Palm Port

Docket No. 060368-WS

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

Florida

VOLUME 6

Book 8

Set 14 of 24

Containing
Additional Engineering Requirements

Discharge Monitoring Report

Aqua Utilities Florida, Inc.

DOCUMEN' NUMBER-DATE

FPSC-COMMISSION CLERK

Aqua Utilities Florida, Inc. Discharge Monitoring Reports

Palm Port

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CLASS SIZE:

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME

Florida Water Services

PERMIT NUMBER:

FLA011742-001-DW3P

MAILING ADDRESS: P.O. Box 609520 Orlando, FL 32860-9520 I IMIT:

Final Minor REPORT: Monthly GROUP: Domestic

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road

East Palatka, FL 32131

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

NO DISCHARGE FROM SITE:

ſΙ

COUNTY:

Putnam

MONITORING PERIOD--From: 01/01/2004 To: 01/31/04

5 day, 20C M	ample	Quantity of I	_oading	Units		Quality or Conce	ntration		No.	Frequency	Sample Type
5 day, 20C M	•				L				Ex.		Campic Type
						2.3					0
DADLE O. I. COCCO II	leasurement					2.3		mg/L	0	Monthly	Grab
	ermit equirement					20.0 (An: Avg.)	123,457	img(L)		Montply: A	e i Grabalisa
BOD, Carbonaceous Sa	ample	2.00		2 222 200 1000				11 (200 20 10 10 10 10 10 10 10 10 10 10 10 10 10	200		A STATE OF THE PARTY OF THE PAR
	leasurement					2U	2U	mg/L	0	Monthly	Grab
PARM Code 80082 I	ermit 💢 📜	50 15 _{60 (d} . 187	78-11 (48-17) ki	-44		30.0	43 60.035 f	100			
Mon Site No. EFA-1 Ri	equirement	Test of A	West of the second		100	(Mo:Avg.)	(Max)	amg/et		Monthly	Grab'
Solids, Total Sa	ample	PAGE 11 TO SELECT THE CONTROL	199 8 199	AND SERVICE		No. of the last of			- 100 (CONT.)		
Suspended Me	leasurement		ļ			3.0		mg/L	0	Monthly	Grab
Control of the Contro	ermit equirement		4.4			20:0 (An: Avg.):	100	mg/L		Monthly	Grab.
Solids, Total Sa	ample					Marie In Mar			Becker Tables		
Suspended Me	easurement					1.1	1.1	mg/L	0	Monthly	Grab
"我们是我们的一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	ermit equirement					.30,0 (Mo.Avg.)	60.0 * (Max)	⊭ mg/L	in.	MonthlyX	Grab
pH Sa	ample		***************************************	* WI 1915 1951 (S. 1916)	7.0			CII			
Me	easurement				7.3		7.5	S.U.	0	5 Days/Week	Meter
THE PARTY OF THE P	ermit equirement				6.0 (Min)		8.5 (Max)	su v		d Days Wook	S Mater 2
,	ample easurement					1.2		#/100mL	0	Monthly	Grab
CONTRACTOR OF THE PROPERTY OF	ermit equirement					, 200 (An, Avg2)		#/(Q0m)_		• Monthly (*)	g Grabe at
Coliform, Fecal Sa	ample easurement					1U	1 U	#/100mL	0	Monthly	Grab
PARM Code 74055	ermit. equitement					200) (MoGeoMean)	800 s	Manna.		s afficience 4	GIAD
Total Residual Chlorine	ample		OF AND SERVICE SARRY OF THE		1.4			m o /	0	E David Mari	
· Me	easurement				1.4			mg/L	U	5 Days/Week	Meter
PARM Code 50060 A Pe Won Site No EFA-1 A Re		a substitution of			0.55 (Min) 5%		14.4	oroji.		Days Week W	Marie Motor sur

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGEN	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson A-4894		(386) 329-1122	04/02/19

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742-001-DW3P

					MONITORING F	ERIODFrom:	01/01/2004	To:		01/31/04	
Parameter		Quantity	of Loading	Units	Qu	ality or Cond	entration		No. Ex.	Frequency	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement				<u> </u>		0.83	mg/L	0	Monthly	Grab
PARM Code 00620 I Mon.Site No. EFA-1	Permit Requirement		第二日本			14 1 1 1 G	12.0 Maxs	/mg/L		Monthlye	de Gro
Flow	Sample Measurement	0.016		mgd					0	5 Days/Week	Elasped Time meters
PARM Code 50050 G Mon Site No. INF-1	Permit Requirement	0.030 ≱ (An.Avg.)	W	mgd			Marine (1)	r jir	1	G Days (Week &	Elasped Time meters
Flow	Sample Measurement	0.015		mgd					0	5 Days/Week	Elasped Time meters
PARM Code 50050 P Mon.Site No. INF-1	Permit Requirement	Report (Mo:Avg:)		mgd			100		78	5 Days/Week	Elasped Time motors
BOD, Carbonaceous 5 day, 20C	Sample Measurement					150		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon Site No. INF-1	Permit Requirement				i din i	Report (Mo Avg.)		, mg/L		Monthly	agine a Graba Tillion
Solids, Total Suspended	Sample Measurement				The state of the s	120	the second secon	mg/L	0	Monthly	Grab
PARM Code 00530 G Mon Site No. INF-1	Permit Requirement	7. \$1.00				(Report (Mo.Avg.)		mg/L		Monthlyge	Grab
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement		7			**************************************	55.6%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon Site No. CAL-1	Permit Requirement						Report (Mo.Total)	Percent		Monthly	Galculated .

Permit Number:

FLA011742-001-DW3P

Facility: Palm Port WWTP

MONITORING PERIOD

From: 01/01/2004

To: 01/31/2004

	CBOD5 (mg/L)	TSS (MGL)	pH (SU)	Fecal Coliform Bacteria (#/100ML)	TRC (For Disinfect) (MG/L)	Nirtrogen, Nirtate, Total (as N) (MG/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (MGL)
Code	80082	00530	00400	74055	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-2	EFA-3	EFA-4	EFA-5	FLW-1	INF-1	INF-1
1			7.3		1.9		0.015		
2			7.3		1.8		0.023		
3			7.4		1.8		0.007		
4							0.015		
5			7.5		2.2		0.015		
6			7.5		2.2		0.015		
7	2U	1.1	7.5	1U	2.0	0.8	0.015	150	120
8			7.5		1.8		0.015		
9			7.5		1.4		0.013		
10			7.5		2.0		0.015		
11			"				0.016		
12			7.5		2.2		0.016		
13			7.5		2.0		0.021		
14			7.4		1.4		0.014		
15			7.4		2.2		0.008		
16			7.4		2.2		0.019		
17			7.4		2.2		0.013		
18							0.012		
19		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7.4		2.2		0.012		······
20			7.4		2.2		0.016		
21			7.4		2.2		0.015		
22			7.4		2.2		0.013		
23			7.4		2.2		0.015		
24			7.3		1.6		0.017		
25				-			0.015	:	
26	-		7.3		1.8		0.015	i i	
27			7.3		2.2		0.010		,
28			7.3		2.2	 	0.021		
29			7.3		2.2		0.014	-	***
30			7.3		1.6		0.014		
31			7.4		1.8		0.019		
Total		1.1			53.7	0.8	0.465	150	120
Mo.Avg.		0.0	7.4	i		0.0	0.015	5	

2 0						
Day Shift Operators:	Class:	С	Certification No.:	8173	Name: Grant Newlin	
Evening Shift Operators:	Class:		Certification No.:			
Night Shift Operators:	Class:		Certification No.:			
Lead Operator:	Class:	Α	Certification No.:	4894	Name: Paul Thompson	

3

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Florida Water Services

Orlando, FL 32860-9520

PERMIT NUMBER:

FLA011742-001-DW3P

MAILING ADDRESS:

P.O. Box 609520

LIMIT:

Final

CLASS SIZE:

Minor

REPORT: Monthly GROUP: Domestic

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

LOCATION.	Dog Branch Road			MONTORING		Rapid inflitte	ation			
	East Palatka, FL 32	131		NO DISCHARG	E FROM SITE:	[]				
COUNTY:	Putnam			MONITORING I	PERIODFrom:	02/01/2004	To:		02/28/04	
Parameter		Quantity of Loading	Units		Quality or Cond	entration		No.	Frequency	Sample Type
								Ex.		
BOD, Carbonaceous	Sample						T			
5 day, 20C	Measurement				2.3		mg/L	0	Monthly	Grab
PARM Code 80082: Y Mon.Site No. EFA-1	Permit	BACKSTAP		A Albania	20.0 (An Avg.) ¹	1 14 14	.mg/C		- Monthly 1	Grab
BOD, Carbonaceous	Sample		A 14794 4021		7.00					
5 day, 20C	Measurement				2U	2U	mg/L	0	Monthly	Grab
PARM Code 80082 I	Permit 100 m	N	F 2.4	11.0	30.0	60.0			1 4 4 4	
Mon Site No EFA-1	Requirement		N. A. W.	100	(Mo.Avg.)	(Max)	rmg/E		Monthly i as	Grab
Solids, Total	Sample				2.8		mg/L	0	Monthly	Grab
Suspended	Measurement		January Commission Com		·	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	my/L	U	MOIRINY	GIAD
PARM Code 00530 Y. MoniSite No. EFA-1	Permit Requirement		F 54		20.0 (An: Avg:)		mg/L		Monthly	Grab
Solids, Total	Sample				1.2	1.2	mg/L	0	Monthly	Grab
Suspended	Measurement				1.2		IIIg/L	U	Monthly	GIAD
PARM Code 00530 I Mon Site No. EFA-1	Permit Regulrement				30.0 (Mo.Avg.)	60.0. (Max)	i mg/L		Monthly	Tara Grab
pН	Sample			7.2		7.4	S.U.	0	5 Days/Week	Meter
	Measurement		, b. // / ********************			7.4	3.0.	U	5 Days/Week	Meter
PARM Code 00400 I Mon Site No EFA-1	Permit Requirement	Jack St.		6.0° (Min)	er _{ta} en s	8.5. (Max)	r Sust		P 6 Days (Week W	Meter
Coliform, Fecal	Sample Measurement				1.2		#/100mL	0	Monthly	Grab
PARM Code 74055 Y	Remit		10/2015/09	A 10 10 10 10 10 10 10 10 10 10 10 10 10	200			1 1 1 1		
Mon Site No. EFA-1	Requirement			Section 18.88	* (An:Avg:)		#/400mL		A Mominical	Crab T
Coliform, Fecal	Sample									
	Measurement				1U	10	#/100mL	0	Monthly	Grab
PARM Code 74055 4	Permit 'au		1.1	falls to he	14- 4200/414/5	14 jy jel8001yd				
Von Site No. EFA-1	Requirement:				(MoGeoMean)	Max.			Monthly	
Total Residual Chlorine	Sample									
(For Disinfection)	Measurement			1.0			mg/L	0	5 Days/Week	Meter
TADILO									The Total Co. Man 1947 of Man	
PARM Code 50060 A	Permit		* 1	0.5			mid		e Jana Wawa	Basic Motor
Mon Site No. EFA-1	Requirement	1. 10mm (1700年1897年1894年1894年1894年1894年1894年1894年1894年1894		(Min) W	ALC: NO PERSONAL PROPERTY AND ADDRESS OF THE PER					

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. Lam aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Paul Thompson A 4894	NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGEN	TELEPHONE NO.	DATE (YY/MM/DD)
300-329-1122 04/03/19	Paul Thompson A-4894		386-329-1122	04/03/19

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742-001-DW3P

MONITORING GROUP NUMBER.: R-001

					MONITORING I	PERIODFrom:	02/01/2004	To:		02/28/04	
Parameter		Quantity	of Loading	Units	Qu	ality or Cond	entration		No. Ex.	Frequency	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement						0.38	mg/L	0	Monthly	Grab
PARM Code 00620 1	Permit Requirement	796				No.	f2.0 Max	mgile			e de Grab
Flow	Sample Measurement	0.016		mgd					0	5 Days/Week	Elasped Time meters
PARM Code 50050 G Mon Site No. INF-1	Permit Requirement	0:030 (An.Avg.)		mgd						5 Days Wook	Elasped Tyne moters
Flow	Sample Measurement	0.017		mgd					0	5 Days/Week	Elasped Time meters
PARM Code 50050 P Mon Site No. INF-1	Permit Requirement	Report (Mo:Avg:)		ingd s						.5 Days/Week	Elasped Lime meters
BOD, Carbonaceous 5 day, 20C	Sample Measurement					120		mg/L	0	Monthly	Grab
PARM Code 80082. G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		1, mg/L		. Montaly	a Grab
Solids, Total Suspended	Sample Measurement					95		mg/L	0	Monthly	Grab
PARM Code 00530 G Mon Site No. INF-1	Permit Requirement	7				Report (Mo:Avg.)	Land State	mg/L1		Mo _n thlys re	g Grab
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement	100 100 100 100 100 100 100 100 100 100					54.4%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon:Site No. CAL-1	Permit . Requirement			1.2%			Report (Mo Total)*			Mouthly	L Calculated

3

Permit Number:

FLA011742-001-DW3P

Facility: Palm Port WWTP

MONITORING PERIOD

From: 02/01/2004

To: 02/28/2004

	CBOD5 (mg/L)	TSS (MGL)	pH (SU)	Fecal Coliform Bacteria (#/100ML)	TRC (For Disinfect) (MG/L)	Nirtrogen, Nirtate, Total (as N) (MG/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (MGL)
Code	80082	00530	00400	74055	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-2	EFA-3	EFA-4	EFA-5	FLW-1	INF-1	INF-1
1							0.018		
2			7.4		2.2		0.018		
3			7.4		2.2		0.018		
4	2U	1.2	7.4	1U	2.0	0.4	0.017	120	95
5			7.4		1.8		0.016		
6			7.4		2.0		0.018		
7			7.4		2.2		0.019		
8							0.016		
9			7.4		2.0		0.016		
10			7.4		1.8	:	0.020		
11			7.4		2.0		0.013		
12			7.3		1.6		0.012		
13			7.3		1.2		0.015		****
14			7.3		1.3		0.020		
15							0.016		
16			7.3		1.7		0.016		
17			7.3		2.0		0.019		
18			7.3		2.2		0.015		
19			7.2		1.4		0.017		
20			7.2		1.8		0.018		
21		· -	7.3		1.8		0.020		
22							0.015		
23			7.3		2.0		0.015		
24			7.3		1.6		0.018		
25			7.3		1.0		0.025		
26			7.3		1.4		0.022		
27			7.3		2.0		0.019		
28			7.4		1.6		0.020		
29									
30									
31									
Total		1.2			42.8	0.4	0.490	120	95
Mo.Avg.		0.0	7.3		1.4	0.0	0.016	4 !	3

Day Shift Operators:	Class:	Certification No.:	Name:
Evening Shift Operators:	Class:	Certification No.:	
Night Shift Operators:	Class:	Certification No.:	
Lead Operator:	Class: A	Certification No.: 4894	Name: Paul Thompson

3

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Florida Water Services

Orlando, FL 32860-9520

PERMIT NUMBER:

FLA011742-001-DW3P

MAILING ADDRESS:

P.O. Box 609520

LIMIT: CLASS SIZE: Final

Minor

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

East Palatka, FL 32131

NO DISCHARGE FROM SITE:

[]

REPORT: Monthly

GROUP: Domestic

COUNTY:	Putnam				MONITORING F	PERIODFrom:	03/01/2004	To:		03/31/04	
Parameter		Quantity of I	Loading	Units		Quality or Conce	entration		No. Ex.	Frequency	Sample Type
BOD, Carbonaceous	Sample					2.3					Ob
5 day, 20C	Measurement					2.3		mg/L	0	Monthly	Grab
PARM Code 80082 Y	Permit		1. 11.11		Commission and the	20.0	3454444		444	Monthly St.	
Mon.Site No. EFA:1	Requirement	The state of the s	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			(Ani Avg.)		, within		Monthly	a ##Grab.r
BOD, Carbonaceous	Sample					2U	2U	mg/L	_	Monthly	Grab
5 day, 20C	Measurement						20	mg/L	U	Wonthly	GIAD
PARM Code 80082 1	Permit	ar gill	1 4 4 6 6 6 6 6			30.0	21.60,0;			L Monthly 3	Marie III
Mon Site No. EFA-1	Requirement	198 %	1.00			(Mo.Avg.)	(Max)			, Monthly &	Grabs
Solids, Total	Sample					2.5		mg/L	0	Monthly	Grab
Suspended	Measurement				THE RESERVE OF THE PARTY OF THE			mg/L		Montray	Grab
PARM'Code 00530 Y	Permit :	16, 1 164		100		20.0		mq/L		Monthly	i Grab
Mon.Site No. EFA-1	Requirement					(An: Avg.)	ke same	HI9L.	200		
Solids, Total	Sample					3.9	3.9	mg/L	0	Monthly	Grab
Suspended	Measurement							_	U	Monany	Giab
PARM Code 00530 I	Permit :	4.5	1.0		Allega and the first	30.0	: 60.0° €			Monthly &	Grab
Mon.Site No. EFA-1	Requirement		7.7	阿拉克斯		+ (Mo.Avg.)	(Max)	mg/L	1000		5.0
pН	Sample				7.3		7.4	S.U.	0	5 Days/Week	Meter
	Measurement						7.4	3.0.	U	5 Days/reeek	Motol
PARM Code 00400 I	Permit		a deservation		6.0		8.5	61.5		6 Days/Week	Meter 1
Mon.Site No. EFA-1	Requirement				(Min)		(Máx)	324			Time a
Coliform, Fecal	Sample					1U		#/100mL	4	Monthly	Grab
	Measurement							#/ IOUIIIL	'	Wioritiny	GIAD
PARM Code 74055 Y	Permit			16.00		200		wal on the			I Miles and
Mon.Site No. EFA-1	Requirement			4744		(An: Avg.)	100	100			F # 12 2 11 1 1 1 1 1
Coliform, Fecal	Sample					1U	10	#/100mL	n	Monthly	Grab
	Measurement			Oil control of an in-			10	TI I VOIIIL		monuny	GIAN
PARM Code 74055 I	Permit	1.547.2		1000		200	800	#4100mL			Gabit
Mon Site No. EFA-1	Requirement •					(MoGeoMean)	Max				
Total Residual Chlorine	Sample										
(For Disinfection)	Measurement				1.0			mg/L	0	5 Days/Week	Meter
				WATER-ALCO SHEET TO THE	THE PROPERTY AND THE PROPERTY OF THE PROPERTY						
PARM Code 50060 A	Permit	17			0.5						
Mon Site No. EFA-1	Requirement	4. 14.			- i (Min) i						

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGEN	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson A-4894		(386) 329-1122	04/04/26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): Calculated-Roll An.-Avg. is the average of the current monthly average and the preceding 11 month's evreage.

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742-001-DW3P

					MONITORING F	PERIODFrom:	03/01/2004	To:		03/31/04	
Parameter		Quantity of	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement						0.06	mg/L	0	Monthly	Grab
PARM Code 00620 Mon Site No. EFA-1	Permit: Requirement	Thus, an	North A		11.2	3 1 1 1	12.0 Max 1	• mg/L •		Monthly	ga√ Grap
Flow	Sample Measurement	0.016		mgd					0	5 Days/Week	Elasped Time meters
PARM Code 50050/ G, Mon.Site No. INF-1	Permit Requirement	* 0.030 * (An Avg.)		mgď	1 1 1					e 6 Days/Neek	Elasped Time meters
Flow	Sample Measurement	0.016		mgd					0	5 Days/Week	Elasped Time meters
PARM Code 50050 P Mon.Site No. INF-1	Permit Requirement	Report (Ma.Avg.)		mgd*	Arm (S.					5 Days/Week	Elasped/Tune meters
BOD, Carbonaceous 5 day, 20C	Sample Measurement					220		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon Site No. INF-1	Permit Requirement	in the second		A, 4		Report (Mo.Avg.)	V (3.5)	t mg/L*		Monthlyin	Bir Y Grab
Solids, Total Suspended	Sample Measurement					250		mg/L	0	Monthly	Grab
	Permit Requirement					:Report (Mo:Avg.)		mg/Ls	7,	Monthly 1	S Grab
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						53.3%	Percent	0	Monthly	Calculated
	Permit Requirement	7. a. 4.				A Militar	Report (Mo Total)	Percent		Monthly*(i & Calculated

Permit Number:

FLA011742-001-DW3P

Facility: Palm Port WWTP

MONITORING PERIOD

From: 03/01/2004

To: 03/31/2004

	CBOD5 (mg/L)	TSS (MGL)	pH (SU)	Fecal Coliform Bacteria (#/100ML)	TRC (For Disinfect) (MG/L)	Nirtrogen, Nirtate, Totai (as N) (MG/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (MGL)
Code	80082	00530	00400	74055	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-2	EFA-3	EFA-4	EFA-5	FLW-1	INF-1	INF-1
1			7.4		2.0		0.037		
2			7.4		1.2		0.015		
3			7.4		1.6	1	0.015		1.
4			7.4	[1.8		0.017		1.
5			7.3	:	2.0		0.013		1.
6			7.4		2.2		0.021		1.
7							0.015		
8			7.4		1.6		0.015		1.
9			7.4		2.0		0.016		1.
10			7.4		2.2		0.015		1.
11			7.4		2.0		0.021		1.
12			7.3		2.2		0.009		1.
13			7.3		2.0		0.019		1.
14							0.015		
15			7.3		2.2		0.015		1.
16			7.3		2.2	j	0.019		0.
17	2U	3.9	7.3	1U	2.2	0.1	0.020		0.
18			7.3		1.4		0.021		0.
19			7.3		2.2		0.016		0.
20			7.3		1.4		0.014		0
21							0.016		
22			7.3		2.0		0.016		0
23			7.3		2.0		0.014		
24			7.3		1.6		0.011		
25			7.3		2.0		0.012		
26			7.3		1.6		0.013		
27			7.3		1.3		0.016		
28			***				0.016		
29			7.4		1.0		0.016		
30			7.3		1.5		0.019		
31			7.3		1.4		0.010		
Total		3.9			48.8	0.1	0.506		
Mo.Avg.		0.1	7.3		1.6	0.0	0.016		

Day Shift Operators:	Class:	С	Certification No.:	8173	Name: Grant Newlin	
Evening Shift Operators:	Class:		Certification No.:			
Night Shift Operators:	Class:		Certification No.:			
Lead Operator:	Class:	Α	Certification No.:	4894	Name: Paul Thompson	

Version: 11/10/2003

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Florida Water Services

Orlando, FL 32860-9520

East Palatka, FL 32131

PERMIT NUMBER:

CLASS SIZE:

FLA011742

MAILING ADDRESS:

P.O. Box 609520

LIMIT:

Final Minor REPORT: Monthly GROUP: Domestic

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

NO DISCHARGE FROM SITE:

[]

COUNTY: Putnam

MONITORING PERIOD--From:

04/01/2004

04/30/04

COUNTY:	Putnam				MONITORING F	PERIOD-From:	04/01/2004	To:		04/30/04	
Parameter		Quantity	of Loading	Units	Qual	lity or Concentrat	on	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous	Sample					2.2		mg/L	0	Monthly	Grab
five-dav. 20° C	Measurement					2.2				,	
PARM Code 80082 Y	Permit.		120 100	distribution of		20.0		mg/La		Monthly	Grab
Mon Site No. EFA-1	Requirement	30 Tu			***	(An. Avg.)	1	- 33	13.50		
BOD, Carbonaceous	Sample					2U	2U	mg/L	0	Monthly	Grab
five-dav. 20° C	Measurement		2000	TOTAL AND CONTRA	A 394 40 6 3 10 6 10 6 10 6 10 6 10 6 10 6 10 6			The second secon	120000000000000000000000000000000000000		
PARM Code 80082 I	Permit:	W		1.0	1.5	Report	60,0	mail	1.00	Monthly	Grab
Mon Site No: EFA-1	Requirement	And the	13.55		7.0	(Mo Avg.)	(Max)				
Solids, Total	Sample					2.7		mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement										
PARM Code 00530 Y Mon Site No. EFA-1	Permit Requirement					20.0 (An. Avg.)		mg/L		No Monthly 1.	Grab
Solids, Total	Sample	uros, se la seguira			102	(WILMY9)	7.34		A Second		
Suspended (TSS)	Measurement					5.6	5.6	mg/L	0	Monthly	Grab
PARM Code 00530 1	Rermit	1.	10.00	K 1 1 1 1 1	43	Report 1	60.0		4.10	1. 19. a. a. a.	
Mon:Site No. EFA-1	Requirement			3.45	11 Y 11 A	(Mo.Avg.)	(Max)	mg/L	化 模型	Monthly	Grab
Coliform, Fecal	Sample		W		W 100 100 100 100 100 100 100 100 100 10	1U		#/100mL	1	Monthly	Grab
	Measurement	OT COM ORDER OF THE PROPERTY.		Carrers 2.2.2					3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
PARM Code 74055 Y Mon Site No. EFA-1	Permit Requirement	4.4		riah:	1340 14	200 (An. Avg.)	1000	*##100mL*	T.	Montely 4	Grab ^a
Coliform, Fecal	Sample				5-40-375 per 9-16	April 1979		777 W 7	22.200		
comonii, recai	Measurement					. 10	10	#/100mL	0	Monthly	Grab
PARM Code 74055. L	Permit					200 5-4-8	2 - 800 ic a				
Mon Site No. EFA-1	Requirement	34 S				200 (MoGeoMean)	Max.	#/100mLs		Mapakiy :	Gabily I
рΗ	Sample	and the second s	100 May 100 Ma	er er er er er er	- ^				A CONTRACTOR	Daily, five days per	
	Measurement				7.2		7.4	S.U.	0	week	Grab
PARM/Code 00400 I Mon Sité No EFA-1	Permit Requirement				6.0		28.5.1	SU		Daily: (ive days pep	galas e Grab

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson A-4894		(386) 329-1122	04/05/20

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): Calculated-Roll An.-Avg. is the average of the current monthly average and the preceding 11 month's avreage.

NELAC CERTIFICATION NU	MBER(S):

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING F	ERIODFrom:	04/01/2004	To:		05/01/04	
Parameter		Quantity of	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.7			mg/L	2	Daily, five days per week	Grab
PARM Code 50060 A Mon Site No. EFA-1	Rermit Requirement				0.5 (Min)		. 10	T mg/凹		Daily fivoidevs por	Gatter in
Nitrogen, Nitrate, Total (as N)	Sample Measurement			magi satisfati na		nggagagaman galabasa an	0.26	mg/L	0	Monthly	Grab
PARM Code 00620°I Mon,Site No. EFA-1	Permit : Requirement	18.164					12.0 Max	mg/L		Monthly	F Grap
Flow	Sample Measurement	0.016	na mana and Pathin Property Santah Santah Santah	mgd	nach de Park Taran de Park				0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 G Mon Site No. INF-1	Permit Requirement	0:030 (An:Avg.)		mgd			11		la p	Dally five day 2 por	eRecording Towmster and totalizer
Flow	Sample Measurement	0.012	0.015	mgd	en die der den selver der der der der der der der der der d	452			0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon Site No. INF-1	Permit Requirement	Report (Mo!Avg.)	Report (Three Mo Avg)	mgd						Daily, five days per Fwegk	Recording flow meters and totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement					200	**************************************	mg/L	0	Monthly	Grab
PARM Code 80082 G Mon Site No. INF-1	Permit. Requirement	# 1 pm/				Report. (Mo.Avg.)		mg/L		Monthlys	Grab
Solids, Total Suspended	Sample Measurement					130		mg/L	0	Monthly	Grab
PARM Gode 00530 G Mon Site No. INF-1	Permit Requirement					Report (Mo Avg.)		ing/L		» Monthly	g Grab
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						50.0%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon Site No. CAL-1	Permit Requirement	1 1 P.			7 7 4		Report (Mo Total)	Percent	igh)	Est Monthly & F.	Calculateds

Permit Number: FLA011742 Facility: Palm Port WWTP MONITORING PERIOD From: 04/01/2004 To: 05/01/2004 County: Putnam CBOD₅ TSS TRC (For Flow CBOD5 Fecal рН Nirtrogen, TSS (mg/L) (mg/L) Coliform (SU) Disinfect) Nirtate, Total (mgd) (mg/L) (mg/L) Bacteria (mg/L) (as N) (mg/L) (#/100ML) Code 80082 00530 74055 00400 50060 00620 50050 80082 00530 Mon.Site EFA-1 EFA-1 EFA-1 EFA-1 EFA-1 EFA-1 INF-1 INF-1 INF-1 7.3 1.8 0.010 2 7.4 1.5 0.012 3 7.4 1.5 0.008 4 0.014 5 7.4 1.6 0.014 6 7.4 1.6 0.012 7.4 2.0 0.012 8 0.008 7.4 2.0 9 7.4 1.5 0.016 10 0.011 11 7.3 1.5 0.011 12 7.3 1.5 0.024 13 7.3 1.3 0.008 14 7.3 1.4 0.015 15 7.3 1.5 0.014 16 7.4 0.7 0.014 17 7.4 8.0 0.010 18 0.016 19 7.2 2.2 0.016 20 7.2 2.0 0.014 21 2U 5.6 10 7.2 2.0 0.3 0.008 200 130 22 7.2 2.0 0.016 23 7.2 2.0 0.008 24 7.2 2.2 0.013 25 0.013 26 7.2 2.0 0.013 27 7.2 1.6 0.011 28 7.2 1.8 0.018 29 7.2 2.2 0.007 30 7.2 2.2 0.011 31

PLANT STAFFING:					
Day Shift Operators:	Class:	С	Certification No.:	8173	Name: Grant Newlin
Evening Shift Operators:	Class:		Certification No.:		
Night Shift Operators:	Class:		Certification No.:		
Lead Operator:	Class:	Α	Certification No.:	4894	Name: Paul Thompson

3

1.4

0.0

7.3

1U

0.373

0.012

6

4

5.6

Total

Mo.Avg.

2U

Palm Port

Docket No. 060368-WS

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

Florida

Report Missing:

Discharge Monitoring Report

Month/Year

May 2004

Aqua Utilities Florida, Inc.

Docket No. 060368-WS

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

Florida

Report Missing: Palm Port

Month/Year June 2004

Aqua Utilities Florida, Inc.

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: MAILING ADDRESS:

Aqua Utilities Florida 1343 NE 17th Road

Ocala, FL 34470

PERMIT NUMBER:

FLA011742

LIMIT: CLASS SIZE: Final Minor REPORT: Monthly GROUP: Domestic

FACILITY: LOCATION:

Palm Port WWTP
Dog Branch Road

East Palatka, FL 32131

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

NO DISCHARGE FROM SITE:

[]

COUNTY: Putnam

MONITORING PERIOD-From:

To.

07/31/04

					PERIODFrom:	07/01/2004	10:			
	Quantity	of Loading	Units	Qual	ity or Concentrati	on	Units	No. Ex.	Frequency of Analysis	Sample Type
Sample					2.0		mail	0	Monthly	Grab
Measurement							my		wonany	
Permit:		Section 1			20.0	14.0	111	20.4	A Montal V	Grab
Requirement					(An Avg.)					4.19
Sample					211	211	ma/l	0	Monthly	Grab
Measurement									(1. (1. (1. (1. (1. (1. (1. (1. (1. (1.	
Permit :					hand an establishment and a second	60.0	ma/l		Monthly	Grab
Requirement			1.32	1111	(Mo:Avg.)	(Max) *	100		3/41 4/3/15	
					2.9	1	mg/L	0	Monthly	Grab
The state of the s			1 Sec. 16. 17. 18. 17. 18. 17. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18			and the second second		107000 290 0		
100000000000000000000000000000000000000			14.65	# 6 1	The second secon	Land Co	img/L	1774	Monthly	Grab
the second secon	75 1132				(An. Avg.)		9-11-1	111		
•					5.2	5.2	mg/L	0	Monthly	Grab
THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	Sare.	ran ing ing dan kada	4.4.4.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2				No state of the second	10 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
· · · · · · · · · · · · · · · · · · ·	100				and the second second second second	ALL CONTRACTOR OF THE PARTY OF	mg/L		Monthly	Grab.
CONTRACTOR SECURITION OF THE S	3 3 3 3	4 1 1	4 7 7 7 1	37 G-1	(Mo-Avg.)	(wax)	1350	14.4		
					1U		#/100mL	1	Monthly	Grab
		de d'a strategie	es: 4.200		200		4 . L. S.			A Color Garage
1000 BEN 100			1.0	100	CONTRACTOR OF THE PARTY OF THE	1	#/100mL)		Monthly &	at Mail Grab
London American San San San San San San San San San S			1,100,100,100		(All: Avg.)		3.000	730		
· •			1		1U	10	#/100mL	0	Monthly	Grab
A THE RESERVE OF THE PARTY OF T	200 8 18 18 18 18		Estant		200	3800	212011	V4-140		4.5
all a service of the service and the service of the				4000	A REAL PROPERTY OF THE REAL PROPERTY AND ADDRESS OF THE REAL PROPERTY ADDRESS OF THE REAL PROPERTY AND ADDRESS OF THE REAL PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY	318 3 3 3 3	#/100mE		Monthly ,	e Cest Grab
Carlo de Car			2011		(Inicocontean)	Co. or to accompany of the Con-			Daily five days per	
				7.2		7.4	\$.U.	0	week	Grab
THE PROPERTY OF THE PARTY OF TH	a v	277779944	(2/1/20)	* * * 6 0 ° 3 * *	ia strancia	To a series	3 3 4 4 3 3			
THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW		ar ki iyal		/Min	基本起源的技术基	a Maria	SU.		s walls	Crab it is
	Measurement Permit: Requirement Sample Measurement Permit	Sample Measurement Permit Requirement Sample Measurement Permit Requirement Sample Measurement Permit Requirement Sample Measurement Permit Requirement Permit Requirement Sample Measurement Permit Requirement Permit Requirement Permit	Measurement Permit Requirement Sample Measurement Permit Requirement Sample Measurement Permit Requirement Sample Measurement Permit Requirement Requirement Sample Measurement Permit Requirement Sample Measurement Permit Requirement Permit Requirement Sample Measurement Permit Requirement Sample Measurement Permit Requirement Sample Measurement Permit Requirement Permit Requirement	Sample Measurement Permit Requirement Sample Measurement Permit Requirement Sample Measurement Permit Requirement Sample Measurement Permit Requirement Requirement Sample Measurement Permit Requirement Permit Requirement Permit	Sample Measurement Permit Requirement Permit Requirement Permit Requirement Permit Requirement Sample Measurement Permit Requirement Sample Measurement Permit	Sample	Sample	Sample	Ex. Sample	Sample 2.0 mg/L 0 Monthly

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Michael V.Fitzgerald, Operations Superintendent		352-732-6027	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): Calculated-Rolf An.-Avg. is the average of the current monthly average and the preceding 11 month's avreage.

NELAC CERTIFICATION NUMBER(S):	

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING F	PERIOD-From:	07/01/2004	To:		07/31/04	<u> </u>
Parameter		Quantity of	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.0			mg/L	0	Daily, five days per week	Grab
PARM Code 50060 A Mon Site No. EFA-1	Permit		1 m		0.5 (Min)			T101		r Daliforijo date do: Leo	Gest G
Nitrogen, Nitrate, Total (as N)	Sample Measurement						0.16	mg/L	0	Monthly	Grab
PARM Code 00620 I Mon Site No EFA-1	Permits Requirement			1			12.0g / Max	s mg/L		Montgly 4	Grap
Flow	Sample Measurement	0.016		mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 G Mon.Site No. INF-1	Permit Requirement	• 0.030 (An.Avg.)	N. C.	mgd						Daily live days pers	Recording flow motor and totalizer
Flow	Sample Measurement	0.015	0.014333333	mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 · P Mon.Site No. INF-1.	Permit Requirement	, Report (Ma.Avg.)	Report (Three Mo Avg)	mgd.						Posity Two days per	Recording flow meter and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement					150		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon.Site No. INF-1	Permit Reguirement					Report (Mo Avg.)		img/L		a Montily a h	Grab v. č.
Solids, Total Suspended	Sample Measurement	.				76		mg/L	0	Monthly	Grab
PARM Code 00530 G Mon Site No. INF-1 Percent Capacity,	Permit Requirement					Report (Mo.Avg.)		mg/L		Monthly #	grabi grabi
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						47.8%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon Site No. CAL-1	Requirement						Report (Mo/Total)	Percent		Monthly, 1	Calculated ***

DAILY SAMPLE RESULTS - PART B

Permit Number:	FLA011742				Facility: Palm Port WWTP
MONITORING PERIOD	From:	07/01/2004	To:	07/31/2004	County: Putnam

F	CBOD ₅	TSS	Fecal	рН	TRC (For	Nirtrogen,	Flow	CBOD5	TSS
	(mg/L)	(mg/L)	Coliform Bacteria (#/100ML)	(SU)	Disinfect) (mg/L)	Nirtate, Total (as N) (mg/L)	(mgd)	(mg/L)	(mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1				7.2	2.2		0.013		
2				7.2	2.2		0.013		
3				7.3	2.2		0.014		
4							0.013		
5				7.3	2.2		0.013		
6				7.3	2.2		0.014		
7	2U	5.2	10	7.3	1.2	0.16	0.013	150	76
8				7.3	2.2		0.014		
9				7.3	2.2		0.014		
10				7.4	2.2	<u> </u>	0.014		
11							0.015		
12				7.4	2.2		0.015		
13				7.4	2.2		0.018		
14				7.3	1.8	:	0.014		
15				7.3	2.2		0.013		
16				7.3	1.8		0.015		
17				7.4	2.2		0.014		
18							0.017		
19				7.4	1.0		0.017		
20				7.4	1.6		0.018		
21				7.3	2.0		0.013		
22				7.3	2.2		0.018		
23				7.3	2.2		0.015		
24				7.3	2.2		0.017		
25	-						0.015		
26				7.4	1.2		0.015		
27				7.4	2.0		0.017		
28				7.3	2.2		0.016		
29				7.3	2.2		0.014		
30			-	7.4	2.2		0.018		
31					······································		0.016		
Total							0.466		
Mo.Avg.	2U	5.2	10	7.3	1.7	0.01	0.015	5	2

PLANT STAFFING: Day Shift Operators: Certification No.: ___ Class: Name: Evening Shift Operators: Class: Certification No.: Certification No.: ____ Night Shift Operators: Class: Certification No.: 4894 Lead Operator: Class: A Name: Paul Thompson

3 Version: 11/10/2003

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Aqua Utilities Florida

PERMIT NUMBER:

CLASS SIZE:

FLA011742

MAILING ADDRESS:

1343 NE 17th Road Ocala, FL 34470 LIMIT:

Final Minor REPORT: Monthly GROUP: Domestic

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

NO DISCHARGE FROM SITE:

COUNTY:

East Palatka, FL 32131

MONITORING PERIOD--From:

08/01/2004

08/31/04

	Putnam				MONITORING F	PERIODFrom:	08/01/2004	To:		08/31/04	
Parameter		Quantity	of Loading	Units	Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous	Sample					2.0		mg/L	^	Monthly	Grab
ive-dav. 20° C	Measurement					2.0		mg/L	, v	wonany	Giab
PARM Code 80082 Y	Permit			(Ara)	N	20.0	will a line	0.00			Marie Marie Const
Mon Site No. EFA-1	Requirement	Teach			30.14	(An: Avg.)		mg/L e		Monthly	Grab Grab
BOD, Carbonaceous	Sample						011				
ive-dav. 20° C	Measurement			ĺ		2U	2U	mg/L	0	Monthly	Grab
ARM Code 80082 I	Permit	71.74	. 11. 191		201907	Report	4 60 0 As	11.54		104118	ra a contra a
Mon Site No. EFA-1	Requirement	4 749 1			100	(Mo.Avg.)	(Max)	mg/L1		Monthly	Grab
Solids, Total	Sample		10-10-10-10-1		20.000				Market Co		_
Suspended (TSS)	Measurement					2.7		mg/L	0	Monthly	Grab
PARM Code 00530 Y	Permit	er va ne e	3 16 7	12.5	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	20.0	1414	- 11 2	N. 13.13		action of the state of
fon Site No. EFA-1	Requirement				XX. 12.49-	(An. Avg.)	100	mg/L	20.00	Monthly	Grab
Solids, Total	Sample	10 C	10. 200 4 - 40. 011 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	LEAD OF RESIDE		120 4 WALL ST T. W. 1000	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PRO 1907/1904 DE 1907			
Suspended (TSS)	Measurement					2.6	2.6	mg/L	0	Monthly	Grab
ARM Code 00530 I	Permit		733, 18 - 1 3 4 1	11		Report	60.0				Mary 1
Ion.Site No. EFA-1	Requirement		100000000000000000000000000000000000000		Approximation of the second	(Mo.Avg.)	(Max)	mg/L		Monthly .	Grab
Coliform, Fecal	Sample	1 many 50 km to 12 may 2 may 2		3 3 3 3 3 3							
•	Measurement					10		#/100mL	1	Monthly	Grab
ARM Code 74055 Y	Permit	1.0	100			* \$ * 200 % * *		25 14 15 m	73.5		old developed the second
Ion.Site No. EFA-1	Requirement	STATE OF A	78 1 AM			(An. Avg.)		#/100mL		Monthly 2	L Page II Grab
Coliform, Fecal	Sample								A Property		
,	Measurement					1U	10	#/100mL	0	Monthly	Grab
ARM Code 74055 I	Permit			200		200 5	800				
Non Site No. EFA-1	Requirement		31. S. 15.			(MoGeoMean)	Max	#/100mL		Monthly's	gades a Grabinal at
Н	Sample	5.00		** 12 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3				2013年共產黨	n ka	Pails for days	
••	Measurement				7.3		7.5	S.IJ.	0	Daily, five days per week	Grab
ARM Code 00400:1	Permit*	(1) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	4.		· Lank		Mores				A decided to the second
Ion Site No. EFA-1	Requirement							a suses		Ually live days per	Grabita & Grabita in
ANOTE HUSEFASE	- izedanamant :	# \$571,75 X	Esperia es regio		sa ne z (MJD) a san		THE (XEW)				A CHARLES HE WAS A STATE OF THE

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Michael V.Fitzgerald, Operations Superintendent		352-369-4881	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here). Calculated-Roll An.-Avg. is the average of the current monthly average and the preceding 11 month's avreage.

NELAC CERTIFICATION NUMBER(S):	

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

	•				MONITORING F	PERIODFrom:	08/01/2004	To:		08/31/04	
Parameter		Quantity of	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				2.2			mg/L	0	Daily, five days per week	Grab
PARM Code 50060 A Mon Site No. EFA-1	Permit Regulrement	34			(0.5-g) (Min)		ual e	melle :		Daily five days per week!	Page 19 Grand 12 14 F
Nitrogen, Nitrate, Total (as N)	Sample Measurement	The second of th					0.33	mg/L	0	Monthly	Grab
PARM Code 00620 I Mon Site No. EFA-1	Permit Requirement						12.0 Max	mg/L	11	Monthly	Grab
Flow	Sample Measurement	0.016	300000000000000000000000000000000000000	mgd		and a second control of the control			0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 G Mon Site No. INF-1	Permit Requirement	0.030 (An.Avg.)		mgd						Daily five days pers Week!	Recording flow meter and totalizer
Flow	Sample Measurement	0.017	0.015	mgd		A. S.			0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon Site No. INF-1	Permit Requirement	Report: (Mo:Avg.)	Report (Three-Mo. Avg)	mgd			. 4. 1			Daily five days per	Recording flow mater and
BOD, Carbonaceous 5 day, 20C	Sample Measurement	W. C.				65		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		» mg/L		A Montaly	La Tir Grab Arres
Solids, Total Suspended	Sample Measurement					50		mg/L	0	Monthly	Grab
PARM Code 00530 . G Mon Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Monthly (a 4	Grab
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						50.0%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon Site No. CAL-1	Permit Requirement						Report (Mol Total)	Rercent		Monthly 13	Calculated

Permit Number:

FLA011742

Facility: Palm Port WWTP

MONI	TORING	PERIOD
------	--------	--------

From: 08/01/2004

To: _____08/31/2004

County: Putnam

	CBOD ₅ (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TRC (For Disinfect) (mg/L)	Nirtrogen, Nirtate, Total (as N) (mg/L)	Flow (mgd)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1						//	0.017		
2				7.4	2.2		0.017		
3				7.3	2.2		0.017	*******	
4	2U	2.6	1 U	7.3	2.2	0.33	0.016	65	50
5				7.4	2.2	2.30	0.019		
6			4	7.4	2.2		0.020		
7				7.3	2.2		0.023		
8	:						0.020		
9				7.4	2.2		0.020		
10			-	7.4	2.2		0.015		
11				7.4	2.2		0.023		
12				7.3	2.2		0.010		
13				7.3	2.2		0.017		
14				7.3	2.2		0.022		
15							0.024		
16				7.3	2.2		0.024		
. 17				7.3	2.2		0.013		
18				7.4	2.2		0.024		
19				7.5	2.2		0.025		
20				7.4	2.2		0.018		
21				7.4	2.2		0.018		
22			į				0.015		
23				7.4	2.2		0.015		
24				7.3	2.2		0.016		
25				7.4	2.2		0.014		
26				7.4	2.2		0.011		
27				7.4	2.2	1	0.013		
28				7.4	2.2		0.015		
29						<u> </u>	0.012		
30				7.3	2.2	<u> </u>	0.012	·	
31				7.3	2.2		0.009		
Total						1	0.532		
Mo.Avg.	2U	2.6	10	7.4	1.8	0.01	0.017	2	2

PLANT STAFFING:			<u> </u>
Day Shift Operators:	Class:	Certification No.:	Name:
Evening Shift Operators:	Class:	Certification No.:	
Night Shift Operators:	Class:	Certification No.:	
Lead Operator:	Class: A	Certification No.: 4894	Name: Paul Thompson

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Aqua Utilities Florida

PERMIT NUMBER:

CLASS SIZE:

FLA011742

MAILING ADDRESS: 1343 NE 17th Road LIMIT:

Final Minor REPORT: Monthly

GROUP: Domestic

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road

East Palatka, FL 32131

Ocala, FL 34470

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

[]

NO DISCHARGE FROM SITE:

COUNTY: F	Putnam				MONITORING F	PERIODFrom:	09/01/2004	To:		09/30/04	
Parameter		Quantity	of Loading	Units	Qua	ity or Concentrat	ion	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous	Sample					2.1		mg/L	0	Monthly	Grab
five-dav, 20° C	Measurement							mg/L		es total and the second and the second	
PARM Code 80082 Y	Permit .	467		Marine !	190 T 190 T	20,0	1.0	amon di		Monthly	Grab **
Mon.Site No. EFA-1	Requirement		1 .5		2 1644	(An. Avg.)					
BOD, Carbonaceous	Sample					2.4	2.4	mg/L	0	Monthly	Grab
five-dav. 20° C	Measurement		Marke State of the second	es with constants at	and the	ti a cuti como monero e como transfer en como de como			1996 1974		
PARM Code 80082 I Mon Site No. EFA-1	Remit Requirement					Report (* (Mo Avg.)	60.0° (Max)	iggil.		Monthly	f Grapi (i
Solids, Total	Sample					2.9		mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement							Anna Mariana and Anna Anna Anna Anna Anna Anna An	THE CHANGE OF		
PARM Code 00530 Y	Permit		Maria A.			20.0	1.78	mole I	110	Monthly	Grab
Mon:Site No: EFA-1	Requirement;		B-10 ATT			- (Ant Avg.)					
Solids, Total	Sample					5.9	5.9	mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement	Tera Compositorio	Parties of Carrier States	A 14 SE728 (A) 1840	Selection of the Control of the Cont						
PARM Code 00530 I Mon Site No. EFA-1	Permit Requirement					Report ((Mo.Avg.)	60.0 (Max)	mg/L		Monthly	Grab
Coliform, Fecal	Sample Measurement			1	50.00 Care (120.00 B) 10 10 Care (120.00 Care (120.00 Care (120.00 Care (120.00 Care (120.00 Care (120.00 Care	1U		#/100mL	1	Monthly	Grab
PARM Code 74055 Y Mon Site No. EFA-1	Permit Requirement	40				::200 € (An: Avg.)	. Oliver	W 100mL		Monthly	Grabiji v sk
Coliform, Fecal	Sample Measurement	24-21. VS 21. VS NS33. 1912.		4.795 (8.795)	THE COURSE THE RESIDENCE THE PARTY.	1U	1U	#/100mL	0	Monthly	Grab
PARM Code 74055 1 Mon Site No. EFA-1	Permit Requirement					i 200 (MoGeoMean)	800 Maxa	- #800mi		a Monthly	Are Graban di A
рН	Sample Measurement	Charles and Charle			7.3		7.6	S.U.	0	Daily, five days per week	Grab
PARM Code 00400 1 Mon Site No. EFA-1	Permit Requirement				6.0s 1 2(Min) 2 is		(8,5) (Mata) (8			Party Type Lave Fair Converses	ge Grade

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Michael V.Fitzgerald, Operations Superintendent		352-369-4881	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): Calculated-Roll An.-Avg. is the average of the current monthly average and the preceding 11 month's avreage.

NELAC CERTIFICATION NUMBER(S):	

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING F	ERIODFrom:	09/01/2004	To:		09/30/04	
Parameter		Quantity of	of Loading	Units	Qu	ality or Conc	entration	,	No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.7			mg/L	1	Daily, five days per week	Grab
PARM Gode 50060 A Mon Site No. EFA-1	Permit	100			(Min)			ingi		Daily five days per web	E (Grab E)
Nitrogen, Nitrate, Total (as N)	Sample Measurement				and a state of the		0.42	mg/L	0	Monthly	Grab
PARM Code 00620 I Mon Site No. EFA-1	Permit Requirement	14, 70					12.0 M	mg/L	14	Monthly	Grab
Flow	Sample Measurement	0.016		mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 G Mon Site No. INF-1	Permit Requirement	0.030 (An:Avg.)		mgd				31		Dally Tive days per	Recording flow meter and totalizer:
Flow	Sample Measurement	0.017	0.015	mgd		50 mm			0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon Site No INF-1	Permit Requirement	Report (Mo.Avg.)	Report (Three Mo. Avg)	mgd	(%) (%)		Apre 1)			Daily five days per week 'e	Recording flow meter and totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement					220		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon Site No. INF-1	Permit Requirement		1.	7,7		Report (Mo Avg.)		s mg/L	411	Monthly	Grab
Solids, Total Suspended	Sample Measurement					220		mg/L	0	Monthly	Grab
PARM Code 00530 G Mon Site No. INF-1	Permit Requirement					Reports: (Mo.Avg.)		lmg/L		Monthly	Grab
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement				·		50.0%	Percent	0	Monthly	Calculated
PARM Code 00180 /G / ** Mon Site No. CAL-1	Permit Requirement					t i ga yan	Reports (Mo Total)	Percent		e Montaly 8	A Calculated

Permit Number:

FLA011742

Facility: Palm Port WWTP

From:

09/01/2004

To: 09/30/2004

County: Putnam

	CBOD ₅	TSS	Fecal	рН	TRC (For	Nirtrogen,	Flow	CBOD5	TSS
	(mg/L)	(mg/L)	Coliform Bacteria (#/100ML)	(SU)	Disinfect) (mg/L)	Nirtate, Total (as N) (mg/L)	(mgd)	(mg/L)	(mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
┝	2.4	5.9	10	7.3	2.2	0.42	0.011	220	220
2	2.11	0.0		7.3	2.2	0.42	0.017	220	220
3				7.3	2.2	:	0.014		
4				7.3	2.2		0.017		
5							0.015		
6							0.015		
7	-						0.015		
8							0.015		
9				7.6	1.6		0.015		
10				7.5	2.0		0.016		
11				7.4	2.2		0.023		
12							0.017		
13				7.4	2.2		0.017		
14				7.3	0.7		0.024		2.11 20.1
15				7.3	2.0		0.021		
16				7.3	2.2+		0.015		-
17				7.3	2.2		0.008		
18				7.3	2.2		0.015		
19							0.018		
20				7.3	2.2		0.018		
21				7.3	2.2+		0.036	, P.V.	
22				7.3	2.2+		0.021		
23				7.3	2.2+		0.014		
24				_7.3	2.2+		0.015		
25				7.3	2.2		0.011		
26							0.032		
27				7.3	2.2		0.032		
28				7.3	2.2+		0.030		
29			· · ·	7.3	1.5		0.015		
30				7.3	2.0		0.015		
31									
Total							0.541		
Mo.Avg.	2.4	5.9	10	7.3	1.4	0.01	0.017	7	7

PL	А	N.	Т	S	ГΑ	F	F	IN	G:

Day Shift Operators:
Evening Shift Operators:

Evening Shift Operators:

Night Shift Operators: Lead Operator: Class: B

Class: A

Certification No.: 12476

Certification No.: ____

Certification No.: 4894

Name: David Haring

Name: Paul Thompson

Palm Port

Docket No. 060368-WS

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

Florida

Report Missing:

Discharge Monitoring Report

Month/Year

October 2004

Aqua Utilities Florida, Inc.

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Agua Utilities Florida

PERMIT NUMBER:

FLA011742

MAILING ADDRESS:

1343 NE 17th Road Ocala, FL 34470

LIMIT: CLASS SIZE: **Final** Minor REPORT: Monthly **GROUP: Domestic**

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road

East Palatka, FL 32131

MONITORING GROUP NUMBER: R-001 MONITORING GROUP DESC:

NO DISCHARGE FROM SITE:

Rapid Infiltration

[]

001111771

44100104

COUNTY:	Putnam				MONITORING F	PERIODFrom:	11/01/2004	To:		11/30/04	
Parameter		Quantity	of Loading	Units	Qual	Quality or Concentration			No.	Frequency of	Sample Type
		_	_						Ex.	Analysis	
BOD, Carbonaceous	Sample					2.1		mg/L	0	Monthly	Grab
five-day, 20° C	Measurement			Leggester i Name ster i Namester i Nameste							
PARM Code 80082 Y Mon Site No. EFA-1	Permit Requirement				tropic:	(An: Avg.)	118	mg/L	W	Monthly 8 g	Grab Grab
BOD, Carbonaceous	Sample			, T	PER TRAINING AMERICAN PROPERTY.		0.4		0	A A A A	Grab
five-day, 20° C	Measurement					2.4	2.4	mg/L	0	Monthly	Grab
PARM Code 80082 I	Permit	4.4				Report *	60.0	1717	\$4. st.	Monthly	Grap,
Mon.Site No. EFA-1	Requirement			. 5		(Mo.Avg.)	(Max)				
Solids, Total	Sample					3.4		mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement			NAME OF THE PARTY OF THE PARTY.			12 8 9	ANTERNA CO	4.44.5		
PARM Code 00530 Y Mon,Site No: EFA-1	Permit: Requirement			* 44		20.0 (An. Avg.)	H ight	mg/L		Monthly 2	Grab
Solids, Total	Sample	77				11.0	11.0	mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement		200 9						W 1000 400		
PARM Code 00530 I	Permit			4.45		Report-	160.0	ma/L)		Monthly vec	Grab
Mon Site No. EFA-1	Requirement	1	· ***		April 1	* (Mo.Avg.)	(Max) y				
Coliform, Fecal	Sample Measurement					1.1		#/100mL	0	Monthly	Grab
PARM Code 74055 Y Mon Site No. EFA-1	Permit Requirement	g Ar		1474		(200 (An: Avg.)	344	#/100mL	dia.	Monthly	Grab.
Coliform, Fecal	Sample		124 S. # 17	\$ 50 PM C 70 A		Annayy		12.4			
oomonn, r coar	Measurement					2.0	2.0	#/100mL	0	Monthly	Grab
PARM Code 74055 I	Permit					200	800: 11	#/100ml		Monthly 48	AL A Ser Grab
Mon Site No. EFA-1	Requirement					(MoGeoMean)	- Max 4 7				
pН	Sample				7.2		7.5	S.U.	0	Daily, five days per	Grab
	Measurement			45 (96) 62 (1468)				AV AVEN		week	Bara i a santana
PARM Code 00400 I Mon Site No. EFA-1	Permit 1 Requirement				6.0 La (Min)		815 (Max)	k si k		adhily ayaday ad agair	Hat Al Grab (144)

1 certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson, Lead Operator		386-937-1143	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): Calculated-Roll An.-Avg. is the average of the current monthly average and the preceding 11 month's avreage.

NELAC CERTIFICATION NUMBER(S):):	

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING F	PERIOD-From:	11/01/2004	To:		11/30/04	
Parameter		Quantity of	of Loading	Units	Quality or Concentration					Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.4			mg/L	0	Daily, five days per week	Grab
PARM Code 50060 A Mon Site No EFA-1	Permit Requirement				0.5 ts (Min)			i mgL		cally fee data cor week to	La Gab
Nitrogen, Nitrate, Total (as N)	Sample Measurement						4.80	mg/L	0	Monthly	Grab
PARM Code 00620 I Mon:Site No. EFA-1	Permit			1. 1.7			12:0a Max	ijĝ/E		. J. Monthly	Grab
Flow	Sample Measurement	0.016		mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 G Mon Site No. INF-1	Permit Requirement	0.030 (An Avg.)	Eye.	. mgd i				a de la composição de l		Daily five days per week	•Recording flowerneter and least totalizer
Flow	Sample Measurement	0.015	0.014333333	mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon Site No. INF-1	Permit	Report (Mo.Avg.)	Report (Three-Mo Avg)	mgd						Daily five days per weeks	Recording flowingters ad
BOD, Carbonaceous 5 day, 20C	Sample Measurement					97		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon Site No. INF-1	Permit Requirement			, Vis		Report (Mo Avg.)		ing/L _c 3		Monthly	R Grab
Solids, Total Suspended	Sample Measurement		65/2 W To 272			56		mg/L	0	Monthly	Grab
PARM Code 00530. G Mon Site No. INF-1	Permits Requirement					Report (Mo.AVg.)		Sag/L		Monthly	Gran
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						47.8%	Percent	0	Monthly	Calculated
PARM Code 00180 .G Mon Site No. CAL-1	Permit Requirement		ng Prof. to				Report (Mo total) s	Percent		Monthly 1	Calculated:

	,		DAILY	SAMPLE	RESULIS	S-PARIB			
Permit Numl	ber:	FLA011742						Facility: P	Palm Port WW1
MONITORIN	IG PERIOD	From:	11/01/2004	To:	11/30	0/2004		County: P	utnam
ī	CBOD ₅	TSS	Fecal	ρН	TRC (For	Nirtrogen,	Flow	CBOD5	TSS
	(mg/L)	(mg/L)	Coliform Bacteria (#/100ML)	(SU)	Disinfect) (mg/L)	Nirtate, Total (as N) (mg/L)	(mgd)	(mg/L)	(mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1				7.4	2.2+		0.019		
2				7.4	2.2+		0.013		
3	2.4	11.0	2U	7.5	2.2+	4.80	0.019	97	56
4				7.4	2.2+		0.008		
5				7.3	2.1		0.020		
6				7.3	2.2		0.014		
7							0.020		
8				7.2	2.2+		0.020		
9				7.2	2.2+		0.016		
10				7.2	2.0		0.010		
11				7.3	1.4		0.012		
12				7.3	2.2+		0.014		
13				7.3	2.2		0.012		
14	· · · · · · · · · · · · · · · · · · ·						0.019		
15				7.3	2.2+		0.019		
16				7.3	2.2+		0.015		
17				7.3	2.2+		0.016		-
18	.	!		7.3	2.2		0.016		
19		•		7.3	2.2+		0.010		
20			<u> </u>	7.3	2.2		0.009		
21							0.021		
22				7.4	2.2+	 	0.021		
23		<u> </u>		7.3	2.2+		0.008		
24				7.3	2.2+		0.012		
25				7.2	2.2+		0.013		
26 27				7.3	2.0	-	0.012		
28		+		7.3	2.0	ļ	0.014		
29	•	+		7.0	0.0.		0.018		
30				7.3 7.3	2.2+		0.019		
31		1		1.3	2.2+		0.016		
Total							0.455		
Mo.Avg.	2.4	11.0	2	7.3	1.3	0.15	0.455	3	
PLANT STA		3			1.0	0.10	0.010		
Day Shift O		Class: _ Class:	В		rtification No.:		Name: D	avid Haring	
		-							

Class: ____ Certification No.: __ Night Shift Operators: Certification No.: 4894 Lead Operator: Α Name: Paul Thompson

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Agua Utilities Florida

PERMIT NUMBER:

FLA011742

MAILING ADDRESS:

1343 NE 17th Road Ocala, FL 34470

LIMIT: CLASS SIZE: Final Minor

[]

REPORT: Monthly GROUP: Domestic

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

East Palatka, FL 32131

NO DISCHARGE FROM SITE:

COUNTY:	Putnam				MONITORING F	PERIOD-From:	12/01/2004	To:		12/31/04	
Parameter		Quantity	of Loading	Units	Qual	ity or Concentrati	on	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous	Sample					2.0		mg/L	0	Monthly	Grab
five-day, 20° C	Measurement		uridas da de la composición dela composición de la composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición de la composición de la composición dela composici	TOUR TO POUR ME IN	NO SERVICIO AND REPORT OF A STORY				22.000	was an arrangement of the second	The state of the s
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement	101				20,0 (An: Avg.)	730h	mg/Laf		Monthly #	Grabe ##
BOD, Carbonaceous	Sample		AND THE RESERVE OF THE PARTY OF			2U	2U	mg/L	0	Monthly	Grab
five-day, 20° C	Measurement						20	mg/L		inominy	
PARM Code 80082 I Mon Site No. EFA-1	Permit Requirement	400				Report (Mo.Avg.)	+ 60.0(); (Max)	mg/L		Monthly	Grab
Solids, Total	Sample					2.7		mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement					_		my.L		anonimy	
PARM Code 00530 Y Man Site No. EFA-1	Permit Requirement	art.				20.0 (An. Avg.)	46	mg/L*		Monthly	Grab
Solids, Total	Sample					2.7	2.7	mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement							myr-	E BOSENIO E		
PARM Code 00530 I Mon Site No. EFA-1	Permit Requirement					Report 2 (Mo.Avg.)	60 0 (Max)	mu/L		Monthly	Grab*
Coliform, Fecal	Sample Measurement					1U		#/100mL	1	Monthly	Grab
PARM Code 74055 Y Mon Site No. EFA-1	Permit Requirement					200 (An. Avg.)	1000	#/100mL		Monthly	Guab 1
Coliform, Fecal	Sample Measurement		0.00		770	1U	10	#/100mL	0	Monthly	Grab
PARM Gode 74055 I Mon Site No. EFA-1	Permit: Réquirement	i.	1800 6			200 (MoGeoMean)	800 Max	#/400ml_4		e Monthly 2	ing it is Grabial and
рН	Sample		The state of the s	Charles and Share Share	7.1		7.4	S.U.	0	Daily, five days per	Grab
	Measurement				1.1		1.4	3.U.	U	week	
PARM Code 00400 I Mon Site No. EFA-1	Requirement	e e			(Min)		18.5s. 1 Maxe	100		Dally five days por Postal vacing 15 f	Grab.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson, Lead Operator		386-937-1143	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): Calculated-Roll An.-Avg. is the average of the current monthly average and the preceding 11 month's avreage

NELAC CERTIFICATION NUMBER(S):	

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING F	PERIODFrom:	12/01/2004	To:		12/31/04	
Parameter		Quantity o	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				2.2			mg/L	0	Daily, five days per week	Grab
PARM Code 50060 A Mon Site No. EFA-1.	Permit Regulrement	1			0.5 (Min)			e mg/L		Daily Jive days ber week	Crab
Nitrogen, Nitrate, Total (as N)	Sample Measurement			N. A.			3.30	mg/L	0	Monthly	Grab
PARM Code 00620 III. Mon.Site No. EFA-1	Permit Requirement						-12,0 Max	mg/L		Monthlys	& St. Grate
Flow	Sample Measurement	0.016		mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 G Mon:Site No: INF-1	Permit Requirement	0.030 (An.Avg.)		.mgd				14		Daily, five days per week	Recording flow meter and
Flow	Sample Measurement	0.015	0.014333333	mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon Site No. INF-1	Permit Requirement	Report (Mo.Avg.)	Report (Three-Mo. Avg)	mgd*						Daily five days per 5 week	Recording flow mater and totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement					170		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon Site No. INF-1	Permit Requirement	17, 100		Since),		Report (Mo.Avg.)		mg/LSt		Monthly 1	Grab an
Solids, Total Suspended	Sample Measurement					190		mg/L	0	Monthly	Grab
PARM Code 00530 G Mon Site No INF-1	Permit Requirement	¥		31.3		Report (Mo.Avg.)		mg/L		Monthly	Grab
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement				·		47.8%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon Site No. CAL-1	Permit Requirement				A ST		Report (Mo Fotal)	Percent		Monthly :	Galculated

Permit Number:

FLA011742

Facility: Palm Port WWTP

MON	ITORI	NG	PFR	IOD

From: 12/01/2004

To:

09/30/2004

County: Putnam

	CBOD ₅ (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TRC (For Disinfect) (mg/L)	Nirtrogen, Nirtate, Total (as N) (mg/L)	Flow (mgd)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1				7.2	2.2+		0.015		
2				7.2	2.2+		0.015		
3				7.2	1.8		0.015		
4				7.3	2.2		0.015		
5			Ì				0.015		
6				7.3	2.2+		0.015		
7				7.2	2.2+		0.015		
8	2U	2.7	1U	7.2	2.2+	3.30	0.015	170	190
9				7.2	2.2+		0.015		
10				7.3	2.2+		0.015		
11				7.3	2.2		0.015		
12			!				0.015		
13				7.4	2.2+		0.015		
14			i	7.3	2.2+		0.015		7.5.
15				7.1	2.2+		0.015		
16				7.2	2.2+		0.015		
17				7.3	2.2+		0.015		***************************************
18				7.2	2.2		0.015		
19			:	7.2	2.2		0.015		,
20	-			7.2	2.2		0.015		<u></u>
21	į			7.2	2.2		0.015		·
22				7.3	2.2+		0.015		
23				7.3	2.2		0.015		
24				7.4	2.2+		0.015		
25	1						0.015		
26				7.3	2.2		0.015		
27				7.2	2.2+		0.015		
28				7.3	2.2		0.015		
29				7.3	2.2+		0.015		
30				7.3	2.2+		0.015		
31				7.3	2.2+		0.015		
Total							0.465		
Mo.Avg.	2U	2.7	10	7.3	1.7	0.11	0.015	5	- 6

Day Shift Operators:	Class: B	Certification No.: 12476	Name: David Haring
Evening Shift Operators:	Class:	Certification No.:	
Night Shift Operators:	Class:	Certification No.:	
Lead Operator:	Class: A	Certification No.: 4894	Name: Paul Thompson

3

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Agua Utilities Florida

PERMIT NUMBER:

FLA011742

MAILING ADDRESS:

1343 NE 17th Road

LIMIT:

Final

REPORT: Monthly

Ocala, FL 34470

CLASS SIZE:

Minor

GROUP Domestic

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road

East Palatka, FL 32131

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC: NO DISCHARGE FROM SITE: Rapid Infiltration

f 1

01/31/05 COUNTY: MONITORING PERIOD--From: 01/01/2005 To: Putnam

Parameter		Quantity	of Loading	Units	Qua	ity or Concentrati	on	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous	Sample					2.0		mg/L	0	Monthly	Grab
five-dav, 20° C	Measurement					2.0		y.L	U	Monthly	0.00
PARM Code 80082 Y	Permit	101 100 2	de Carlo	1		20.0	1000	i mai		Monthly 8 ve	Graph Vision
Mon Site No. EFA-1	Requirement	4 T - 18 T			1000	🏭 (An. Avg.)		der Kriste			
BOD, Carbonaceous	Sample					2U	2U	mg/L	a	Monthly	Grab
five-dav. 20° C	Measurement		TO SECURE AND AND AND ASSESSED OF THE SECURITION OF THE SECURE AND ADDRESSED OF THE SECURITION OF THE SECURITION OF THE SECURE AND ADDRESSED OF THE SECURITION OF THE SECURITION OF THE SECURE AND ADDRESSED OF THE SECURITION OF TH						CAT COMPANY OF THE PARTY OF THE		
PARM Code 80082 (L)	Permit 1	19-1-4	3-44-11-11	通为		Report	60.0	E Paris 1	12.51	Monthly 99	Fall of Gun Age .
Mon:Site No. EFA-1	Requirement		* \$ P & P & P & P & P & P & P & P & P & P			(Mo Avg)	(Max)				AMERICAN PROPERTY
Solids, Total	Sample					2.5		mg/L	٥	Monthly	Grab
Suspended (TSS)	Measurement	Financia		Sectional Products (AP)					Marine Marine		
PARM Code 00530 Y	Pegnit	100	*184	4.07	40.0	20.0	100			Monthly 15	Grabe
Mon.Site No. EFA-1	Requirement		1754 (4)			2'- (An, Avg.)	7534-31				
Solids, Total	Sample		•			1.1	1.1	mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement		and the second s	K-94-44-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1					Tronside Control		
PARM Code 00530 I	Permit				NAME OF STREET	ir iReport	60.0	ama/c		Monthly	Grab St.
Mon Site No. EFA-1	Requirement					(Mo'Avg')	(Max)				
Coliform, Fecal	Sample					1U	!	#/100mL	1	Monthly	Grab
	Measurement	276		21.100				224 224	003-27-002		Maria de la compania
PARM Code 74055 Y	Permit	100	1484	100		200		#/100mL	100	Northic 1	Grap Contract
Mon Site No. EFA-1	Requirement					(An Avg.)					
Coliform, Fecal	Sample					1ับ	1บ	#/100mL	0	Monthly	Grab
	Measurement	e e		Kara Jan	and the second						
PARM Code 74055 I	Permits:		Marketine			200	7800	*#/100pitE		A. Monthly etc.	a de la california de la composición d
Mon.Site No. EFA-1	Requirement					(MoGeoMean)	/ ¡Max				
рН	Sample				7.2		7.5	S.U.	0	Daily, five days per week	Grab
	Measurement	8	u and a same	100					6 M & D	****	
PARM Code 00400 I	Pennin (C)							e sur		DENV. SVE DAVE US	Marie Sun Contraction
Mon Site No. EFA-1	Requirement	1000		# 1 M . 1 2 M	a see win) see		Medical (New Park)		经线接收		

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson, Lead Operator		386-937-1143	

COMMENTS AND EXPLANATION OF ANY VIO	LATIONS (Reference all	attachments here): Calcula	ted-Roll An -Avg is the average	of the current monthly average and the preced	ing 11 month's avreage.

NELAC CERTIFICATION NUMBER(S):

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING P	ERIODFrom:	01/01/2005	To:		01/31/05	
Parameter		Quantity o	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				2.2			mg/L	0	Daily, five days per week	Grab
PARM Code 50060: A Mon Site No: EFA-1	Rermit Requirement		P. Marine		- #0.5 €0 € (Min)		\$43.9 9 5	mort.		Daily five days out	Grab (em.)
Nitrogen, Nitrate, Total (as N)	Sample Measurement	30.00					0.49	mg/L	0	Monthly	Grab
PARM Code 00620 I Mon Site No. EFA-1	Permit Requirement						12,0 Max	ing/E		Monthly	ear Grab
Flow	Sample Measurement	0.016		mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 G Mon Site No. INF-1	Permit: Requirement	0,030 (An Avg.)		mgd					i.	Daily five days pecs Week	Recording flow mater and
Flow	Sample Measurement	0.014	0.014	mgd		March 12 M. Leader of Charle and Sp. 2000 Conference Service			0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon Site No. INF-1	Permit Requirement	Report (Mo Avg.)	Report (Three Mo. Avg)	mgd						Dally, five days per week	Recording flow mater and totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			St. 502 (to 988)		170		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon Site No. INF-1	Permit Requirement					Report ((Mo Avg.)	11	mg(L)		Monthly	g Grah
Solids, Total Suspended	Sample Measurement					150		mg/L	0	Monthly	Grab
PARM Code 00530 G Mon Site No. INF-1	Permit Requirement					/Report (Mo.Avg.)		smg/Es		Monthly W. H. B.	grabition (Crabition)
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement				·		46.7%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon Site No. CAL-1	Permit Requirement		West.	##. J			Report (Mo Total)	Percent		Monthly :	Calculated

Permit Number:

FLA011742

Facility: Palm Port WWTP

MONITORIN	NG F	PERIO)
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From: 01/01/2005

To: 01/31/2005

County: Putnam

	CBOD₅ (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TRC (For Disinfect) (mg/L)	Nirtrogen, Nirtate, Total (as N) (mg/L)	Flow (mgd)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1 =====================================			<u> </u>	7.3	2.2		0.014		
2							0.014		
3				7.3	2.2+		0.014		
4				7.3	2.2	Ī	0.014		
5	2U	1.1	10	7.5	2.2+	0.49	0.014	170	15
6				7.3	2.2		0.012		
7				7.4	2.2+		0.019		
8				7.3	2.2		0.010		
9							0.015		
10				7.3	2.2+		0.015		
11				7.3	2.2+		0.016		
12				7.4	2.2+		0.016		
13	1			7.3	2.2+		0.010		
14				7.3	2.2+		0.022		
15				7.3	2.2		0.015		
16							0.016		
17			-	7.3	2.2+		0.016		
18				7.3	2.2+		0.014		
19				7.2	2.2+		0.011		
20				7.3	2.2+		0.013		
21				7.3	2.2+		0.014		
22				7.3	2.2		0.014		
23							0.014		
24				7.3	2.0		0.014		
25				7.3	2.2+		0.013		
26				7.3	2.2+		0.017		
27				7.3	2.2		0.007		
28				7.3	2.2+		0.019		
29				7.3	2.2		0.010		
30							0.017		
31		· · · · · · · · · · · · · · · · · · ·		7.3	2.2	<u> </u>	0.016	<u> </u>	
Total						!	0.445		
Mo.Avg. PLANT STA	2U	1.1	1U j	7.3	1.5	0.02	0.014	5	

Day Shift Operators:	Class: B	Certification No.: 12476	Name: David Haring
Evening Shift Operators:	Class:	Certification No.:	
Night Shift Operators:	Class:	Certification No.:	
Lead Operator:	Class: A	Certification No.: 4894	Name: Paul Thompson

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Agua Utilities Florida

PERMIT NUMBER:

FLA011742

MAILING ADDRESS:

PO Box 490310 Leesburg, FL 34749 LIMIT: CLASS SIZE: Final Minor REPORT: Monthly GROUP: Domestic

FACILITY: LOCATION: Palm Port WWTP

MONITORING GROUP NUMBER: R-001
MONITORING GROUP DESC: Rapid

Rapid Infiltration

East Palatka, FL 32131

NO DISCHARGE FROM SITE:

02/28/05

COUNTY: Putnam

tnam MONITORING PER

MONITORING PERIOD--From: 02/01/2005 To:

[]

Measurement	COUNTY.	Putnam				MONITORING	LRIODI IOIII.	02/01/2005	10.		02120103	<u></u>
Measurement	Parameter		Quantity	of Loading	Units	Qual	ity or Concentrati	ion	Units		,	Sample Type
Massurement	BOD, Carbonaceous	Sample					21		ma/l	0	Monthly	Grab
Mon-Site No. EFA-1 Requirement Require	five-dav. 20° C	Measurement					2.1		IIIg/L		Monthly	
BOD, Carbonaceous Five day, 20° C Measurement Meas	PARM Code 80082 Y	Permit.	44.46			11.5	20.0	1 1 1 1 1 1 1 1 1		124	Monthly	Se Grab
Measurement	Mon Site No. EFA-1	Requirement:	77 174				(An. Avg.)	12131				A TAME
Marting	BOD, Carbonaceous	Sample					2.4	24	ma/l	١,	Monthly	Grab
Monthly Sample	five-day, 20° C	Measurement					2.4	2.4	mg/L	, v	monuny	0.40
Mon-Sie No. EFA-1 Requirement Requirem	PARM Code 80082 I	Permit "					Report	60.0	mail		Monthlys	Grab
Suspended (TSS) Measurement 2.6	Mon.Site No. EFA-1	Requirement	a de la companya de l			NES OF LA	🧎 (Mo:Avg.)	(Max)				
Suspended (TSS) Measurement 20.0 20.	Solids, Total	Sample					26		ma/l	0	Monthly	Grab
Mon-Site No. EFA-1 Requirement Requirement Report Report Requirement	Suspended (TSS)	The second secon							y/L			
Mon. Site No. EFA-1 Requirement Sample S	PARM Code 00530 Y	Permit		e liga	1444		20.0			133	Monthly	Grab
Suspended (TSS) PARM Code 00530 I Permit Requirement Coliform, Fecal PARM Code 74055 Y Mon Site No. EFA-1 Coliform, Fecal PARM Code 74055 I Permit Measurement PARM Code 74055 I Permit Sample Measurement PARM Code 00400 I Permit	Mon Site No. EFA-1	Requirement		4.00	133	1474	(An. Avg.)			1111	PRINTING THE	
Suspended (TSS) Measurement PARM/Code 00530 I Permit Requirement Mon.Site No. EFA-1 Coliform, Fecal PARM/Code 74055 Y Mon.Site No. EFA-1 Coliform, Fecal Measurement PARM/Code 74055 Y Mon.Site No. EFA-1 Coliform, Fecal PARM/Code 74055 I Permit Requirement Coliform, Fecal Measurement PARM/Code 74055 I Permit Requirement Measurement PARM/Code 74055 I Permit Requirement Measurement PARM/Code 74055 I Mon.Site No. EFA-1 Requirement PARM/Code 74055 I Mon.Site No. EFA-1 Requirement PARM/Code 74055 I Mon.Site No. EFA-1 Requirement PARM/Code 74055 I Requirement PARM/Code 74055 I Requirement Requirement Requirement PARM/Code 74055 I Requirement Requir	Solids, Total	Sample					1.6	16	mail	0	Monthly	Grab
Mon Site No. EFA-1 Coliform, Fecal Sample Measurement PARM Code 74055 Y Mon Site No. EFA-1 Coliform, Fecal Monthly Monthly Grab	Suspended (TSS)	The state of the s							TO BY C			
Mon-Site No. EFA-1 Coliform, Fecal Sample Measurement PARM Code 74055 Y Permit Coliform, Fecal Sample Measurement Requirement Coliform, Fecal Sample Measurement Coliform, Fecal Sample Measurement Coliform, Fecal Sample Measurement PARM Code 74055. I Permit Sample Mon-Site No. EFA-1 Requirement PARM Code 74055. I Permit Sample Mon-Site No. EFA-1 Requirement PARM Code 74055. I Permit Sample Mon-Site No. EFA-1 Requirement PARM Code 00400 J Remit 7.3 7.5 S.U. 0 Daily, five days per week Daily, five days per week Daily	PARM Code 00530 I	Permit.	and the second	440.44	1.1		Report	60.0	and the	1120	Monthly	Grab
Measurement PARM Code 74055 Y Permit PARM Code 74055 Y Mon-Site No. EFA-1 Requirement Coliform, Fecal Sample Measurement PARM Code 74055 I Permit Requirement PARM Code 74055 I Requirement PARM Code 74055 I Requirement Requirement PARM Code 74055 I Requirement Requirement Requirement PARM Code 74055 I Requirement Requireme	Mon Site No. EFA-1	Requirement	97		444		(Mo.Avg.)	(Max) ₹ 🛱				
Measurement PARM Code 74055 Y Mon-Site No. EFA-1 Requirement Coliform, Fecal Sample Measurement Measurement Measurement Measurement Measurement PARM Code 74055 I Permit Requirement PARM Code 74055 I Permit Requirement PARM Code 74055 I Permit Requirement PARM Code 00400 I PARM Code 00400 I Permit Sample Measurement 7.3 7.5 S.U. Daily five days per week PARM Code 00400 I Permit Supplement Supplement FARM Code 00400 I Permit Supplement	Coliform, Fecal	Sample					411		#/100ml	1	Monthly	Grab
Mon-Site No. EFA-1 Coliform, Fecal Sample Measurement PARM Code 74055 Permit PARM Site No. EFA-1 Requirement Monthly Grab Monthly Monthly Grab Monthly Grab Monthly Grab Monthly Monthly Grab Monthly Monthl									W 100000			SON SILVERSON DE LA MONTE DESIGNATION CONTRA
Mon:Site No. EFA-1 Coliform, Fecal Sample Measurement PARM: Code 74055. I Permit Requirement PARM: Code 74055. I Requirement PARM: Code 74055. I Requirement Requirement PARM: Code 74055. I Requirement Requirement PARM: Code 74055. I Requirement R	THE PERSON NAMED OF THE PARTY O	Permit	142 8 34	1.064.13	Starte	144.1	200	100	#MODES!	100	Monthly 1	ST ST Glab
Measurement PARM Code 74055 I Permit Mon Site No. EFA-1 Requirement PARM Code 00400 I Permit Measurement PARM Code 00400 I Permit Measurement PARM Code 00400 I Permit Measurement Measurement Measurement Mon Site No. EFA-1 Mon Site No	Mon Site No. EFA-1	Requirement	and the same			的语类系统	(An. Avg.)					Alternative states
Measurement PARM Code 74055.1 Permit Mon:Site No. EFA-1 Requirement PH Sample Measurement PARM Code 00400.1 Permit 600 Measurement Authority Monthly Max Fillows Monthly Monthly	Coliform, Fecal	Sample					111	40	#/100ml	0	Monthly	Grab
Mon Site No. EFA-1 Requirement (MpGeqMean) Max PH Sample Measurement 7.3 7.5 S.U. 0 Daily, five days per Week Grab PARM Code 00400 1 Permit 5.0 S.U. 1 1 1855 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		THE RESERVE OF THE PARTY OF THE							100 TO 10			
Mon Site No. EFA-1 Requirement pH Sample Measurement 7.3 7.5 S.U. 0 Daily, five days per week PARM Code 00400 11 Permit St. S.U. 10 Permit St. St. St. St. St. St. St. St. St. St	PARM Code 74055 I	Permit				1 2 2 2		800	#/400ml		Monthly	ia di Sigiab di Ma
Measurement PARM Code 00400 Permit Parmit Figure 1 Figure 1 Figure 2 Figure	Mon:Site No. EFA-1	Requirement		1772 - 164	11/2		(MoGeqMean)-	Max				
Measurement PARM Code 00400 1 Permit 50 Supply Supp	рН	Sample				73		7.5	s.u.	0		Grab
		Measurement			414 418 53	7.5					week	
Vion Site No. EEA-1 Requirement (Min)	PARM Code 00400' I	Permit 🔩 📆	4. 30		Mars.	6.0		8.5) iki	Daily five days per	6.16
	Mon:Site No. EFA-1	Requirement	fg ()			(Min)		* (Max)			a Calwook 1	

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Will Fontaine		352-787-0980	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): Calculated-Roll An.-Avg. is the average of the current monthly average and the preceding 11 month's avreage.

NELAC CERTIFICATION NUMBER(S):	
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Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING F	ERIODFrom:	02/01/2005	To:		02/28/05	
Parameter		Quantity o	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				2.2			mg/L	0	Daily, five days per week	Grab
PARM Code 50060 A Mon-Site No. EFA-1	Permit Requirement				0.5 (Min) 3			mg/I		Daily five days per Till vice 14	garage Grange (
Nitrogen, Nitrate, Total (as N)	Sample Measurement	t mr v oa h					1.30	mg/L	0	Monthly	Grab
PARM Code 00620 I Mon.Site No. EFA-1	Permit Requirement			32.0			12.0 Max	mg/L		Monthly	g - grab
Flow	Sample Measurement	0.015		mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 G Mon Site No. INF-1	Permit in Requirement	0.030 (An.Avg.)		mgd	: 14 (* * *		: H i			Daily five days por week	Recording Rowmeter and the Proteiner
Flow	Sample Measurement	0.013	0.013666667	mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon.Site No. INE-1	Permit Requirement	Report (Mo.Avg.)	Report (Three Mo. Avg)	mgd		11.11				Daily, give craye pec wook	Recording flow, moter and
BOD, Carbonaceous 5 day, 20C	Sample Measurement		Com (1948)		Acceptance and any of the second seco	280		mg/L	0	Monthly	Grab
PARM Code 80082 G Man Site No. INF-1	Permit Requirement		70	371.1		Report (Mo Avg.)		s mg/L		Monthly 1	grab
Solids, Total Suspended	Sample Measurement		elega Vendosko ate elegande			270		mg/L	0	Monthly	Grab
PARM Code 00530, G. Mon Site No. INF-1	Permit Requirement	i digita kapatan				Report / (Mo.Avg.) 2		ing/L\$.		Monthly	Grab
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						45.6%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon Site No. CAL-1	Permit Réquirement		14.5	200		grissilik.	Report (Mid-Fotal)	Percent		**************************************	Traccal curies and the state of

Permit Number:

FLA011742

Facility: Palm Port WWTP

MON	ITOR	ING	PER	RIOD

From: 02/01/2005

To: 02/28/2005

County: Putnam

	CBOD₅ (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TRC (For Disinfect) (mg/L)	Nirtrogen, Nirtate, Total (as N) (mg/L)	Flow (mgd)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1				7.3	2.2		0.014		
2	2.4	1.6	1U	7.5	2.2+	1.30	0.016	280	27
3				7.5	2.2		0.014		
4				7.4	2.2+		0.021		
5				7.3	2.2		0.010		
6							0.015		
7				7.4	2.2+		0.015		
8				7.3	2.2		0.014		
9				7.4	2.2+		0.018		
10				7.3	2.2		0.009		
11				7.4	2.2+		0.018		
12				7.3	2.2		0.011		
13							0.015		
14				7.4	2.2+		0.016		
15				7.3	2.2		0.012		
16				7.4	2.2+		0.015		
17				7.3	2.2		0.010		
18				7.4	2.2+		0.015		
19				7.3	2.2		0.012		
20							0.012		
21				7.3	2.2		0.013		
22				7.3	2.2		0.013		
23				7.3	2.2+		0.012		
24				7.3	2.2		0.008		
25				7.3	2.2		0.012	İ	
26				7.3	2.2		0.017		
27							0.017		
28				7.3	2.2		0.017		
29				***					
30							İ		
31									
Total							0.391		
Mo.Avg.	2.4	1.6	1U	7.3	1.5	0.04	0.013	9	

Day Shift Operators:	Class: B	Certification No.: 12476	Name: David Haring
Evening Shift Operators:	Class:	Certification No.:	
Night Shift Operators:	Class:	Certification No.:	
Lead Operator:	Class: A	Certification No.: 4894	Name: Paul Thompson

3

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Aqua Utilities Florida

PERMIT NUMBER:

FLA011742

MAILING ADDRESS: PO Box 490310

PO Box 490310 Leesburg, FL 34749 LIMIT: CLASS SIZE: Final Minor REPORT: Monthly GROUP: Domestic

FACILITY: LOCATION:

Palm Port WWTP
Dog Branch Road
East Palatka, FL 32131

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

NO DISCHARGE FROM SITE:

COUNTY: Putna

Putnam MONIT

MONITORING PERIOD--From: 03/01/2005 To: 03/31/2005

[]

	oumain				MONTORING		03/01/2003	10.		03/31/2000	Commis Times
Parameter		Quantity	of Loading	Units	Qual	ity or Concentrati	ion	Units	No.	Frequency of	Sample Type
									Ex.	Analysis	
BOD, Carbonaceous	Sample				-	2.0		mg/L	n	Monthly	Grab
five-day, 20° C	Measurement					2.0		y			
PARM Code 80082 Y	Permit .				Note that is	20.0	100		100	Monthly	A Fig. (F. Grab)
Mon.Site No. EFA-1	Requirement				1.0	(An: Avg.)		111			
BOD, Carbonaceous	Sample					2U	2U	mg/L	0	Monthly	Grab
five-dav, 20° C	Measurement							MC TO COMMON SOCIO	F SHOPE TO REAL	The state of the s	
PARM Code 80082:1	Permit *	4			110 - 100 h	: Report	60,0	mo/L		Monthly	Fris Grab
Mon.Site No. EFA-1	Requirement	o colle a se				(Mo.Avg.)	(Max)				
Solids, Total	Sample					2.7		mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement			erren di erri e				4 7 10 10 10 10 10 10 10 10 10 10 10 10 10	Maria (122)		6444
PARM/Code 00530 Y	Permit					20.0	118.04	mg/L		Monthly 4 6	Grab
Mon.Site No. EFA-1	Requirement	23.5		2.2		** (An-Avg.) **	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	P141.514			
Solids, Total	Sample					2.9	2.9	mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement	t at a w. s. or a se	a national and a second			A CLOUD AND A SAME	60.0		550		
PARM Code 00530 1	Permit					Report		¹ mg/L*		Monthly # 1	Grab
Mon Site No. EFA-1	Requirement	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Section of the sectio	26	5.12	* (Mo.Avg.)	. (Max) :				
Coliform, Fecal	Sample					1U		#/100mL	1	Monthly	Grab
PARM Code 74055 Y	Measurement Permit	5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	S West State of the State of th			41 1 200 1					
Mon.Site No. EFA-1	Regulrement	10.4	176. I.S.	33.95		(An. Avg.)	in different	#/100mL	.	Monthly (2)	Grab
Coliform, Fecal	Sample	\$100 at 100 at 1		38 M 28 2							
Comorni, i ecai	Measurement					1U	10	#/100mL	0	Monthly	Grab
PARM Code 74055	Permit					200	10 800 x			2 # #2 F24C	
Mon.Site No. EFA-1	Requirement		r ehra a			(MoGeoMean)	Max *	#(100mL		Z-Mopuly -	Grab!
рН	Sample		The state of the s	V-96.03.000 1996					O-12-12-12-12-13-13-13-13-13-13-13-13-13-13-13-13-13-	Daily, five days per	Con-
firs.	Measurement				7.1		7.4	S.U.	0	week	Grab
PARM Code 00400	Permit		100		6.0	e e e e e e e e e e e e e e e e e e e	(A. 485 L.A.	- 11-53		Daily; five days para	ele
Mon:Site No. EFA-1	Requirement				(Min)		(Max)			X 22 Work X 4	
The same of the sa	A CONTRACTOR OF THE PROPERTY O									or and avaluate the infe	

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson, Lead Operator		386-937-1143	

NEDAC CERTIFICATION NOWIDER(3).	NELAC CERTIFICATION NUMBER(S):	
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Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING I	PERIODFrom:	03/01/2005	To:		03/31/2005	
Parameter		Quantity of	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.5			mg/L	3	Daily, five days per week	Grab
PARM Code 50060 A Mon Site No. EFA-1	Permit Requirement				0,5 (Min) **			mg/L		Dally-five days pet	Jacob High
Nitrogen, Nitrate, Total (as N)	Sample Measurement						0.72	mg/L	0	Monthly	Grab
PARM Code 00620 I Mon.Site No. EFA-1	Permit Requirement						12.0 Max	mg/L ^g		domin .	Grap
Flow	Sample Measurement	0.016		mgd					0	Dally, five days per week	Recording flow meter and totalizer
PARM Code 50050 G Mon,Site No. INF-1	Permit. Requirement	0.030 (An.Avg.)		mgd			100			Daily, (ive days) per Week	Recording flow meter and
Flow	Sample Measurement	0.016	0.015	mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon Site No. INF-1	Permit Requirement	Report (Mo.Avg.)	Report (Three-Mo. Avg)	mgd						Daily five days per week	Recording flow mater and totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement	2 1 2 3 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3	3			140		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon Site No. INF-1	Permit Requirement	****				Report (Mo.Avg.)		mg/LL)		F Monthly 8	Grab
Solids, Total Suspended	Sample Measurement					110		mg/L	0	Monthly	Grab
PARM Code 00530 G Mon Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		.mg/L		Monthly	Grab (1988)
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						48.9%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon.Site No. CAL-1	Permit Requirement						Report (Percent		w C. Monthly 1	# 5 - Calculated.

Permit Number:

FLA011742

Facility: Palm Port WWTP

MONITORING PERIOD

From: 03/01/2005

To: 03/31/2005

County: Putnam

	CBOD₅ (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TRC (For Disinfect) (mg/L)	Nirtrogen, Nirtate, Total (as N) (mg/L)	Flow (mgd)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1				7.3	2.2		0.019		
2	2U	2.9	1U	7.3	2.2+	0.72	0.015	140	110
3				7.3	2.2+		0.017		
4				7.4	2.2+		0.014		
5				7.3	2.2		0.015		
6							0.013		
7				7.3	2.2		0.013		
8				7.3	2.2		0.013		
9				7.2	2.2+		0.020		
10				7.3	2.2		0.015		
11	·			7.3	0.5		0.022		
12				7.3	2.2		0.016		
13				•			0.015		
14				7.1	2.0		0.015		
15				7.1	0.5		0.017		
16				7.1	2.2+		0.010		
17				7.2	2.2+		0.015		
18				7.2	2.2+		0.020		·
19				7.2	2.2		0.010		
20							0.020		-
21				7.2	2.2+		0.020		
22				7.3	2.2+		0.013		
23				7.1	1.0		0.017		
24	-			7.2	2.2+		0.014		
25				7.2	2.2+		0.013		
26				7.2	2.2+		0.039		
27							0.017		
28				7.1	0.9		0.017		
29				7.1	1.2		0.015		
30				7.2	2.2		0.012		
31				7.2	2.2+		0.017		
Total							0.506		
Mo.Avg.	2U	2.9	1U	7.2	1.3	0.02	0.016	5	

Day Shift Operators:	Class:	В	Certification No.:	12476	Name: David Haring
Evening Shift Operators:	Class:		Certification No.:		
Night Shift Operators:	Class:		Certification No.:		
Lead Operator:	Class:	Α	Certification No.:	4894	Name: Paul Thompson

3 Version: 11/10/2003

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Aqua Utilities Florida

PERMIT NUMBER:

CLASS SIZE:

FLA011742

MAILING ADDRESS:

PO Box 490310 Leesburg, FL 34749 LIMIT:

Final Minor REPORT: Monthly
GROUP: Domestic

FACILITY: LOCATION:

Palm Port WWTP

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

East Palatka, FL 32131 NO DISCHARGE FROM SITE:

[]

COUNTY:

Putnam

MONITORING PERIOD-From: 04/01/2005

To:

04/30/05

COUNTY:	Putnam			_	MONITORING F	ERIODFrom:	04/01/2005	10:		04/30/05	
Parameter		Quantity	of Loading	Units	Qual	ity or Concentrat	ion	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous	Sample			-		2.0		mg/L	0	Monthly	Grab
five-dav, 20° C	Measurement										RESERVED SERVED SER
PARM Code 80082 Y	Permit >					20.0	4 (4)	Maria Cara		Monthly St. e	Grab *
Mon.Site No. EFA-1	Requirement					👬 (An: Avg.)				1/ 4/ 7/	
BOD, Carbonaceous	Sample					2U	2U	mg/L	0	Monthly	Grab
five-dav. 20° C	Measurement				7 P.A. 700 J. 234 V. 7 J. 7		20		reacons		
PARM Code 80082 I	Permit (%)	No.	100	100	K. W. H	Report	60.0	I mail		Monthly ** **	Grab
Mon Site No. EFA-1 📑 ;	Requirement.					(Mo.Ayg.)	(Max)				
Solids, Total	Sample					2.9		mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement		ale de la companie d				**************************************	0.7 (S. 20 May 10 M 	000500000		energy of the second
PARM Code 00530 Y	Permit	ter (MA)			***************************************	20.0	1.00	mg/L		Monthly	Grab
Mon Site No. EFA-1	Requirement		ng raya sa		A STATE OF THE STA	* (An, Avg.)	15.250000000000		7.4		
Solids, Total	Sample					5.2	5.2	mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement	5845 S.A. USS. 2		e de la compania						The September 1	Control of the Contro
PARM Code 00530 I	Permit				11000	Report	60,0	of mg/L .		Monthly	Grab.
Mon/Site No. EFA-1	Requirement	der in der der der der der der der	34 C C C	A	American de la de	(Mo_Ayg_)	(Max)	A Provide A			
Coliform, Fecal	Sample					1U		#/100mL	1	Monthly	Grab
PARM Code 74055 Y	Measurement Permit		247 - 247	Sign policies		. 200≥ม		34 34 3 6 34	2.30		
PARM Code 74055 1 Mon:Site No. EFA-1	The Section of the Control of the Co							3#/100mL		Monthly	∰gg ' 9 Grah
Coliform, Fecal	Requirement Sample	The state of the s				(An, Avg.)					
Comorni, recai	Measurement					1U	10	#/100mL	0	Monthly	Grab
PARM Code 74055 I	Permit	100				\$€.6 8#200 3 5 7 5	800/4				
Mon.Site No. EFA-1	Requirement	374 P	$A_{ij} = A_{ij} A_{ij}$			(MoGeoMean)	Max	##100mL		Monthly 4	Giab .
oH	Sample	STEEL STEEL STEEL STEEL	3844 3 2 4 5 3 4 5 E 4 5 E	CONTRACTOR OF THE SECOND				331-34-320-33		Daily, five days per	
γι ι	Measurement				7.1		7.5	S.U.	0	week	Grab
PARM Code 00400 I	Permit			Cal. 2 1. 2 2	6.0		R 5 7			Tally five have have	
Mon Site No. EFA-1	Requirement				(Min)		(Max)	rysu fi		Value 1970	Registration of the second
certify under penalty of law that thi		erectivity in a company of the	CONTRACTOR OF CONTRACTOR			magnetic section of the section of t	o province and the second		discherence of	programme or recognised to the state of the	- Line - Line itte

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson, Lead Operator		386-937-1143	
it dat theirpoon, zoda operate.			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): Calculated-Roll AnAvg. is the average of the current monthly average and the preceding 11 month's avrea	COMMENTS AND EXPLANATION OF ANY VIOLATION	S (Reference all attachments here):	Calculated-Roll AnAvg	, is the average of the current monthl	ly average and th	e preceding 11 mo	onth's avreag
--	---	-------------------------------------	-----------------------	--	-------------------	-------------------	---------------

NELAC CERTIFICATION NUMBER(S)·

МОИІТОВІИС СКОЛР ИЛМВЕВ.: R-001

PERMIT NUMBER: FLA011742

Facility Name: Palm Port WWTP

pate (note 5) 26	Mounty		nieżlea:	Picgost (IstoT oM)		Property (Permit 1: Requirement	D 08100 eboo MRAS I-1AO ON eniciro
Calculated	Monthly	0	Percent	%E.EE						Sample Measurement	թւշent Capacity, TMADF/Permitted Տapacity) x 100
QMD.	VirtinoM		7/610		† Report † † (Mo.Avg.)					Permit Requirement	PARM Code 00530 G. Non Site No∴INF≄l
Grab	Monthly	0	աმ\ך	!	1.7					Sample Measurement	Jolids, Total Juspended
deid (1	i Ajuauom		ៀតែប		ThoqsA (.gvA.oM)s	H. F. B.		i line		Permit Requirement	ARM Code 80082 G
Grab	Monthly	0	၂/6ա		011					Sample Measurement	3OD, Carbonaceous 5 day, 20C
Recording flow mater and	ned avebavit viled Meew						pbu s	SoM-serid!) inges (BVA	F hog9시 (gvA oM)	Permit Requirement	PRM Code 50050 P
Recording flow meter and totalizer	Daily, five days per week	0					pßw	10.0	200.0	Sample Measurement	wol
Recording flowmater and	ied sysb syd 'yllad';		4				рбш		050.0 (:gvA.nA)	Permit f	OS005 9boD MAA
Recording flow meter and totalizer	Daily, five days per week	0					pßw		310.0	Sample Measurement	Mol
4 gerb	Virtuo W : #		/η/β ω	y ozu Zew	14 11 114					Permit Times	as N) PRM Code 00620 1 · // Non Site No. EFA-1
dsn0	Monthly	0	7/6ա	73.0						Sample Measurement	Vitrogen, Nitrate, Total Se N)
Part of the second	jeav Ida skap ekig klj⊯i		ijōμ			\$(UIW)\$ \$0			and the	Permit 1 Requirement	ARM Code 50060 A
ds1Đ	Daily, five days per	0	J/Bm			2.1				Sample Measurement	otal Residual Chlorine For Disinfection)
Sample Type	Freduency	.va Ex.		noitarion	ality or Conc	gng	stinU	guibsod i	Quantity o		Parameter

To:

Permit Number:

FLA011742

Facility: Palm Port WWTP

	G PERIOD

From:

04/01/2005

04/30/2005

County: Putnam

	CBOD₅ (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TRC (For Disinfect) (mg/L)	Nirtrogen, Nirtate, Total (as N) (mg/L)	Flow (mgd)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1				7.2	2.2		0.002		
2		-		7.2	2.2		0.002		
3				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			0.002		
4				7.1	1.2		0.002		
5				7.3	2.2		0.002		
6				7.3	2.2		0.002		
7				7.3	2.2		0.001		
8				7.2	2.2		0.002		· · · · · ·
9				7.2	2.2		0.003		
10			:				0.001		
11				7.3	2.2		0.001		
12				7.3	2.2		0.002		
13	2U	5.2	1U '	7.3	2.2	0.57	0.002	110	4
14				7.3	2.2		0.002		
15				7.4	2.2		0.001		
16				7.3	2.2		0.002		
17				·			0.002		
18				7.3	2.2		0.002	i	
19			-	7.3	2.2		0.001		
20				7.3	2.0		0.001		
21				7.4	2.2		0.001		
22			!	7.3	2.2		0.002		
23				7.3	2.2		0.001		
24							0.002		
25				7.3	2.2		0.002		
26		****		7.3	2.2		0.001		
27				7.4	2.2		0.002		
28				7.4	2.2		0.001		
29				7.5	2.2		0.002		
30				7.4	2.2		0.002		
31									
Total							0.048		
Mo.Avg.	2U	5.2	1U	7.3	1.8	0.02	0.002	4	

۲	ᄱ	ıΝ	1	ত	1 /	۱,	г	m	1	7,

Day Shift Operators:

Evening Shift Operators:

Night Shift Operators:

Lead Operator:

Class: В

Class: Class:

Α

Certification No.: ____ 12476 Certification No.:

Certification No.: ___

Certification No.: 4894

Name:	David	Haring

Name: Paul Thompson

Class:

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Aqua Utilities Florida Leesburg, FL 34749

PERMIT NUMBER:

CLASS SIZE:

FLA011742

MAILING ADDRESS:

PO Box 490310

LIMIT:

Final Minor REPORT: Monthly **GROUP: Domestic**

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road

East Palatka, FL 32131

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

NO DISCHARGE FROM SITE:

[]

COUNTY:	Putnam	am				RING PERIODFrom: 05/01/2005				05/31/05		
Parameter		Quantity	of Loading	Units	Qual	ity or Concentra	tion	Units	No. Ex.	Frequency of Analysis	Sample Type	
BOD, Carbonaceous	Sample					2.0		mg/L	0	Monthly	Grab	
five-dav, 20° C	Measurement							myr		monning		
PARM Code 80082 Y Mon Site No. EFA-1	Permit Requirement			1 - 1		(An. Avg.)		e, mg/L		a Monthly	Grab	
BOD, Carbonaceous	Sample	A STATE OF THE STA	SC AND D. C. A. M.									
five-dav. 20° C	Measurement					2U	2U	mg/L	0	Monthly	Grab	
PARM Code 80082° l Mon Site No. EFA-1	Permit Requirement	304				Report (Mo:Avg.)	60:0 (Max)	mg/L	1 27%	. Monthly 148	Grab	
Solids, Total	Sample	2		1 V A A . 12 . No	- Alt. 26-30	CALL THE PARTY OF	The state of the s		^		Grab	
Suspended (TSS)	Measurement					2.6		mg/L	0	Monthly	Grad	
PARM Code 00530 Y	Permit .	100		14,21%	1.00	20.0				Monthly	Grab	
Mon.Site No. EFA-1	Requirement	A.		114		(An: Avg.)		_ mg/L	111	MOINTIN		
Solids, Total	Sample					1.9	1.9	mg/L	0	Monthly	Grab	
Suspended (TSS)	Measurement							my/L	0	monthly	Giab	
PARM Code 00530 I Mon.Site No. EFA-1	Permit Requirement					(Report (Mo.Avg.)	160.0 (Max)	mg/L	K.	y Monthly	Grab	
Coliform, Fecal	Sample Measurement	(1905) (Stane An Cont. Antonia (Stane) (Stane) (Stane) (Stane) (Stane) (Stane) (Stane) (Stane) (Stane) (Stane)		Personal Property and the State of the State		1 U		#/100mL	1	Monthly	Grab	
PARM Code 74055 Y Mon Site No. EFA-1	Permit Requirement				17.21	200 (An: Avg.)	77.56	##400mL	A,	Maganiy	rez ^{Al} Grabi	
Coliform, Fecal	Sample Measurement					1U	1U	#/100mL	0	Monthly	Grab	
PARM Code 74055 I Non Site No. EFA-1	Permit Requirement					200. (MoGeoMean)	800 Max	#/100mL		s & Monthlys	Gart.	
Н	Sample	and Salan and Assessment			7.3		7.8	S.U.	n	Daily, five days per	Grab	
The same of the sa	Measurement			WESTER 7477	1.5		7.0	U.U.	-	week		
ARM Code 00400 I	Permit Requirement	100			6.0 (Min)		18,5%	iasüla.	Ħ.	Dajjy fiya daya per wapkir 6256	A Para Stab	

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson, Lead Operator		386-937-1143	

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING I	PERIODFrom:	05/01/2005	To:		05/31/05	
Parameter		Quantity of	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				2.0			mg/L	0	Daily, five days per week	Grab
PARM Code 50060 A Mon Site No. EFA-1	Permit Requirement	100			10.5 N (Min)			s mg/L		Mally five days par	Grab (1)
Nitrogen, Nitrate, Total (as N)	Sample Measurement				AR AL VIOLITARY		0.65	mg/L	0	Monthly	Grab
PARM Code 00620 1: Mon Site No. EFA-1	Permit a Requirement		Mr.				(2.0 s) Max	+mg/L4		Monthly	Grab
Flow	Sample Measurement	0.016		mgđ					0	Daily, five days per wook	Recording flow meter and totalizer
PARM Code 50050 G Mon.Site No. INF-1	Permit Requirement	0.030 (An:Avg.)		mgd						Daily five days per Week	Recording flow motor and totalizer
Flow	Sample Measurement	0.014	0.014	mgd				* ************************************	0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon Site No. INF-1	Permit Requirement	Report (Mo Avg.)	Report (Three-Mo Avg)	mgd						Dally, five days per	Recording flow meter and
BOD, Carbonaceous 5 day, 20C	Sample Measurement	***				230		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon Site No. INF-1	Permit *** Requirement		- , , t -	100		Report (Mo:Avg.)		mg/L1		EMonthly ()	Grab on the
Solids, Total Suspended	Sample Measurement					230		mg/L	0	Monthly	Grab
PARM Code 00530 G Mon Site No. INF-1	Permit Requirement					Report (Mo:Avg:)		mg/L	17	Monthly	I Grab
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						46.7%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon Site No. GÁL-1	Permit Requirement	r tipe i					Report (Mo Total)	Percent		a PMonthly to	s Calculated of

Permit Number:

FLA011742

Facility: Palm Port WWTP

MONITORING PERIOD

From:

05/01/2005

To: 05/31/2005

County: Putnam

	CBOD ₅ (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TRC (For Disinfect) (mg/L)	Nirtrogen, Nirtate, Total (as N) (mg/L)	Flow (mgd)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1	,				·		0.019		
2				7.4	2.2+		0.019		
3		:		7.5	2.2+		0.012		
4				7.5	2.2+		0.016		
5				7.5	2.2+		0.020		
6				7.4	2,2+		0.018		
7				7.4	2.2+		0.018		
8							0.019		
9				7.4	2.0		0.019		
10				7.5	2.2+		0.011		
11	2U	1.9	1U	7.5	2.2+	0.65	0.015	230	230
12				7.4	2.2+		0.018	-	
13				7.4	2.2+		0.006		
14			:	7.3	2.2		0.013		
15							0.013		
16				7.4	2.2+		0.013		
17				7.4	2.2+		0.013		
18				7.5	2.2+		0.010		
19			1	7.5	2.2+		0.014		
20			1	7.5	2.2+		0.014		
21				7.5	2.2+		0.013		
22							0.013		
23				7.4	2.2+		0.013		
24				7.3	2.2+		0.009		
25				7.3	2.2+		0.014		
26				7.3	2.2+		0.012		
27				7.3	2.2+		0.012		
28				7.4	2.2+		0.016		
29					- ,,,		0.016		
30				7.8	2.2+		0.016		
31				7.5	2.2+		0.014		
Total							0.445		
Mo.Avg.				6.2	0.6		0.014		

PLANT STAFFING

Day Sniπ Operators:	
---------------------	--

Evening Shift Operators:

Night Shift Operators:

Lead Operator:

Class: B

Class:

Class: ____

Certification No.:

Certification No.:

Certification No.:

Certification	No.:	4894

12476

Name: David Haring

Name: Paul Thompson

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Aqua Utilities Florida Leesburg, FL 34749

PERMIT NUMBER:

CLASS SIZE:

FLA011742

MAILING ADDRESS:

PO Box 490310

LIMIT:

Final Minor REPORT: Monthly **GROUP: Domestic**

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road

East Palatka, FL 32131

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

NO DISCHARGE FROM SITE:

[]

COUNTY:

MONITORING PERIOD From: 06/04/2005 06/20/05

	Putnam				MONITORING F	PERIODFrom:	06/01/2005	To:		06/30/05	
Parameter		Quantity	of Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous	Sample					2.0					
five-dav. 20° C	Measurement				Ì	2.0		mg/L	0	Monthly	Grab
PARM Code 80082 Y	Permit	1 P .	100	1.5	40.00	20.0	1.4 110743	112.45		4.44	A A LANGE OF THE PARTY
Mon.Site No. EFA-1	Requirement				1 7.4	(An. Avg.)		/ mg/L		Monthly 3	Grab
BOD, Carbonaceous	Sample						011				
five-dav, 20° C	Measurement					2U	2U	mg/L	0	Monthly	Grab
PARM Code 80082 I	Permit **					Report	60.0	2.8		A STANKS	
Mon Site No. EFA-1	Requirement		4			(Mo.Avg.)	(Max)	mg/L#		Monthly &	Grab
Solids, Total	Sample								a company of the comp		
Suspended (TSS)	Measurement					2.7		mg/L	0	Monthly	Grab
PARM Code 00530 Y	Permit	2330767		1	Section 1	20.0	4.1		ST Son	16.74	
Mon.Site No. EFA-1	Requirement	6 4 4 2	1.5	18 N 2		(An. Avg.)	1 4	mg/L*s		Monthly	Grab
Solids, Total	Sample							-	archaech ac	- Charles and Char	
Suspended (TSS)	Measurement					2.6	2.6	mg/L	0	Monthly	Grab
PARM Code 00530 I	Permit	n, italia	Az St			∗ Report :	60.0	0.544	100	are with the	SECTION 1
Mon.Site No. EFA-1	Requirement					(Mo.Avg.)	(Max) \	795		Monthly	Greb
Coliform, Fecal	Sample							and the second of	200000000000000000000000000000000000000	75.000000000000000000000000000000000000	
	Measurement					1U		#/100mL	1	Monthly	Grab
PARM Code 74055 Y	Permit:		100	100	146.81	2005	A VENEZI) main			ng kang ang ang ang ang ang ang ang ang ang
Mon Site No. EFA-1	Requirement			14		(An, Avg.) 🐇		#/100mL		Monthly	Grab.
Coliform, Fecal	Sample			380 380 380 1	15.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2		411		•		
	Measurement					1U	10	#/100mL	0	Monthly	Grab
PARM Code 74055 I	Permit 7				The second of	200	_ 800 × ·	1. (1.1)	1.5		
Won.Site No. EPA-1	Requirement					(MoGeoMean)	Max	#/100mL		A se-Monthly	Gran
оН	Sample				7.4	THE RESERVE THE RESERVE TO SERVE THE SECOND				Daily, five days per	The second secon
	Measurement			İ	7.1		7.4	S.U.	0	week	Grab
PARM Code 00400 I	Remit .	V 41.92	PARAMETER S	14.4	6:0,0	Harris Commencer	8.5			Daily five days per	
Von Site No. EFA-1	Requirement	47.74.74			(Min)		(Max)	SUST		c vook *	Crab
certify under penalty of law that this					TATELON CONTROL OF SECURIT	AND THE PARTY OF T	the state of the s	A CONTRACTOR OF THE PROPERTY O	The same of the sa		

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson, Lead Operator		386-937-1143	

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING F	PERIOD-From:	06/01/2005	To:		06/30/05	
Parameter		Quantity of	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement		di s eri		1.8			mg/L	0	Daily, five days per week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Réquirement			1 5 4	0.5 () (Min)	r.		mg/L		DENY five days (e.g.	g (Grab)
Nitrogen, Nitrate, Total (as N)	Sample Measurement	100					0.18	mg/L	0	Monthly	Grab
PARM Code 00620 I Mon.Site No. EFA-1	Permit Requirement				I ik j		12.0 / / Max //	/mg/L		Monthly #	Grab*)
Flow	Sample Measurement	0.016		mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 G Mon.Site No. INF-1	Permit Requirement	0.030 (An.Avg.)		mgd						Paily, five days per	Recording Downers; and
Flow	Sample Measurement	0.015	0.014333333	mgd	**************************************				0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon.Site No. INF-1	Permit Requirement	Report (Mo:Avg.)	Report (Three-Mo. Avg)	mgd				2		Daily flue days per week	Recording flow meter and
BOD, Carbonaceous 5 day, 20C	Sample Measurement			ing na sangang mengen		120		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement		11	Ŷ		Report (Mo:Avg.)		mgiL		Mogthly	Grab
Solids, Total Suspended	Sample Measurement	// -				72		mg/L	0	Monthly	Grab
PARM Code 00530. G Mon Site No. INF-1	Permit Requirement					Report (Mo.Ayg.)	4.7	mg/L l		Monthly	₹ (j. s. ye Grab (j. s. w ^g),
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						47.8%	Percent	0	Monthly	Calculated
PARM Code 00180 .G Mon.Site No. CAL-1	Permit Requirement						Report (Mo Total)	Percent		Monthly	Calculated

Permit Number:

FLA011742

Facility: Palm Port WWTP

MONITORIN	NG PERIOD	From:	06/01/2005	To:	06/30	0/2005	County: Putnam					
	CBOD₅ (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TRC (For Disinfect) (mg/L)	Nirtrogen, Nirtate, Total (as N) (mg/L)	Flow (mgd)	CBOD5 (mg/L)	TSS (mg/L)			
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530			
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1			
1 1				7.3	2.2+		0.013					
2				7.3	2.2+		0.015					
3				7.3	2.2+		0.017					
4				7.3	2.2+		0.012					
5							0.011					
6				7.4	2.2+		0.011					
7				7.3	2.2+		0.010					
8	2U	2.6	10	7.4	2.2+	0.18	0.007	120	72			
9				7.4	2.2+		0.014					
10				7.4	2.2+		0.015					
11				7.4	2.2+		0.013					
12							0.017					
13				7.3	2.2+		0.017					
14				7.3	2.2+		0.014					
15				7.2	2.2+		0.012					
16				7.2	2.2+		0.026					
17				7.1	2.2+		0.022					
18	-			7.1	2.2+		0.015					
19							0.019					
20				7.2	2.2+	 	0.019					
21				7.2	2.2+		0.012					
22				7.2	2.2+		0.023					
23				7.2	2.2+		0.017					
24				7.2	2.2+		0.014					
25				7.2	2.2+		0.016					
26 27			<u> </u>			-	0.018					
28				7.2	2.2+		0.018					
29				7.2	2.2+		0.015	+				
30				7.1	1.8		0.033					
31			-	7.1	1.8	 	0.015					
Total							0.478	 				
Mo.Avg.	20	2.6	1U	7.3	0.5	0.01	0.478		2			
PLANT STA		2.0		7.0	0.0	0.01	0.013					
Day Shift O		Class:	В	Ce	rtification No.:	12476	Name:	David Haring				
Evening Sh	ift Operators:	Class:			rtification No.:							
Night Shift (Operators:	Class:			rtification No.:							
Lead Opera	•	Class:	A		rtification No.:		Name:	Paul Thompson				

3

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Agua Utilities Florida Leesburg, FL 34749

PERMIT NUMBER:

CLASS SIZE:

FLA011742

MAILING ADDRESS: PO Box 490310 LIMIT:

Final Minor REPORT: Monthly **GROUP: Domestic**

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road

East Palatka, FL 32131

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

NO DISCHARGE FROM SITE:

F 1

COUNTY:	Putnam			MONITORING F	PERIODFrom:	07/01/2005	To:		07/31/05	
Parameter		Quantity of Loading	Units	Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous	Sample				2.0		mg/L	n	Monthly	Grab
five-dav, 20° C	Measurement				l					
PARM Code 80082 Y	Permit			14 m	20.0	4.41 41	Mar may 1	i di	Monthly	rat WeGrab
Mon Site No. EFA-1	Requirement		111		(An. Avg.)	1.71				
BOD, Carbonaceous	Sample				2U	2U	mg/L	a	Monthly	Grab
five-day, 20° C	Measurement						,y.z			
PARM Code 80082 I	Permit :	least the same			Report	60.0	#mg/L		Monthly	Grab
Mon Site No. EFA-1	Requirement	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			(Mo:Avg:)	(Max)		3 1		1 10
Solids, Total	Sample				2.5		mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement		Committee of the Commit	Total Control of the Control of C		TO COLORE OF THE PARTY OF THE P		TENERS TRANSPORT		
PARM Code 00530 Y	Permit				20.0	440	mg/L	1,5	Monthly	Grab
Mon Site No. EFA-1	Requirement		211		(An. Avg.)					
Solids, Total	Sample				10	10	mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement		727 7 7 7				To accompany to the con-	3.052.0 35 04		But of the second second second
PARM Code 00530 I	Permit		9 1 3 3		Report :	60.01	mg/L		Monthly	Grab.
Mon.Site No. EFA-1	Requirement		100		(Mo.Avg.)	. (Max)	7.50			
Coliform, Fecal	Sample				1.0	[#/100mL	0	Monthly	Grab
	Measurement			2			New Assessment			
PARM Code 74055, Y	Permit	Part Wall Control		4. April 1991	200	1.44	#/400mL		Monthly	Graph :
Mon Site No. EFA-1	Requirement 1				(An, Avg.)					
Coliform, Fecal	Sample				1.5	1.5	#/100mL	0	Monthly	Grab
PARM Code 74055	Measurement Permit				3200	C#800				
Mon.Site No. EFA-1	the second second second		a. 64 H2	1 34 (10 4) 57	.200 (MoGeoMean)	Max	#/100mL ju		Monthly, ser	o Grabia
MOILSIE NO. EFA-1	Requirement Sample				mogeomean)	FAMILY AND A				
рп	Measurement		[7.1		7.3	S.U.	0	Daily, five days per week	Grab
PARM Code 00400:1	THE PERSON OF STREET,			en til		20 CV 14				
AN TO AN THE AND THE PERSON TO	Permit:		Walle Broke	0.01		9.3	a su r		Paint tive days plan	E F g F to Grap # 1
Mon Site No. EFA-1	Requirement	THE CONTRACTOR OF THE CONTRACT	A BULL FAST	(Min)i **F	Page 18 18 18 18 18 18 18 18 18 18 18 18 18	(Max)	A. S. A. A. A. A.	的多品数	TO THE REAL PROPERTY.	EARLY THE SHIP SHIP SHIP SHIP SHIP

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson, Lead Operator		386-937-1143	

NELAC CERTIFICATION NUMBER(S):	
THE TO DETAIL TO THE THOMBET (O).	

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING P	ERIODFrom:	07/01/2005	To:		07/31/05	
Parameter		Quantity o	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement	-			1.4	-		mg/L	0	Daily, five days per week	Grab
PARM Code 50060, A Mon.Site No. EFA-1	Permit Requirement	*			1 0.5 ser 1 (Min)			ampl-1		Dally Tyodays per Wook 5 - 1	J F is Googleff
Nitrogen, Nitrate, Total (as N)	Sample Measurement		5				1.70	mg/L	0	Monthly	Grab
PARM Code 00620 I	Permit Requirement						12.0 s Max	mg/L		Monthly	Grap
Flow	Sample Measurement	0.016		mgd		The state of the s			0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 G Mon.Site No. INF-1	Permit Requirement	0:030 (An.Avg.)		mgd			t fijk s			Daily, five days per	Recording flow meter and
Flow	Sample Measurement	0.015	0.014	mgd	The state of the s				0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon Site No. INF-1	Permit Requirement	Report (Mo:Avg.)	Report (Three-Mo Avg)	mgd						Daily five days par	Recording flow mater and totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement	100000000000000000000000000000000000000				99		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon Site No: INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Monthly	C.L. Grab
Solids, Total Suspended	Sample Measurement					130		mg/L	0	Monthly	Grab
PARM Code 00530 G Mon:Site No. INF-1	Permit :: Requirement	1				Report (Mo.Avg.)		mg/L		Monthly	Fig. 17 Grab
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement					300000	47.8%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon Site No. CAL-1	Permit : Requirement	14.1					Report (Mosfotal)	, Percent	141	Monthly 4	Calculated

Permit Number:

FLA011742

Facility: Palm Port WWTP

· On the real real								. 23	
MONITORIN	IG PERIOD	From:	07/01/2005	To:	07/3	1/2005		County: P	outnam?
	CBOD ₅ (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TRC (For Disinfect) (mg/L)	Nirtrogen, Nirtate, Total (as N) (mg/L)	Flow (mgd)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1				7.1	1.8		0.022		
2		İ		7.1	2.0		0.015		
3				******			0.018		
4				7.2	2.2		0.018		
5	i			7.1	2.2		0.024		
6				7.2	2.2		0.020		
7	:			7.2	2.2		0.015		
8				7.1	2.2		0.012		
9				7.3	2.1		0.011		
10							0.021		
11				7.2	2.2		0.021		
12				7.2	2.2		0.013	· ·	
13	2U	1U	2	7.2	2.2	1.70	0.009	99	130
14				7.3	1.9	 	0.024		
15				7.3	2.2		0.017		
16				7.3	2.2		0.013		
17						-	0.014		
18				7.2	2.2		0.014		
19				7.2	2.2		0.014		
20	· ·	İ		7.2	2.2		0.011		
21 22				7.2	2.2		0.009		
23				7.1	2.2		0.015		
23		; 		7.1	2.2	-	0.016		
25				7.4		 	0.016	•	
26				7.1 7.1	2.0		0.016		
27				7.1			0.010 0.012		
28				7.1	2.0		0.012		
29				7.2	1.4		0.012		
30				7.2	2.2		0.014		
31							0.017	i	
Total				 -			0.477		
Mo.Avg.	2U	1U	2	7.2	1.7	0.05	0.015	3	4
PLANT ST	AFFING:								
Day Shift O	perators:	Class:	В	Ce	ertification No.	: 12476	Name:	David Haring	
	ift Operators:	Class:			ertification No.				
Night Shift		Class:			ertification No.		•		
Lead Opera		Class:	Α		ertification No.		Name:	Paul Thompson	
LULU OPOIC		J.000.	/ 1	0			itallic.	. aar mompauli	

Version: 11/10/2003

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Agua Utilities Florida

PERMIT NUMBER:

CLASS SIZE:

FLA011742

MAILING ADDRESS:

PO Box 490310 Leesburg, FL 34749

LIMIT:

Final Minor REPORT: Monthly **GROUP: Domestic**

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road

East Palatka, FL 32131

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

NO DISCHARGE FROM SITE:

Γĭ

COUNTY:	Putnam				MONITORING F	ERIODFrom:	08/01/2005	To:		08/31/05	
Parameter		Quantity	of Loading	Units	Qual	ity or Concentrat	ion	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous	Sample]]		9.4			0	Monthly	Grab
ive-dav, 20° C	Measurement					2.1		mg/L	٠	мольтиу	GIAD
PARM Code 80082 Y	Permit 1			14.2	14.00	20,0	14 May 1	11860 LT	119	100	
Won:Site No. EFA-1	Requirement	74. 3		[(An. Avg.)	100	1104		14114	
30D, Carbonaceous	Sample					2.5	2.5		0	Monthly	Grab
ive-dav. 20° C	Measurement						2.5	mg/L	U	Montrny	GIAD
PARM Code 80082 1	Permit:		1.11	12.7.1	Alteria (Report	60.0	Miles .			Grab
Mon,Site No. EFA-1	Requirement		7 T T T T T T T T T T T T T T T T T T T			(Mo.Avg.)	(Max)	mg/L			
Solids, Total	Sample					2.7		mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement	State of the state	****	and the second second second				my.c	- I - I - I - I - I		
PARM Code 00530 Y	Permit					20.0	15 M	mg/Li		Monthly	Grab
fon.Site No. EFA-1	Requirement					(An. Avg.)				* * * * * * * * * * * * * * * * * * *	
Solids, Total	Sample					2.7	2.7	mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement		Recognision of the second	F 14.90, 17.94, 15.00	Cura de la Cura de la			*****			
ARM Code 00530 I	Permit	46.76				Report	60.0	l mg/L		Monthly	Grab
Mon Site No. EFA-1	Requirement					(Mo.Avg.)	(Max)				
Coliform, Fecal	Sample Measurement					1U		#/100mL	0	Monthly	Grab
PARM Code 74055 Y	Permit					200		#/100mL i		Monthly &	Grab
fon.Site No. EFA-1	Requirement	7.78			7 7 1	(An, Avg.)			12.34	996.4	
Coliform, Fecal	Sample					1U	10	#/100mL	0	Monthly	Grab
	Measurement	og i i i i i i i i i i i i i i i i i i i	3100 Sept. 1	N0395-220-5-7-7	Carrier 1. Section 2. Per consequent				No estable		
ARM Code 74055 1 Mon.Site No. EFA-1	Permit Requirement					200 (MoGeoMean)	*800 Max	#/100mL *		Monthly a	Grabit (1988)
Н	Sample	an casa an an an an an an an an an an an an an		CALTERS			200		生活强焦	Daily, five days per	
	Measurement				7.0		7.2	S.U.	0	week	Grab
ARM Code 00400 I Ion Site No. EFA-1	Permit Requirement		4		6.0 (Min)		8.5 (Max)	a s Silva		Dally (IVergava pej	J. Gran

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

r			
NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson, Lead Operator		386-937-1143	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):	Calculated-Roll AnAvg. is the average of the current monthly average and the preceding 11 month's avreage.
--	--

NELAC CERTIFICATION NUMBER(S):	

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING F	PERIODFrom:	08/01/2005	To:		08/31/05	
Parameter		Quantity	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.6			mg/L	0	Daily, five days per week	Grab
PARM Code 50060 A	Permit * - 14			The S	0.5	li i Lin de la co		morie		Daily five days par	n Grab
Mon:Site No. EFA-1	Requirement >			No.	(Min)					week	
Nitrogen, Nitrate, Total	Sample						3.90	mg/L	0	Monthly	Grab
(as N)	Measurement	Constant of the Constant	A Maria Cara Cara Cara Cara Cara Cara Cara	Con Mary Maria					APSESS S		
PARM Code 00620 I	Permit	100		1.0	r Garago		12.0	mg/L		Monthly	Grab **
Mon Site No. EFA-1	Requirement	3	11 2000 1 2	fee of the		***	C Nax 4		100		
Flow	Sample Measurement	0.016		mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050. G Mon.Site No. INF-1	Permit Requirement	0.030 (An.Avg.)		mgd						Dally five days per week o	Recording flow meter and
Flow	Sample Measurement	0.015	0.014333333	mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon.Site No. INF-1	Permit Requirement	Report (Mo.Avg.)	Report (Three-Mo	mgd :						Pally five days per wool	Recording flow meter and totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement					180		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon Site No. INF-1	Permit Requirement	79.%	1.00			Report (Mo.Avg.)		mg/Ls		Monthly 1	Grab.
Solids, Total Suspended	Sample Measurement	The second secon				120		mg/L	0	Monthly	Grab
PARM Code 00530 G Mon Site No. INF-1	Permit Requirement	45%	and the same	à.		Report (Mo.Avg.)	31.	emg/L		Monthly '	Grab
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement		e read and states and advances 100 5 security		and the second s		47.8%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon Site No. CAL-1	Permit Requirement			1.00 kg/t	Los A		Report. (Mo. Total)	Percent	(i)	Manthly Ex	Calculated Ca

Permit Number:

FLA011742

Facility: Palm Port WWTP

 MONITORING PERIOD
 From:
 08/01/2005
 To:
 08/31/2005
 County: Putnam

	CBOD₅	TSS	Fecal	рН	TRC (For	Nirtrogen,	Flow	CBOD5	TSS
	(mg/L)	(mg/L)	Coliform Bacteria (#/100ML)	(SU)	Disinfect) (mg/L)	Nirtate, Total (as N) (mg/L)	(mgd)	(mg/L)	(mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	1NF-1	INF-1	INF-1
1	EFA-1	EFA-1	EFA-1			EFA-1		INF-1	NF-
2				7.2 7.1	2.2		0.017 0.015		 .
3	2.5	2.7	1U	7.1	2.0	3.90	0.013	180	12
4	2.3	2.1	10	7.0	2.2	3.90	0.013	180	12
5				7.0	2.2		0.012	-	
6		-		7.1	2.2		0.014	-	
7							0.017		
8	:			7.1	2.2		0.017		
9	-			7.1	1.6		0.016		
10				7.1	2.2		0.016	- International Contractions of the Contraction of	
11			:	7.1	2.2		0.015		
12	i			7.2	2.2		0.014		
13				7.2	2.2		0.013		
14							0.015		
15				7.2	2.2		0.015		
16				7.2	1.8		0.011		
17				7.2	2.0		0.013		
18				7.1	2.0		0.014		
19				7.0	2.2		0.010		
20				7.0	2.2		0.013		
21							0.017		
22				7.1	2.2		0.017		
23				7.1	2.2		0.014		
24				7.2	2.2	!	0.013		
25	-	-		7.2	2.2		0.015		
26				7.2	2.2		0.016		
27				7.2	2.2		0.015		
28 29							0.015		
			·	7.2	2.2		0.015		
30				7.2	2.2		0.017		
Total				7.2	2.2		0.015		
Mo.Avg.	2.5	2.7	10	7.1	1.9	0.13	0.451		

PL	AN'	r s	ΓAF	FIN	NG:

Lead Operator:

Class:	В
Class:	С
Class:	
	Class:

Certification No.:	12476
Certification No.:	7605
Cortification No :	

4894

Certification No.: ____

Name:	David Haring						
	Larry White						
Nama:	Paul Thompson						

Version: 11/10/2003 3

Class:

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Agua Utilities Florida

PERMIT NUMBER:

FLA011742

MAILING ADDRESS:

PO Box 490310 Leesburg, FL 34749

LIMIT: CLASS SIZE: Final Minor REPORT: Monthly GROUP: Domestic

FACILITY: LOCATION: Paim Port WWTP Dog Branch Road

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

NO DISCHARGE FROM SITE:

[]

To:

09/30/05

East Palatka, FL 32131 COUNTY

Putnam

MONITORING PERIOD-From: 09/01/2005 Units No. Frequency of Sample Type **Parameter** Quantity of Loading Units Quality or Concentration Ex. **Analysis** BOD, Carbonaceous Sample 2.0 mg/L Monthly Grab Measurement five-day, 20° C PARM Code 80082 Y Permit. Mon.Site No. EFA-1 Requirement BOD, Carbonaceous Sample 2U Grab 2U mg/L 0 Monthly five-day, 20° C Measurement PARM Code 80082 1 60.0 Report Permit Mon.Site No. EFA-1 (Mo.Avg.) Requirement (Max) Solids, Total Sample Grab 2.6 Monthly mg/L Suspended (TSS) Measurement PARM Code 00530 Y Permit -20:0 Mon Site No. EFA-1 Requirement An. Avg.) Solids, Total Sample 1.9 Grab 1.9 mg/L Monthly Suspended (TSS) Measurement PARM Code 00530 I Permit Mon Site No. EFA-1 (Max) Requirement (Mo.Avg.) Coliform, Fecal Sample Grab 6.9 #/100mL Monthly Measurement PARM Code 74055 Y Permit Mon.Site No. EFA-1 Requirement Coliform, Fecal Sample 72.0 72.0 Grab #/100mL Monthly Measurement PARM Code 74055 800 Permit* Mon.Site No. EFA-1 Requirement (MoGeoMean) Sample Hal Daily, five days per 7.1 7.2 S.U. Grab Measurement PARM Code 00400. I Mon Site No. EFA-1 Requirements

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson, Lead Operator		386-937-1143	

NELAC CERTIFICATION NUMBER(S):	:

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING F	PERIODFrom:	09/01/2005	To:		09/30/05	
Parameter		Quantity of	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.6			mg/L	0	Daily, five days per week	Grab
PARM Code 50060 A Mon:Site No. EFA-1	Permit Requirement				0.5 (Min)			mg/L		Pally fivedays par k = 100 wool	Section 1
Nitrogen, Nitrate, Total (as N)	Sample Measurement						6.70	mg/L	0	Monthly	Grab
PARM Code 00620 I Mon.Site No. EFA-1	Permit, Requirement			100			12 0 Max	mg/L		Monthly	Grab
Flow	Sample Measurement	0.016		mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 G Mon Site No. INF-1	Permit Requirement	-0.030 ≥ (An.Avg.)		mgd						Daily five daysiper was the control of the control	Recording flow meter and totalizer
Flow	Sample Measurement	0.016	0.014666667	mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon Site No. INF-1	Permit.	Report (Mo.Avg.)	Report (Three-Mo Avg)	mgd			alda er g			Daily five days per week.	Recording flow meter and totalizer:
BOD, Carbonaceous 5 day, 20C	Sample Measurement					31		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement			30		Report - (Mo.Avg.)		pig/L		Monthly, 8	-Grab
Solids, Total Suspended	Sample Measurement					24		mg/L	0	Monthly	Grab
PARM Code 00530 G Mon Site No. INF-1	Permit					Report (Mo.Avg.)		-mg/L		Monthly, 2	Photo Ed Grab 1017
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement					763.4 304.5 3	48.9%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon Site No. CAL-1	Permit Requirement				有其象性		Report (Mo:Total)	Percent	3.7	(Monthly)	Calculated

Permit Number:

FLA011742

Facility: Palm Port WWTP

MONITORING PERIOD

From:

09/01/2005

To: 09/30/2005

County: Putnam

F	CBOD ₅	TSS	Fecal	pH	TRC (For	Nirtrogen,	Flow	CBOD5	TSS
	(mg/L)	(mg/L)	Coliform Bacteria (#/100ML)	(SU)	Disinfect) (mg/L)	Nirtate, Total (as N) (mg/L)	(mgd)	(mg/L)	(mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1				7.1	2.2+		0.016		
2				7.1	2.2+		0.012		
3				7.2	2.2+		0.016		
4							0.013		
5				7.2	2.2+		0.013		
6				7.1	2.2+		0.019		
7	2U	1.9	72B	7.1	1.6	6.70	0.025	31	24
8				7.1	2.0		0.035		
9				7.1	1.8		0.022		
10				7.2	2.1		0.019		
11							0.016		
12				7.1	2.2+		0.016		
13				7.1	2.2+		0.014		
14				7.1	2.2+		0.011		
15				7.1	2.2+		0.016		
16				7.1	2.2		0.009		
17				7.1	2.0		0.012		
18							0.015		
19				7.1	2.2+	i	0.015		
20				7.2	2.2+		0.012		
21		1		7.1	2.2+		0.015		
22				7.1	2.2+		0.027		
23				7.1	2.2+		0.018		
24				7.1	2.2+		0.019		
25				7.1	2.2+		0.036		
26				7.1	2.2+		0.008		
27				7.1	2.2+		0.021		
28				7.2	2.2+		0.010		
29				7.1	2.2+		0.020		
30				7.1	2.2+		0.011		
31						}			
Total							0.510		
Mo.Avg.	2U	1.9	72	7.1	1.3	0.22	0.016	1	1

PLANT	STA	FF	ING
-------	-----	----	-----

Day Shift Operators:	
Evening Shift Operator	

Evening Shift Operators: Night Shift Operators:

Lead Operator:

Class: B
Class: C

Class: ____ A

Certification No.: 12476
Certification No.: 7605

Certification No.:

Name: David Haring

Larry White

Certification No.: 4894 Name: Paul Thompson

Palm Port

Docket No. 060368-WS

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

Florida

Report Missing:

Discharge Monitoring Report

Month/Year

October 2005

Aqua Utilities Florida, Inc.

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Aqua Utilities Florida

PERMIT NUMBER:

FLA011742

MAILING ADDRESS:

PO Box 490310 Leesburg, FL 34749 LIMIT:

CLASS SIZE:

Final Minor

[]

REPORT: Monthly GROUP: Domestic

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road MONITORING GROUP NUMBER: R-001 MONITORING GROUP DESC: Rapid

Rapid Infiltration

East Palatka, FL 32131

NO DISCHARGE FROM SITE:

._

11/30/05

COUNTY: P	utnam				MONITORING F	PERIODFrom:	11/01/2005	To:		11/30/05	
Parameter		Quantity	of Loading	Units	Qua	lity or Concentration		Units	No.	Frequency of	Sample Type
			•						Ex.	Analysis	
BOD, Carbonaceous	Sample					2.1		mg/L	n	Monthly	Grab
five-day. 20° C	Measurement					ì		8. =		inonany	
PARM Code 80082, Y	Permit		100			20.0	A CONTRACT	amg/L	100	Monthly	Grab 11
Mon Site No. EFA-1	Requirement					(An. Avg.)	13000			Monthly	
BOD, Carbonaceous	Sample					2.8	2.8	mg/L	0	Monthly	Grab
five-day, 20° C	Measurement		To a construction of the c						No. and the second		Server and the server
PARM Code 80082 I	Permit :	74.	1. 444		440 444	Report	60.0	mails	10.	Monthly	A Grab
Mon.Site No. EFA-1	Requirement .		11			* / (Mg:Avg.)	(Max)* i	mg/L2			
Solids, Total	Sample					2.7		mg/L	0	Monthly	Grab
Suspended (TSS)	Measurement		F 10 10 10 10 10 10 10 10 10 10 10 10 10			l		STOLENS OF THE	Na and Salan		
PARM Code 00530 Y	Permit .		3 17 38 1		1.531	j. 20.0	i i libratii	mg/L 🕏		Monthly : 1	Grab
Mon.Site No. EFA-1	Requirement	54	\$	2 2 2 3		(An. Ayg.)	11.74				
Solids, Total	Sample					3.0	3.0	mg/L	0	Monthly	Grab
Suspended (TSS) PARM Code 00530 1	Measurement Permit	250000000000000000000000000000000000000		3,5,5,3,2,2			600		\$ 4 To 30		
Mon,Site No. EFA-1	Requirement	1.			6	Report (Mo.Avg.)	.60 0 (Max)	lmg/U 🦡		Monthly \$	Grab
Coliform, Fecal	Sample	Q (1.13)		4 2 2 1 3		2 (mo.vag.)	, Milay) \$		W 7 9 9		
Comorni, recai	Measurement					1U		#/100mL	1	Monthly	Grab
PARM Gode 74055: Y	Permit			21-81.4		2002					SELECTION OF THE SELECT
Mon Site No. EFA-1	Requirement		100	0000	19911	(An. Avg:)		#/100mL		Monthly	(F) 12.9 Grab
Coliform, Fecal	Sample			100000000000000000000000000000000000000	2.35.00 372.46 48.082.135.11						
, , , , , , , , , , , , , , , , , , , ,	Measurement					10	10	#/100mL	0	Monthly	Grab
PARM Code 74055 i	Permit				12/02/11/12	200	2800, 1			344.574.6	
Mon.Site No. EFA-1	Requirement	rate in the			. Stiff B 430, P84	(MoGeoMean)	Max	#/100mL*		Monthly	Carlo Gree
рН	Sample				6.9		7.2	S.U.	n	Daily, five days per	Grab
	Measurement				0.9		1.2	3.U.	U	week	Glau
PARM Code 00400 ii	Permit +>				6.00		1488561			Daily, tive days, par	
Mon Site No. EFA-1	Requirement		100	100	(Min)		(Max)			E Say Young Com	

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson, Lead Operator		386-937-1143	

NELAC CERTIFICATION NUMBER(S):	
HEB 10 OLIVIII 10 THOM HOMBER(0).	

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING F	ERIODFrom:	11/01/2005	То:		11/30/05	
Parameter		Quantity o	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.0			mg/L	0	Daily, five days per week	Grab
PARM Code 50060: A Mon Site No. EFA-1	Permit. Requirement				0.5 9 (Mip),			កាចារិ		Cally five days per	ja grabin p
Nitrogen, Nitrate, Total (as N)	Sample Measurement				200000000000000000000000000000000000000		2.20	mg/L	0	Monthly	Grab
PARM Code 00620 I Mon Site No. EFA-1	Permit						12.0 Max	mg/L	71	Monthly	G(ab
Flow	Sample Measurement	0.016		mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 G Mon:Site No. INF-1	Permit Requirement	0.030 ¥ (.gvA.nA)		mgd				1		Daily five days per week	Recording flow meter and totalizer
Flow	Sample Measurement	0.014	0.014	mgd		. H			0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon Site No. INF-1	Permit Requirement	Report (Mo.Avg.)	Report (Three-Mo Avg)	mgd				-11		Daily five days per weak it is	Recording flow meter and totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement					180		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)	181	mg/L		. Monthly	Grab
Solids, Total Suspended	Sample Measurement					170		mg/L	0	Monthly	Grab
PARM Code 00530 G Mon Site No. INF-1	Permit Requirement			1.46.7		Report (Mo.Avg.)		mg/L		Monthly 8	Grab
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						46.7%	Percent	0	Monthly	Calculated
PARM Code 00180. G Mon Site No. CAL-1	Permit Requirement		gg tritte				Report ((Mo:Total)	Percent	31.51	Monthly, 2	Calculated, Page

Permit	Num	ber:
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FLA011742

Facility: Palm Port WWTP

MO	Mľ	ros	INC	: PF	RIC	'n
IVICA	IVI	ıvr		, – –	111	,,,

From: 11/01/2005

To: 11/30/2005

County: Putnam

	CBOD₅ (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TRC (For Disinfect) (mg/L)	Nirtrogen, Nirtate, Total (as N) (mg/L)	Flow (mgd)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1				7.1	2.2		0.014		
2				7.2	2.2		0.012		
3				7.2	2.2		0.012		
4				7.2	2.2		0.011		
5				7.1	2.2		0.016		
6							0.017		
7				7.0	1.0		0.017		
8				6.9	1.0		0.013		
9	2.8	3.0	1U	6.9	2.2	2.20	0.009	180	170
10				7.0	2.2		0.013		
11				7.0	1.4		0.015		
12				7.1	2.2		0.011		
13							0.012		
14				7.1	2.2		0.012		
15				7.1	2.2		0.012		
16				7.1	2.2		0.011		
17				7.1	2.2		0.020		
18				7.1	2.2		0.009		
19				7.1	2.2		0.018		
20							0.013		
21				7.1	2.2		0.013		
22				7.1	2.2		0.013		
23				7.1	2.2		0.012		
24				7.2	2.2		0.019		
25				7.2	2.2		0.013		
26				7.2	2.2		0.016		
27							0.018		
28	; 			7.2	2.2		0.018		
29				7.2	2.2		0.020		
30				7.2	2.2		0.018		
31									
Total							0.425		
Mo.Avg.	2.8	3.0	1U	7.1	1.7	0.07	0.014	6	

Day Shift Operators:	Class:	В	Certification No.:	12476	Name: David Haring	
Evening Shift Operators:	Class:		Certification No.:		Name:	
Night Shift Operators:	Class:		Certification No.:		Name:	
Lead Operator:	Class:	Α	Certification No.:	4894	Name: Paul Thompson	

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:

Aqua Utilities Florida

PERMIT NUMBER:

CLASS SIZE:

FLA011742

MAILING ADDRESS:

PO Box 490310 Leesburg, FL 34749 LIMIT:

Final Minor REPORT: Monthly **GROUP: Domestic**

FACILITY: LOCATION: Palm Port WWTP Dog Branch Road

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Rapid Infiltration

NO DISCHARGE FROM SITE:

[]

East Palatka, FL 32131 COLINITY: Putnam

COUNTY:	Putnam				MONITORING F	PERIODFrom:	12/01/2005	To:		12/31/05	
Parameter		Quantity	of Loading	Units	Qua	lity or Concentrat	ion	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous	Sample					2.1	T	mg/L	0	Monthly	Grab
five-dav. 20° C	Measurement					2.1		my/c	U	Monthly	Giab
PARM Code 80082 Y	Permit	di de	na likuv	1 44.		£ 20.0	12.100	110		Monthly	
Mon Site No. EFA-1	Requirement		49			(An. Avg.)	75				
BOD, Carbonaceous	Sample					2U	2U	mg/L	0	Monthly	Grab
five-dav. 20° C	Measurement					_		IIIg/L	, u	montany	Giab
PARM Code 80082 I	Permit :				和基础上:	Report 8	60.0		6. c	Monthly 8	
Mon.Site No. EFA-1	Requirement					(Mo.Avg.)	(Max)	mg/L		and the same	3 3 3 4 5
Solids, Total	Sample					2.2		mg/L	n	Monthly	Grab
Suspended (TSS)	Measurement							nig/L	U	Monthly	GIAD
PARM Code 00530 Y	Permit		121		- 4.4	20.0		mg/L*	10.4	Monthly	grab .
Non.Site No. EFA-1	Requirement	推为主义的	1		1111	(An Avg.)	100			Mountain	
Solids, Total	Sample					1.1	1.1	mg/L		Monthly	Grab
Suspended (TSS)	Measurement						1.1	IIIg/L	U	Monthly	Grab
PARM Code 00530 1	Permit				A NAME OF STREET	Report	60.0	mg/L		Monthly	16 pt 1
Von:Site No. EFA-1	Requirement	100			-3 11 1	(Mo.Avg.)	(Max)	INUL.		A MOUNTAIN	Grab
Coliform, Fecal	Sample Measurement					7.0		#/100mL	0	Monthly	Grab
PARM Code 74055 Y	Permit :	A	E Act 1		1.0	200	10 23c 1 2 3			a of Calebra Hall	akani i kacama
Mon.Site No. EFA-1	Requirement					(An. Avg.)		#/100mL	18.7	Monthly	L Gran
Coliform, Fecal	Sample					1U	1U	#/100mL	n	B. C. and S. C.	Grab
	Measurement					10	10	#/1UUML	U	Monthly	Grab
ARM Code 74055 I	Permit	345 J.		186.54		2005	800			100	
fon.Site No. EFA-1	Requirement		Maria de la composición dela composición de la composición de la composición de la composición de la composición de la composición dela composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la co			(MoGeoMean)	Max	#/100mL+		Monthly	
Н	Sample		and the composition of the state of the stat		7.0	Company of Dispersion and Page 1755 The	7.0		A	Daily, five days per	O I
	Measurement		:		7.2		7.2	S.U.	0	week	Grab
ARM Code 00400, I	Permit // Requirement				₩ \$ 6.0 € (Min):		# 8.5 *(Max)			Dally-rive tlave par swip(ker	Grabi III

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Paul Thompson, Lead Operator		386-937-1143	

NELAC CERTIFICATION NUMBER(S):		
--------------------------------	--	--

Facility Name: Palm Port WWTP

PERMIT NUMBER: FLA011742

					MONITORING F	ERIODFrom:	12/01/2005	To:		12/31/05	
Parameter		Quantity o	of Loading	Units	Qu	ality or Conc	entration		No. Ex.	Frequency	Sample Type
Total Residual Chlorine (For Disinfection)	Sample Measurement				2.2			mg/L	0	Daily, five days per week	Grab
The state of the s	Permit Regulrement	4	17.31		0.5 (Mib)	144		mul-	1	Dally, Typidaya par wasa	F : Grab (€ 1)
Nitrogen, Nitrate, Total (as N)	Sample Measurement						0.35	mg/L	0	Monthly	Grab
1. 为多数是基础的1. 数据,2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Permit Requirement		1. J. : [1]		19-11 1-11	14117	#12:0 # Max #	ing/L	4	H Monthly #2	de la Grabinia di di
Flow	Sample Measurement	0.014		mgd					0	Daily, five days per week	Recording flow meter and totalizer
	Permit Requirement	0.030 (An.Avg.)		g mgd	$f(t, t_i)$		/ # /,	il ii		Dally five dave per week	Recording flow meter and
Flow	Sample Measurement	0.015	0.015	mgd					0	Daily, five days per week	Recording flow meter and totalizer
PARM Code 50050 P Mon Site No. INF-1	Permit Requirement	Report (Mo.Avg.)	Report (Three-Mo Avg)	mgd	1 0.1	$I_{I}II$				Dally five days per week	Recording flow meter and
BOD, Carbonaceous 5 day, 20C	Sample Measurement				200	160		mg/L	0	Monthly	Grab
PARM Code 80082 G Mon:Site No. INF-1	Permit Requirement					Report (Mo:Avg.)	4.4	.mg/L	ŧ,	Monthly at	Grab
Solids, Total Suspended	Sample Measurement					210		mg/L	0	Monthly	Grab
PARM Code 00530 G Mon:Site No. INF-1	Permit; Requirement) j	. 1	Report (Mo:Avg.)		mg/L.		Monthly .	Grab.
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						48.9%	Percent	0	Monthly	Calculated
PARM Code 00180 G Mon Site No: CAL-1	Permit Requirement			Milia	uligati i	trapa in the	Report (Mo Total)	Percent		Monthly a see	Calculated

To:

Permit Number:

FLA011742

Facility: Palm Port WWTP

MO	NIT	ORII	NG	PE	RIO	D
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From:

12/01/2005

12/31/2005

County: Putnam

	CBOD ₅ (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria	pH (SU)	TRC (For Disinfect) (mg/L)	Nirtrogen, Nirtate, Total (as N) (mg/L)	Flow (mgd)	CBOD5 (mg/L)	TSS (mg/L)
			(#/100ML)		(··· 3 ·=)	(45 7) (11 5 - 7	:		
Code	80082	00530	74055	00400	50060	00620	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1				7.2	2.2		0.014		
2				7.2	2.2		0.009		
3				7.2	2.2		0.016		
4						a America	0.011		
5				7.2	2.2		0.011		
6				7.2	2.2		0.012		
7	2U	1.1U	1U	7.2	2.2	0.35	0.015	160	210
8	-			7.2	2.2		0.022		
9				7.2	2.2	i	0.008		
10	:			7.2	2.2		0.019		
11							0.015		
12				7.2	2.2		0.015		
13			i	7.2	2.2	:	0.014		
14				7.2	2.2	i	0.012		
15				7.2	2.2		0.016		
16				7.2	2.2		0.013		
17				7.2	2.2		0.015		
18							0.021		
19				7.2	2.2		0.021		
20	i			7.2	2.2		0.026		
21				7.2	2.2		0.005		
22				7.2	2.2		0.016		
23				7.2	2.2		0.017		
24			i	7.2	2.2		0.015		
25			1				0.019		
26			:	7.2	2.2		0.019		
27				7.2	2.2		0.015		
28				7.2	2.2		0.013		
29				7.2	2.2		0.015		
30			!	7.2	2.2		0.017		
31	:			7.2	2.2		0.017		
otal						:	0.472		
lo.Avg.	2U	1.1	1U	7.2	1.9	0.01	0.015	5	

PL	ANT	STA	(FFING:	

Day Shift Operators:	
Consider Chief Consider	_

Evening Shift Operators: Night Shift Operators:

Lead Operator:

В Class: Class:

Class: Class: Α

Certification No.: 12476

Certification No.: Certification No.:

Certification No.	:	4894

Name:	David	Haring

Name: Name: Name: Paul Thompson