the water treatment n	lant identified in part I	of this report. I certify	that the
information provided in this report is true and accurate to the best of					
International Standard 60 or other applicable standards referenced					
were prepared each day that a licensed operator staffed or visited the					
(2) if applicable, appropriate treatment process performance record					
retain them together with coning of this report at a consider the	ation for at location was:	ide mese additional o	perations records to the	erws owner so the PW	5 owner can
retain them, together with copies of this report, at a convenient local	ation for at least ten years.				
and it is the desired					
- CULUAR VIELOCO / 13/1/03	William Frendel			<u>C-6411</u>	
Signature and Date	Printed or Typed Name			License Num	aber

	- ST	dentificatio	n Number:		3590497		Plant Name:	Harmony	Homes		i					
Manual Ashieving Four-Low The functional (Prince Charles) Charles	III	aily Data	for the M	onth/Year	of:		Nov. 2005									
The control of the								Chlorine	Diovide	CORE	f Con	shiped Chlor	ine (Chlorae	nines)		
Type of Disinfection Residual Maintained in Distribution System Fee Charling					,,, (100 C	,	Chlorine	Dioxide) Ozone) Con	nomed emor	me (emora	milesy			
Company Comp	_						Francis	loring	T Combi	ned Chlorine	e (Chloramii	nes) [Chiorine I	Dioxide		
	ype) DISING													The state of the s	
		1000	1.0	17,14%		. I Calculations, or	UV Dose, t	o Demostat	e Four-Lo	3. Virus ina	cuvation, it	Applicable	120	31.00		r ar
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Avgerage: 11,803		e c														

Page 2

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OEP Form 62-555.900(3)Alternate

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



See F	'ages	4	for	Instru	uctions.
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See rages 4 for instructions.			
General Information for the Month/Year of: Dec. 2005			
A. Public Water System (PWS) Information			
PWS Name: Harmony Homes		PWS Identification Nu	mber: 3590497
PWS Type:	✓ Transient Non-Com	nmunity Consecutive	
Number of Service Connections at End of Month: 64		Total Population Served at En	d of Month: L58
PWS Owner: Aqua Utilities,Florida			
Contact Person: William Trendel		Contact Person's Title:	Senior Facilities Operator
Contact Person's Mailing Address: 140 Hope Street		City: Longwood State: Florida	Zip Code: 32750
Contact Person's Telephone Number: (407)339-5424		Contact Person's Fax Number:	(407) 339-7490
Contact Person's E-Mail Address: btrendel@aquaamerica.com			
B. Water Treatment Plant Information			
Plant Name: Harmony Homes		Plant Telephone Numb	er: 407-339-5424
Plant Address: 101 Plymouth Avenue		City: Altamonte Spr State: Florida	Zip Code: 32701
	Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):		Plant Class (per subsection 62-6	
alicensed Operators, with the second of Name	License Class	License Number	Day(s) //Shift(s) Worked
Dead/Ghlen@paratotic William Trendel	C	6411	
Clifer Operators: 4-4-			
Terrence McCarthy	C	4617 Days 1st Shift	
			· ·
I. Certification by Lead/Chief Operator			
	the lead/abit Faranatas of the	and the book of the state of th	at I of this report I cortify that the
I, the undersigned water treatment plant operator licensed in Florida, am			
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, Lagree 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 f	or at least ten years.		
Willian Steerd 1/6/06	William Trendel		C-6411
Signature and Date	Printed or Typed Name		License Number
			Eliverso Frantivo