

Leisure Lakes

Docket No. 060368-WS	CMP
Booker No. 000000 WG	COM
Application to Increase Rates and Charges	CTR
For a "Class A" Utility In	ECR _
Florida	GCL
Florida	OPC
VOLUME 6	RCA
Book 7	SCR
Book /	SGA
Set 27 of 57	SEC
Containing	OTH

Monthly Operating Reports

Additional Engineering Requirements

Aqua Utilities Florida, Inc.

DOCUMENT NUMBER - DATE

00857 JAN 26 8

FPSC-COMMISSION CLERK

Aqua Utilities Florida, Inc. Monthly Operating Reports

Leisure Lakes

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Year: 2005		
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General Information January, 2004 Public Water System (PWS) Information PWS Name: Leisure Lakes / Covered Bridge				
and N - 1 . 1 1 . C . 15 . 1				
30.000 0.000			PWS Identification Number:	5280064
PWS Type:	Transient Non-Com	munity [Consecutive	
Number of Service Connections at End of Month: 269		Total	Population Served at End of Month	n: 616
PWS Owner: Florida Water Services				
Contact Person: Craig Anderson		Conta	ct Person's Title: VP Er	nvironmental Services
Contact Person's Mailing Address: 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: (407)	598-4217
Contact Person's E-Mail Address: craiga@florida-water.com				
Water Treatment Plant Information				
Plant Name: Leisure Lakes			Plant Telephone Number:	(813) 639-0331
Plant Address: 101 ParkView Circle S.		City: Lake Placid	State: Florida	Zíp Code: 33852
	sed Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	72,000			
Plant Category (per subsection 62-699.310(4), F.A.C.):		Plant C	lass (per subsection 62-699.310(4)	
Licensed Operators Name	License Class	License Number	Day(s) /	Shift(s) Worked
Lead/Chief Operator: David W. Faircloth	С	8189	6 Days/Week - 1st shift	
Other Operators: P. Howard Bateman	С	7884	1 Day/Week	
		<u></u>		
			<u> </u>	
Contification by Lond/Chi-FO				
Certification by Lead/Chief Operator				
, the undersigned water treatment plant operator licensed in Florida, am the lear				
nformation provided in this report is true and accurate to the best of my knowle	edge and belief. I cert	ify that all drinking	g water treatment chemicals	used at this plant conform to N
nternational Standard 60 or other applicable standards referenced in subsection	62-555.320(3), F.A.C	C. I also certify that	at the following additional o	perations records for this plant
were prepared each day that a licensed operator staffed or visited this plant duri	ng the month indicated	d above: (1) recor	ds of amounts of chemicals	used and chemical feed rates; a
2) if applicable, appropriate treatment process performance records. Furtherm				
nake them available for review upon request.	, .			·
David	W. Faircloth	,		8
	d or Typed Name		· · · · · · · · · · · · · · · · · · ·	License Number
DEP Form 62,555, 900/3)				

Effective August 28,2003

PWS I	D:		5280064	1	Plant Name:	Leisure Lake	es						
III. D	aily Data	for the Mo	nth/Yea		January, 2004								
	of Achievin traviolet R		irus Inac	tivation/Removal: er (Describe):	Free Cl	nlorine [Chlorine		☐ Ozone	┌ Combin	ed Chlorine	(Chloramines)	
Туре	of Disinfec	tant Residua	d Mainta	ained in Distribution	on System:	Free Ch	lorine	☐ Comb	ined Chlorin	e (Chlorami	nes)	Chlorine Di	oxide
			, d	CT Calculations,	or UV Dose, t	o Demostate	Four-L	og Virus Ina	activation, i	f Applicabl	e*1343-12		
W.					CTC	alculations	514 T.			UV 1	Dose, 🥳		
Day of the Month	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During, Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg min/L	Temp of	pH of Water,	Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum, UV Dose Required, mW sec/cm ²	Remote Point in Distribution	Emergency of Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water, System Components Out of Operation
1	24.0	49,000		2.4								1.4	
2	24.0	37,000	ļ	2.4								1.4	<u></u>
3	24.0	26,000		2.4								1.4	
5	24.0 24.0	39,000 39,000		2.4		1		ļ				1.4	
6	24.0	31,000		2.4			 		<u> </u>			1.4	
7	24.0	16,000		2.4		 	 					1.4	
8	24.0	21,000		2.4		1	 	 				1.4	
9	24.0	23,000	<u> </u>	2.4								1.4	
10	24.0	21,000		2.4		l						1.4	
11	24.0	22,000				i							
12	24.0	22,000		2.4								1.4	
13	24.0	23,000		2.4								1.4	
14	24.0	22,000		2.4								1.4	
15	24.0	24,000		2.4								1.4	
16	24.0	23,000		2.4								1.4	
17	24.0	24,700		2.4								1.4	
18 19	24.0 24.0	24,100		2.4						ļ		1.4	
20	24.0	21,200 23,000		2.4	<u></u>		ļ					1.4	the state of the s
21	24.0	22,000		2.4								1.4	
22	24.0	21,000		2.4		 	 		<u> </u>			1.4	
23	24.0	24,000		2.4			<u> </u>	 	 	,		1.4	
24	24.0	23,000		2.7			<u> </u>	 					
25	24.0	23,000					 	 					
26	24.0	24,000		2.4			}	<u> </u>				1.4	
27	24.0	24,000		2.4			i					1.4	
28	24.0	25,000		2.4								1.4	
29	24.0	26,000		2.4								1.4	
30	24.0	26,000		2.4								1.4	
31	24.0	22,000		2.4								1.4	
Total		791,000											
Avgerag		25,516											
IVIAKIMII		49 (00)											

^{*} Referentia: https://doi.org/10.1001/j.me. For this report to determine which plants must provide this information. Effective August 28, 2003



See Pages 4 for Instructions	See	Pages	4	for	Instructions	
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	on		February, 20	04								
. Public Water Syste	em (PWS) Inform	nation										
PWS Name:	Leisure Lakes / Co	overed Bridge							PWS Identification Numb	er:	6280064	
PWS Type:	✓ Community	Non-Trans	ient Non-Community	Tr	ansient Non-Com	munity	,		Consecutive			
Number of Service Conn	ections at End of Mon	ıth:	274				ľ	Total P	Opulation Served at End of	f Month:	628	
PWS Owner:	Florida Water Serv	vices										
Contact Person:	Craig Anderson							Contac	t Person's Title:	VP Environm	ental Services	5
Contact Person's Mailing	Address:	P.O. Box 609520				City:	Orlando		State: Florida		Zip Code:	32860-9520
Contact Person's Telepho	one Number:	(407) 598-4199					l l	Contac	t Person's Fax Number:	(407) 598-421	17	
Contact Person's E-Mail	Address:	craiga@florid	a-water.com									
Water Treatment I	Plant Information	n										
Plant Name:	Leisure Lakes								Plant Telephone Number:		(813) 639-	0331
Plant Address:	101 ParkView Circ	cle S.				City:	Lake Pla	acid	State: Florida		Zip Code:	33852
Type of Water Treatment	t by Plant:	✓ Raw Groun	d Water P	urchased Finis	shed Water							
Permitted Maximum Day	y Operating Capacity o	of Plant, gallons per d	lay:		72,000							
Plant Category (per subse	ection 62-699.310(4),	F.A.C.):	IV						ass (per subsection 62-699			
Licensed Operator	s	Nar	ne		License Class	Lice	nse Nur	nber	Day	(s) / Shift(s)	Worked	
Lead/Chief Operator	r: David W. Faircloth	h			C		8189		6 Days/Week - 1st shift			
Other Operators:	., *-											
	-											
a version versions	· 6.											
	To											
	16											
and the Marie Service	4-	,										
14 (2.4)												
Certification by Le												
I, the undersigned w	ater treatment plan	int operator licens	sed in Florida, am t	he lead/chie	f operator of the	e wate	er treatm	ent p	lant identified in part	I of this repo	rt. I certif	y that the
information provide	d in this report is t	true and accurate	to the best of my k	nowledge ar	nd belief. I cert	ify th	at all dri	inking	water treatment cher	nicals used a	t this plant	conform to
NSF International S	tandard 60 or othe	er applicable stan	dards referenced in	subsection	62-555.320(3),	F.A.C	C. I also	certi	fy that the following	additional op	erations re	cords for th
nlant were prepared	each day that a lic	censed operator s	taffed or visited thi	is plant durir	ng the month inc	dicate	d above	: (1)	records of amounts o	f chemicals u	ised and ch	emical feed
rates: and (2) if ann	licable appropriat	te treatment proce	ess performance rec	ords Furth	ermore. I agree	to ret	ain these	e add	itional operations rec	ords at the pl	ant site for	at least ten
years and to make th									1	1		
years and to make in	icin avallable 101 1	review upon requ	CSI.									
				David W. Fair	cloth							81

DEP Form 62-555, 900(3) Effective August 28,2003

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											28,310	Э	Ауветаву
											000,128		Total
													L
	6.0								0.2		900,05	24.0	67
	0.1								0.2		000,22	24.0	87
	0.1								1.2		24,000	0.42	LT
	0.1								0.2		000'97	24.0	97
	0.1					<u> </u>	1		0.2		000,52	74 0	52
	0.1								0.2		25,000	0.42	74
	0.1								0.2		000,72	24.0	57
											000,62	0.4.0	77
											56,000	0.4.0	17
	0.1								0.2		23,000	0.42	07
	UL								0.2		71,000	0.4.0	61
	I'I								0.2		000,52	0.4.0	81
	0.1								5.0		000,82	0.4.0	LI
	0.1								61		000'61	0.42	91
	0.1								61		27,000	0.4.0	۶I
	0.1								61		24,000	24.0	ti
	t l								7.4		990,55	24.0	٤١
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											000,55	0.4.0	8
											33,000	24.0	L
	t'l			}					b '7		33,000	0.4.0	9
	⊅`I								t Z		000'18	0.42	ς
	τī	I		1					2.4		31,000	0.42	Þ
	t'l			ł					7.4		29,000	0.4.0	ε
	τī								t 7		38,000	0.4.0	7
	τl								t'7		31,000	0.42	l
Out of Operation	System, mg/L	sec/cm ^z	mW-sec/cm ²	7. J\nim	if Applicable	Water, ^{OC}	J\nim	minutes	Peak Flow, mg/L	pd3	lag	Орегацоп	Month
Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components	Lowest Residual Disinfectant Concentration at	mW- My Dose Medmicd	Lowest	Minimum CT			Lowest CT Provided Before or at First Customer During Peak	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow	Lowest Residual Disinfectant Concentration (C) Beloire or at First Customer During	Peak Flow Rate,	Met Quantity of Finished Water Water	Hours plant	Day of
		> soc	IAN	An cas	2.4 Bit							1	
100 p. 124 12 de nove 126 12 de novembre 126		**************************************	Applicable	di ,noitevito	sni zuni V g	Four-Lo	Demostate	or UV Dose, to	CT Calculations, o	est (1			
	oid eninoldD —	(sət	imsroldO) e	ined Chlorina 1	Сошрі	orine	Г Ресс СЫ	u System:	oitudinteid ni bəni	einisM l	ant Residua	oəlnisiQ 1	Type o
	(Chloramines)	ed Chlorine	onidmoD 🗍	oroso _]	Chlorine	orine Γ	dO son 7	ivation/Removal:	ins Inact	V god-mo4 g		Means o
						·		February, 2004	:10	тр/Уеаг	for the Mon	aily Data	III' D
						5	reignie rake	Plant Name:		\$900879			JI SMd
								1	L	v 2000C9		.(n swa

Page 2

^{*} Referentiscinstruction for this report to determine which plants must provide this information.



rmation Covered Bridge by Non-Transient Non-Co fonth: 275 ervices P.O. Box 609520 (407) 598-4199		ransient Non-Comi	Total Conta	PWS Identification Number: Consecutive Population Served at End of Month: ct Person's Title: VP Envi State: Florida ct Person's Fax Number: (407) 59	6280064 630 ronmental Services Zip Code: 32860-9:
Non-Transient Non-Co fonth: 275 ervices P.O. Box 609520 (407) 598-4199 craiga@florida-water.co ion		ransient Non-Com	Total Conta	Consecutive Population Served at End of Month: ct Person's Title: VP Envi State: Florida	630 ronmental Services Zip Code: 32860-9:
fonth: 275 ervices P.O. Box 609520 (407) 598-4199 craiga@florida-water.c		ransient Non-Comi	Total Conta	Population Served at End of Month: ct Person's Title: VP Envi State: Florida	ronmental Services Zip Code: 32860-9:
P.O. Box 609520 (407) 598-4199 craiga@florida-water.c	<u>om</u>		Conta	ct Person's Title: VP Envi State: Florida	ronmental Services Zip Code: 32860-9:
P.O. Box 609520 (407) 598-4199 craiga@florida-water.c	<u>om</u>		City: Orlando	State: Florida	Zip Code: 32860-9:
P.O. Box 609520 (407) 598-4199 craiga@florida-water.c ion	<u>om</u>		City: Orlando	State: Florida	Zip Code: 32860-9:
(407) 598-4199 craiga@florida-water.c	om		 	<u> </u>	
craiga@florida-water.c ion Circle S.	<u>om</u>		Conta	ct Person's Fax Number: (407) 59	8-4217
ion Circle S.	<u>om</u>				
Circle S.					
				Plant Telephone Number:	(813) 639-0331
✓ Raw Ground Water			City: Lake Placid	State: Florida	Zip Code: 33852
	Purchased Fin	ished Water			
y of Plant, gallons per day:		72,000			
i), F.A.C.):	IV			lass (per subsection 62-699.310(4), F.	
Name		License Class	License Number	Day(s) / Shif	t(s) Worked
		С	8189	6 Days/Week - 1st shift	
man		С	7884	2 Days Every Other Weekend	
	· · · · · · · · · · · · · · · · · · ·				
	olant operator licensed in Flor	plant operator licensed in Florida, am the lead/chie	ooth C C C C C C C C C C C C C C C C C C C	olant operator licensed in Florida, am the lead/chief operator of the water treatment p	oth C 8189 6 Days/Week - 1st shift C 7884 2 Days Every Other Weekend Days Every Other Weekend

Effective August 28,2003

PWS ID):		6280064		Plant Name:	Leisure Lak	es				· · · · · · · · · · · · · · · · · · ·		
ш	aily Data	for the Moi	nth/\'ea	r of	March, 2004								
	raviolet R	ig Four-Log v adiation	Coth	tivation/Removal: er (Describe):	Free Cl	nlorine [Chlorine		C Ozone	Combin	ed Chlorine	(Chloramines)	
Type o	f Disinfec	tant Residua	al Mainta	ained in Distribution	on System:	☐ Free Ch	lorine	[Comb	oined Chlorin	e (Chlorami	nes)	Chlorine Di	oxide
	7.		15.14	CT Calculations,	or UV Dose, t	o Demostate	e Four-La	og Virus In:	activation, i	f Applicabl	e*		
										UV			
1 1			Page .			S 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1921.48	- 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		- 1,5400 ve-5			
			85			Lowest CT		795744	te et Marie et Marie	轰			
					Disinfectant	Provided		- 10 mm		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			And the state of t
		Net Quantity		Lowest Residual Disinfectant	Contact Time (T) at C	Before or at First			1.5		Minimum	Lowest Residual Disinfectant	The Late of the Engineering
	44	of Finished	Peak	Concentration (C)	Measurement	Customer		18.4	1 × 170	Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Hours plant	to a district the state of	Flow	Before or at First	Point During	During Peak			Minimum CT	The second second	Required,	Remote Point in	Conditions, Repair or Maintenance Work that
the	in	Producted,	Rate,	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	Operation	gal.	gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1		27,000		1.9								0.9	
2		20,000		1.8						ļ		0.9	
3		33,000		1.8								0.9	<u> </u>
5		27,000	ļ	1.8				ļ				0.8	
6		24,000 25,000		1.8				<u> </u>				0.8	
7		25,000					 	 					
8		25,000		1.8		 	ļ					0.8	
9		29,000	· · · · · · · · · · · · · · · · · · ·	1.8		 	 					0.8	
10		22,000		1.8		i						0.8	
11		22,000		1.8								0.8	
12		25,000		1.8								0.8	
13		24,000		1.8								0.8	
14		32,000	ļ	1.8						<u> </u>		0.8	
15 16		30,000 23,000		1.8		ļ	ļ	ļ		 		0.8	
17		22,000		1.8				 				0.8	
18		26,000		1.8								0.8	
19		25,000		1.8				 		<u> </u>		0.8	
20		27,000					L						
21		27,000											
22		27,000		1.8						ļ		0.8	
23		26,000		1.8		ļ						0.8	
24		24,000		1.8				ļ			·	0.8	
26		23,000 26,000		1.8								0.8	
27		24,000		1.8			 	 	1			0.8	
28		27,000		1.8			 		 	 		0.8	
29		23,000		1.8		 		 	 			0.8	
30		28,000		1.8								0.8	
31		24,000		1.8								0.8	
Total	- 12×2	792,000			-							 -	
Ауретаре		25 548											

33,000

Maximum

^{*} Referential instruction which plants must provide this information.

Effective August 28, 2003



See Pages 4 for Instr	uctions.								
. General Information	for the Month/Y	Year of: April, 2004							
A. Public Water System	ı (PWS) İnforma	tion							
PWS Name:	Leisure Lakes / Cove					PWS Identification Number	er:	5280064	
PWS Type:	✓ Community	Non-Transient Non-Commun	nity T	ransient Non-Com	munity	Consecutive			
Number of Service Connec	tions at End of Month					Population Served at End of	Month:	616	· · · · · ·
PWS Owner:	Florida Water Servic								
Contact Person:	Craig Anderson				Conta	ct Person's Title:	VP Environmer	tal 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:	(407) 598-4217		
Contact Person's E-Mail Ac	idress:	craiga@florida-water.com							
8. Water Treatment Pla	ant Information								
Plant Name:	Leisure Lakes					Plant Telephone Number:		(813) 639-03	331
Plant Address:	101 ParkView Circle	S.			City: Lake Placid	State: Florida		Zip Code:	33852
Type of Water Treatment by	y Plant:	✓ Raw Ground Water	✓ Purchased Finite	ished Water					
Permitted Maximum Day C				72,000					
Plant Category (per subsect	ion 62-699.310(4), F	A.C.): IV				lass (per subsection 62-699.		С	
Licensed Operators		Name		License Class	License Number	Da	y(s) / Shift(s)	Worked	
Lead/Chief Operator:	David W. Faircloth			С	8189	6 Days/Week - 1st shift			
Other Operators:									
				<u> </u>					
	<u> </u>			ļ					
				1					_
	<u>.</u>			l	<u></u>	L			
Certification by Lead	I/Chief Operator			•					
		operator licensed in Florida, a	m the lead/chie	of operator of the	water treatment r	lant identified in part I	of this report	Leertify	that the
		ue and accurate to the best of m							
		cable standards referenced in s							
		operator staffed or visited this							
		process performance records.			these additional of	perations records to th	e PWS owner	r so the PW	/S owner can
retain them, together w	vith copies of this	report, at a convenient location	n for at least ter	n years.					
			p						0.1
0: 15			David W. Fair				-	T' N'	81
Signature and Date			Printed or Typ	ped Name				License Nun	nber

PWS I	D:		-	6280064		Plant Name:	Leisure Lak	es						
П	Daily Data	for the N	lonth/Year	of:		April, 2004								
			g Virus Inacti		ugl: Fr (
	traviolet R		G Virus macii Othe		•	Chlorine [Chlorine Di	oxide	Ozone	Comb	ined Chlori	ne (Chlorar	nines)	
F														
Type	of Disinte	ctant Resid	dual Maintai		ibution System:					(Chloramine		Chlorine I	Dioxide	
1000				(CT Calculations, or	r UV Dose, to	Demostate	Four-Log	Virus Inac	tivation, if I	Applicable ^a	Tarista India		
				.746		CT Calc	ulations	A st						
1.00										5 No 3 No 400	14/48/34	4 4 7 - 34		
					1. 《整点式选	24 Sept. 16	Lowest CT	56			., . ///		A SALVEY OF SALVEY SALV	
1000	Days Plant			1	Lowest Residual	Disinfectant Contact Time	Provided Before or at				46	No.	Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First				ATTEMPT	Minimum	Disinfectant	
1	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of		Hours plant			Before or at First	* Point During	During Peak			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	ÜV Dose,	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm2	sec/cm ²	System, mg/L	Out of Operation
1	X	24.0	26,000		1.8								0.8	
2	Х	24.0	19,000		1.8								0.8	
3	ļ	24.0	24,000											
4	ļ	24.0	24,000					ļ						
- 5	Х	24.0	25,000		1.8					<u> </u>			0.8	
6	Х	24.0	24,000		1.8		<u> </u>					ļ	0.8	
7	X	24.0	19,000		1.8				ļ <u>-</u>				0.8	
8	X	24.0	27,000		1.8	ļ	ļ			ļ			0.8	
10	X	24.0 24.0	26,000		1.8			ļ					0.8	
11	X	24.0	30,000 19,000	-	1.8					 	···		0.8	
12	X	24.0	19,000		1.8	 	-	.		 			0.8	
13	X	24.0	24,000		1.8		 	 	 	 			0.8	
14	X	24.0	20,000		1.8					1	-		0.8	
15	Х	24.0	18,000		1.8				1				0.8	
16	Х	24.0	18,000		1.8					<u> </u>			0.8	
17		24.0	20,000											
18		24.0	20,000											
19	X	24.0	19,000		1.8								0.8	
20	X	24.0	20,000		1.8								0.8	
21	Х	24.0	25,000		1.8		ļ	ļ				ļ	0.8	
22	Х	24.0	15,000		1.8							 	0.8	
23	X	24.0	20,000		1.8							ļ	0.8	
24	X	24.0	23,000	ļ	1.8		ļ	ļ		ļ <u></u> -		ļ	0.8	
25	X	24.0	19,000		1.8				-	<u> </u>			0.8	
26	X	24.0 24.0	13,000		1.8	-		-	-				0.8	
28	X	24.0	16,000	·	1.8	 			-			 	0.8	
29	X	24.0	13,000		1.8	 	 	 				 	0.8	
30	x	24.0	16,000		1.8	†			-	 		 	0.8	l
	 ^	24.0	10,000		1,8			 	1	 		<u> </u>	,	
Total	1 - 1 14. jan ja 14. jan ja		620,000			•	J			<u> </u>	L	<u> </u>		
Avgera			20,667											

30,000

Maximum

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

Docket No. 060368-WS

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

Florida

Report Missing:

Monthly Operating Report

Leisure Lakes

May 2004

Aqua Utilities Florida, Inc.



See Pages 4 for Instr								
I. General Information	for the Month/Year of: June, 2004							
A. Public Water System	(PWS) Information							
	Leisure Lakes / Covered Bridge				PWS Identification Number	: 6	280064	
PWS Type:	✓ Community Non-Transient Non-Community	Transie	nt Non-Com	nunity	Consecutive			
Number of Service Connect					Population Served at End of !	Month: 6	30	
PWS Owner:	Florida Water Services							
Contact Person:	Craig Anderson			Contac	et Person's Title:	VP Environmenta	al Services	
Contact Person's Mailing A	ddress: P.O. Box 609520	***		City: Orlando	State: Florida	Z	Lip Code: 32860-	9520
Contact Person's Telephone	Number: (407) 598-4199				ct Person's Fax Number:	(407) 598-4217		
Contact Person's E-Mail Ad								
B. Water Treatment Pla	ant Information							
Plant Name:	Leisure Lakes				Plant Telephone Number:	(3	813) 639-0331	
Plant Address:	101 ParkView Circle S.			City: Lake Placid	State: Florida	Z	Lip Code: 33852	
Type of Water Treatment by	y Plant:	Purchased Finished	Water					
Permitted Maximum Day O	perating Capacity of Plant, gallons per day:	72,00	00					
Plant Category (per subsecti	ion 62-699.310(4), F.A.C.):			Plant Cl	lass (per subsection 62-699.3		C	
Licensed Operators	Name	Lic	ense Class	License Number	Day	(s) / Shift(s) V	Vorked	
Lead/Chief Operator:	David W. Faircloth	С		8189	6 Days/Week - 1st shift			
Other Operators:	Donald P. Gavoni	C		5674	2 Days Every Other Weeker	nd		
						· · · · · · · · · · · · · · · · · · ·		
				<u> </u>				
	1/61: 60							
II Certification by Lead	/Chief Operator		0.1		1 1	-Callian man	I contifue that the	
I, the undersigned water	er treatment plant operator licensed in Florida, am	the lead/chief ope	erator of the	water treatment p	iant identified in part i	or this report.	i certify that the	4. NCE
information provided i	in this report is true and accurate to the best of my	knowledge and be	elief. I cert	ity that all drinking	g water treatment chem	icais used at tr	nis piant conform	H to NSF
International Standard	60 or other applicable standards referenced in sub	section 62-555.32	20(3), F.A.C	C. I also certify the	at the following additio	nal operations	records for this	piant
were prepared each da	y that a licensed operator staffed or visited this pla	ant during the mon	th indicate	d above: (1) recor	ds of amounts of chemi	cals used and	chemical feed ra	ates; and
(2) if applicable, appro	opriate treatment process performance records. Fu	irthermore, I agree	to provide	these additional o	perations records to the	PWS owner	so the PWS owr	ner can
retain them, together w	with copies of this report, at a convenient location f	for at least ten yea	rs.					
		David W. Faircloth				_		8199
Signature and Date		Printed or Typed Na	ame			Ī	icense Number	
-								

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											000,41				
											450,000	1 2	5.00	Total	
-														·	
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	L'0								8.1		14,000	24.0	X	67	
	9.0								9.1		000,81	24.0	X	87	
	9.0								91		000,71	0.42	X	LT	
	L'0								0.2		000,8	24.0	X	97	
	L'0								8 ⁻ 1		10,000	74.0	X	52	
	8.0								61		24,000	24.0	X	74	
	8.0								81	İ	12,000	24.0	X	23	
	8.0								8.1		12,000	74.0	X	77	
	8.0								8.1		14,000	0.4.0	X	17	
											14,000	24.0		- 07	
											14,000	74.0		. 61	
	8.0								8.1		16,000	0,4.0	X	81	
	9.0								8.1		000'11	0.42	X	LI	
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	8.0								8.1		000,41	0.42	X	SI	
	8.0								81		000'L1	24.0	X	7 1	
	8.0								0.2		13,000	24.0	X	εī	
	8.0			ļ					<i>L</i> '1		000'6	24.0	X	71	
	8.0			<u> </u>					8.1		000,£1	0.4.0	X	: ! ! :	
	8.0								8.1		000,11	24.0	X	10	
	8.0								0.2		000,£1	24.0	X	6	
	8.0								0.2		12,000	24.0	X	8	
	6.0								7.2		13,000	24.0	X	L	
											13,000	24.0		9	
	<u> </u>										13,000	24.0		ς	
	9.0								8.1		14,000	0.42	X	Þ	
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	9.0	L							8.1		000,21	74.0	Х	7	
	8.0								1.2		12,000	0.4.0	X	1	
Out of Operation	System, mg/L	_wo/oes_	mW-sec/cm ²	J/nim	əldsəilqqA li	Water, ^o C	.I\nim	sənuiui	Peak Flow, mg/L	Rate, gpd.	lag	Operation	("X"	Month	
Involves Taking Water System Components.	nonudrusid	-Wm	UV Dose,	Required, mg	pH of Water,	Temp of	Flow, mg-	Peak Flow,	Customer During	Peak Flow	Producted,	ui	(Place	әұр.	
Conditions; Repair or Maintenance Work that	Remote Point in			Minimum CT			During Peak	garmG taio9	Before or at First		Water	Hours plant	Operator	Day of	
Emergency or Abnormal Operating	Concentration at	UV Dose	Lowest		To the control of the		Customer	Measurement	Солсепизаной (С)		bədzini To		Visited by	ا مدرون	
	Disinfectant	muminiM:	- 11 ()				triri	Ons(T)	Disinfectant		Net Quantity	l	To baffted or		
	Lowest Residual		2000世纪				Before or at	Contact Time	Lowest Residual		3.7		Days Plant	1	
					A Sec.		Provided	Disinfectant		.5		"			
		100		MA 444.6			Lowest CT							3.15	
		11. 12. 12. 12. 12. 12. 12. 12. 12. 12.	AN OWNER			<u> </u>		Attitute (1.5)	The second of th						
		5500	PALIS E	\$231 m	<u> 4 41 Mai 18</u>			CT Calor							
	· 25.55 (5.05)	1	* policable	∖1i noitsvi	Virus Inac	20A-mo	Demostate I	UV Dose, to I	T Calculations, or)				tita i ing	
	əbixoi	Chlorine D	(s	(Chloramine	ed Chlorine	Combin	Tine Frince		ibution System:	ned in Distr	ristnisM lsul	tant Resid	of Disinfe	Type c	
											_ Огре		Traviolet R	-	
	(səun	e (Culoran	ined Chlorir	ฉพอว I	orone	aprixi	отпопис ти	Thorine T							
		1107	. 1101			- F :- C					vitas Inactiv				
								June, 2004		:to	onth/Year	for the M	stad ylist	IIII D	
780064 Plant Name: Leisure Lakes										t900879			.0	LWJI	
Plant Name Licitus ave								LPWS ID: 6280064							

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

Docket No. 060368-WS

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

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Leisure Lakes

July - December 2004

Aqua Utilities Florida, Inc.

Docket No. 060368-WS

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

Florida

Report Missing:

Monthly Operating Report

Leisure Lakes

January - December 2005

Aqua Utilities Florida, Inc.