ORIGINAL



**Sunny Hills**

Docket No. 060368-WS

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

Florida

**VOLUME 6**

**Book 8**

**Set 19 of 24**

Containing
Additional Engineering Requirements

Discharge Monitoring Report

**Aqua Utilities Florida, Inc.**

# Aqua Utilities Florida, Inc.
# Discharge Monitoring Reports

## Sunny Hills

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Northwest District **Domestic Wastewater Section**
**160 Government Center, Pensacola, FL 32501-5794**

PERMITTEE NAME: Florida Water Services
MAILING ADDRESS: P.O. Box 609520
Orlando, FL 32860-9520
Attention:

PERMIT NUMBER: **FLA010258-001**
MONITORING PERIOD--From: **01/01/2004** To: **01/31/2004**
LIMIT: **Final**
CLASS SIZE **Minor**
FACILITY ID: **FLA010258** GROUP: **DW**
GMS ID NO. **1067P02344**
DISCHARGE POINT NUMBER: **R001** WAFR SITE NO. **1931**
PLANT SIZE/TREATMENT TYP **2C**

FACILITY: **Sunny Hills WWTF**
LOCATION: 3808 Gables Blvd., Sunny Hills, Florida
COUNTY: Washington

**Please read instructions before completing this form.**

| Parameter | | Quantity or Loading | | | Quality or Concentration | | | | No. Ex | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Average | Maximum | Units | Min/Other | Average | Maximum | Units | | | |
| Flow<br>Annual Average<br>STORET No. 50050 Y Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | **0.02** | **0.02** | MGD | | | | | 0 | Daily, 6/wk | Meter |
| | Permit Requirement | Report Monthly | 0.05<br>Ann_Avg. | MGD | | | | | | Daily, 6/wk | Meter |
| CBOD5<br>Annual Average<br>STORET No. 80082 Y Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | | **3.5** | | mg/L | 0 | Every 2 Weeks | Grab |
| | Permit Requirement | | | | | 20.0<br>Annual | | mg/L | | Every 2 Weeks | Grab |
| CBOD5<br>STORET No. 80082 1 Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | **5.0** | | **5.0** | mg/L | | Every 2 Weeks | Grab |
| | Permit Requirement | | | | 30.0<br>Mon. Av | 45.0<br>Wkly. Avg. | 60.0<br>Single Sample | mg/L | | Every 2 Weeks | Grab |
| TSS<br>Annual Average<br>STORET No. 00530 Y Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | | **3.0** | | mg/L | 0 | Every 2 Weeks | Grab |
| | Permit Requirement | | | | | 20.0<br>Annual | | mg/L | | Every 2 Weeks | Grab |
| TSS<br>STORET No. 00530 1 Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | **3.5** | | **4.0** | mg/L | | Every 2 Weeks | Grab |
| | Permit Requirement | | | | 30.0<br>Mon. Av | 45.0<br>Wkly. Av | 60.0<br>Single Sample | mg/L | | Every 2 Weeks | Grab |
| Fecal Coliform<br>STORET No. 31616 1 Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | | **34.3** | **1U** | mg/L | | Every 2 Weeks | Grab |
| | Permit Requirement | | | | | 200<br>Annual | 800<br>Single Sample | #/100ml | | Every 2 Weeks | Grab |

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

| NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT (Type or Print) | SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | TELEPHONE NO. | DATE (YY/MM/DD) |
|---|---|---|---|
| Harold Register Project Manager | | (850) 773-2802 | **04/02/05** |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): (Attach additional sheets if necessary.)

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: Florida Water Services
MAILING ADDRESS: 1000 Color Place
Apopka, FL 32703
Attention:

FACILITY: **Sunny Hills WWTF**
LOCATION: 3808 Gables Blvd., Sunny Hills, Florida
COUNTY: Washington

PERMIT/FACILITY ID NO.: **FLA010258-001**
MONITORING PERIOD--From: **1/1/2004** To: **1/31/2004**
LIMIT: **Final**
CLASS SIZE **Minor**
FACILITY ID: **FLA010258** GROUP: **DW**
GMS ID NO. **1067P02344**
DISCHARGE POINT NUMBER: **R001**
PLANT SIZE/TREATMENT TYP **2C**

**Please read instructions before completing this form.**

| Parameter | | Quantity or Loading | | | Quality or Concentration | | | | No. Ex | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Average | Maximum | Units | Min/Other | Average | Maximum | Units | | | |
| pH | Sample Measurement | | | | **6.7** | | **7.2** | std. | 0 | Daily 6/Week | Grab |
| STORET No. 00400 1 Range Mon. Site No. EFF-1 | Permit Requirement | | | | 6.0 Single S | | 8.5 Single S | std. | | Daily 6/Week | Grab |
| Total Residual Chlorine Disinfection | Sample Measurement | | | | **0.50** | | **1.14** | mg/L | | Daily 6/Week | Grab |
| STORET No. 50060 1 Range Mon. Site No. EFA-1 | Permit Requirement | | | | 0.50 Single S | | | mg/L | | Daily 6/Week | Grab |
| CBOD5 Influent | Sample Measurement | | | | | **147** | **198** | mg/L | | Every 2 Weeks | Grab |
| STORET No. 80082 1 Mon. Site No. INF-1 | Permit Requirement | | | | | Report Monthly | Report Single S | mg/L | | Every 2 Weeks | Grab |
| TSS Influent | Sample Measurement | | | | | **146** | **192** | mg/L | | Every 2 Weeks | Grab |
| STORET No. 00530 1 Mon. Site No. INF-1 | Permit Requirement | | | | | Report Monthly | Report Single S | mg/L | | Every 2 Weeks | Grab |
| STORET No. 1 Mon. Site No. | | | | | | | | | | | |
| | | | | | | | | | | | |
| STORET No. 1 Mon. Site No. | | | | | | | | | | | |
| | | | | | | | | | | | |
| STORET No. 1 Mon. Site No. | | | | | | | | | | | |
| | | | | | | | | | | | |

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| NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT (Type or Print) | SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | TELEPHONE NO. | DATE (YY/MM/DD) |
|---|---|---|---|
| Harold Register Project Manager | | (850) 773-2802 | **04/02/05** |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): (Attach additional sheets if necessary.)

## DAILY SAMPLE RESULTS - PART B

Facility ID: **FLA010258-001** Facility Name: **Sunny Hills WWTF**

**Three-month Average Daily Flow: 0.011**

**Daily Flow % of Permitted Capacity: 13%**

Month/Year: **January-04**

| Days of the Month / Parameter / Units | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow mgd | 0.013 | 0.018 | 0.018 | 0.020 | 0.017 | 0.017 | 0.019 | 0.014 | 0.017 | 0.017 | 0.021 | 0.019 | 0.016 | 0.018 | 0.017 | 0.016 | 0.016 | 0.020 | 0.019 | 0.016 | 0.019 | 0.016 | 0.017 | 0.017 | 0.026 | 0.025 | 0.017 | 0.016 | 0.016 | 0.019 | 0.019 |
| CBOD5 mg/l effluent | | | | | | | | | | | | 5.0 | | | | | | | | | | | | | | | 5.0 | | | | |
| TSS mg/l effluent | | | | | | | | | | | | 3.0 | | | | | | | | | | | | | | | 4.0 | | | | |
| Fecal Coliform #/100ml | | | | | | | | | | | | 1U | | | | | | | | | | | | | | | 1U | | | | |
| pH standard units | 6.8 | 6.9 | | 7.0 | 7.1 | 7.2 | 7.0 | 7.1 | 7.0 | | 6.8 | 6.8 | 6.7 | 6.8 | 6.7 | 6.7 | | 6.9 | 6.8 | 6.8 | 6.8 | 7.0 | 7.1 | | 7.0 | 7.0 | 6.9 | 7.1 | 7.0 | 7.0 | |
| Total Chlorine Residual mg/l | 0.7 | 0.6 | | 0.7 | 0.6 | 0.6 | 0.7 | 0.6 | 0.6 | | 0.7 | 0.5 | 0.7 | 1.1 | 0.7 | 0.5 | | 0.6 | 0.6 | 0.7 | 0.8 | 0.6 | 0.9 | | 0.8 | 0.6 | 0.6 | 0.5 | 0.5 | 0.6 | |
| CBOD5 mg/l influent | | | | | | | | | | | | 96 | | | | | | | | | | | | | | | 198 | | | | |
| TSS mg/l influent | | | | | | | | | | | | 100 | | | | | | | | | | | | | | | 192 | | | | |

PLANT STAFFING:

| | | | | |
|---|---|---|---|---|
| Day Shift Operator | Class B | Certification No.: 6659 | Name: | Jean Pitzer |
| Evening Shift Operator | Class: | Certification No.: | Name: | |
| Night Shift Operator | Class: | Certification No.: | Name: | |
| Lead Operator | Class B | Certification No.: 2521 | Name: | Harold Register |

Type of Effluent Disposal or Reclaimed Water Reuse: Perc Ponds

Limited Wet Weather Discharge Activated: Yes: ☐ No: ☑ Not Applicable: ☐ If yes, cumulative days of wet weather discharge

* Attach additional sheets if necessary to list all certified operators.

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Northwest District **Domestic Wastewater Section**
**160 Government Center, Pensacola, FL 32501-5794**

PERMITTEE NAME: Florida Water Services
MAILING ADDRESS: P.O. Box 609520
Orlando, FL 32860-9520
Attention:

PERMIT NUMBER: **FLA010258-001**
MONITORING PERIOD–From: **02/01/2004** To: **02/29/2004**
LIMIT: **Final**
CLASS SIZE **Minor**
FACILITY ID: **FLA010258** GROUP: **DW**
GMS ID NO. **1067P02344**
DISCHARGE POINT NUMBER: **R001** WAFR SITE NO. **1931**
PLANT SIZE/TREATMENT TYP **2C**

FACILITY: **Sunny Hills WWTF**
LOCATION: 3808 Gables Blvd., Sunny Hills, Florida
COUNTY: Washington

**Please read instructions before completing this form.**

| Parameter | | Quantity or Loading | | | Quality or Concentration | | | | No. Ex | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Average | Maximum | Units | Min/Other | Average | Maximum | Units | | | |
| Flow<br>Annual Average<br>STORET No. 50050 Y Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | **0.02** | **0.02** | MGD | | | | | 0 | Daily, 6/wk | Meter |
| | Permit Requirement | Report Monthly | 0.05<br>Ann_Avg. | MGD | | | | | | Daily, 6/wk | Meter |
| CBOD5<br>Annual Average<br>STORET No. 80082 Y Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | | **3.4** | | mg/L | 0 | Every 2 Weeks | Grab |
| | Permit Requirement | | | | | 20.0<br>Annual | | mg/L | | Every 2 Weeks | Grab |
| CBOD5<br>STORET No. 80082 1 Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | **3.0** | | **4.0** | mg/L | | Every 2 Weeks | Grab |
| | Permit Requirement | | | | 30.0<br>Mon. Av | 45.0<br>Wkly. Avg. | 60.0<br>Single Sample | mg/L | | Every 2 Weeks | Grab |
| TSS<br>Annual Average<br>STORET No. 00530 Y Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | | **2.8** | | mg/L | 0 | Every 2 Weeks | Grab |
| | Permit Requirement | | | | | 20.0<br>Annual | | mg/L | | Every 2 Weeks | Grab |
| TSS<br>STORET No. 00530 1 Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | **3.5** | | **4.0** | mg/L | | Every 2 Weeks | Grab |
| | Permit Requirement | | | | 30.0<br>Mon. Av | 45.0<br>Wkly. Av | 60.0<br>Single Sample | mg/L | | Every 2 Weeks | Grab |
| Fecal Coliform<br>STORET No. 31616 1 Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | | **1U** | **1U** | mg/L | | Every 2 Weeks | Grab |
| | Permit Requirement | | | | | 200<br>Annual | 800<br>Single Sample | #/100ml | | Every 2 Weeks | Grab |

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

| NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT (Type or Print) | SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | TELEPHONE NO. | DATE (YY/MM/DD) |
|---|---|---|---|
| Harold Register Project Manager | | (850) 773-2802 | **04/03/05** |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): (Attach additional sheets if necessary.)

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: Florida Water Services
MAILING ADDRESS: 1000 Color Place
Apopka, FL 32703

Attention:

FACILITY: **Sunny Hills WWTF**
LOCATION: 3808 Gables Blvd., Sunny Hills, Florida
COUNTY: Washington

PERMIT/FACILITY ID NO.: **FLA010258-001**
MONITORING PERIOD–From: **2/1/2004** To: **2/29/2004**
LIMIT: **Final**
CLASS SIZE **Minor**
FACILITY ID: **FLA010258** GROUP: **DW**
GMS ID NO. **1067P02344**
DISCHARGE POINT NUMBER: **R001**
PLANT SIZE/TREATMENT TYP **2C**

**Please read instructions before completing this form.**

| Parameter | | Quantity or Loading | | | Quality or Concentration | | | | No. Ex | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Average | Maximum | Units | Min/Other | Average | Maximum | Units | | | |
| pH | Sample Measurement | | | | **6.8** | | **7.2** | std. | 0 | Daily 6/Week | Grab |
| STORET No. 00400 1 Range Mon. Site No. EFF-1 | Permit Requirement | | | | 6.0 Single S | | 8.5 Single S | std. | | Daily 6/Week | Grab |
| Total Residual Chlorine Disinfection | Sample Measurement | | | | **0.55** | | **1.03** | mg/L | | Daily 6/Week | Grab |
| STORET No. 50060 1 Range Mon. Site No. EFA-1 | Permit Requirement | | | | 0.50 Single S | | | mg/L | | Daily 6/Week | Grab |
| CBOD5 Influent | Sample Measurement | | | | | **101** | **117** | mg/L | | Every 2 Weeks | Grab |
| STORET No. 80082 1 Mon. Site No. INF-1 | Permit Requirement | | | | | Report Monthly | Report Single S | mg/L | | Every 2 Weeks | Grab |
| TSS Influent | Sample Measurement | | | | | **115** | **130** | mg/L | | Every 2 Weeks | Grab |
| STORET No. 00530 1 Mon. Site No. INF-1 | Permit Requirement | | | | | Report Monthly | Report Single S | mg/L | | Every 2 Weeks | Grab |
| STORET No. 1 Mon. Site No. | | | | | | | | | | | |
| STORET No. 1 Mon. Site No. | | | | | | | | | | | |
| STORET No. 1 Mon. Site No. | | | | | | | | | | | |

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|---|---|---|---|
| Harold Register Project Manager | | (850) 773-2802 | **04/03/05** |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): (Attach additional sheets if necessary.)

# DAILY SAMPLE RESULTS - PART B

Facility ID: FLA010258-001 Facility Name: Sunny Hills WWTF

Three-month Average Daily Flow: 0.011

Daily Flow % of Permitted Capacity: 13%

Month/Year: February-04

| Days of the Month / Parameter / Units | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow mgd | 0.022 | 0.018 | 0.014 | 0.018 | 0.025 | 0.020 | 0.020 | 0.022 | 0.015 | 0.018 | 0.018 | 0.012 | 0.020 | 0.020 | 0.023 | 0.015 | 0.016 | 0.016 | 0.020 | 0.015 | 0.015 | 0.018 | 0.025 | 0.023 | 0.020 | 0.015 | 0.015 | 0.015 | 0.021 | | |
| CBOD5 mg/l effluent | | | | | | | | | 4.0 | | | | | | | | | | | | | | 2.0 | | | | | | | | |
| TSS mg/l effluent | | | | | | | | | 4.0 | | | | | | | | | | | | | | 3.0 | | | | | | | | |
| Fecal Coliform #/100ml | | | | | | | | | 1U | | | | | | | | | | | | | | 1U | | | | | | | | |
| pH standard units | 6.8 | 6.9 | 6.9 | 6.9 | 7.0 | 7.0 | 7.1 | | 7.2 | 7.2 | 7.2 | 7.2 | 7.1 | | 7.0 | 7.0 | 7.1 | 7.0 | 7.0 | 7.1 | | 7.0 | 7.1 | 7.0 | 7.1 | 7.0 | 7.0 | | 7.1 | | |
| Total Chlorine Residual mg/l | 0.6 | 0.7 | 0.6 | 0.6 | 0.9 | 0.7 | | 0.8 | 1.0 | 0.9 | 0.8 | 0.8 | 0.7 | | 0.7 | 0.7 | 0.7 | 1.0 | 0.9 | 0.9 | | 0.7 | 0.8 | 0.9 | 0.7 | 0.6 | 0.7 | | 0.7 | | |
| CBOD5 mg/l influent | | | | | | | | | 84 | | | | | | | | | | | | | | 117 | | | | | | | | |
| TSS mg/l influent | | | | | | | | | 130 | | | | | | | | | | | | | | 99 | | | | | | | | |

PLANT STAFFING:

| | | | | |
|---|---|---|---|---|
| Day Shift Operator | Class B | Certification No.: 6659 | Name: | Jean Pitzer |
| Evening Shift Operator | Class: | Certification No.: | Name: | |
| Night Shift Operator | Class: | Certification No.: | Name: | |
| Lead Operator | Class B | Certification No.: 2521 | Name: | Harold Register |

Type of Effluent Disposal or Reclaimed Water Reuse: Perc Ponds

Limited Wet Weather Discharge Activated: Yes: ☐ No: ☑ Not Applicable: ☐ If yes, cumulative days of wet weather discharge

* Attach additional sheets if necessary to list all certified operators.

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Northwest District **Domestic Wastewater Section**
**160 Government Center, Pensacola, FL 32501-5794**

PERMITTEE NAME: Florida Water Services
MAILING ADDRESS: P.O. Box 609520
Orlando, FL 32860-9520
Attention:

PERMIT NUMBER: **FLA010258-001**
MONITORING PERIOD--From: **03/01/2004** To: **03/31/2004**
LIMIT: **Final**
CLASS SIZE **Minor**
FACILITY ID: **FLA010258** GROUP: **DW**
GMS ID NO. **1067P02344**
DISCHARGE POINT NUMBER: **R001** WAFR SITE NO. **1931**
PLANT SIZE/TREATMENT TYP **2C**

FACILITY: **Sunny Hills WWTF**
LOCATION: 3808 Gables Blvd., Sunny Hills, Florida
COUNTY: Washington

**Please read instructions before completing this form.**

| Parameter | | Quantity or Loading | | | Quality or Concentration | | | | No. Ex | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Average | Maximum | Units | Min/Other | Average | Maximum | Units | | | |
| Flow<br>Annual Average<br>STORET No. 50050 Y Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | **0.02** | **0.02** | MGD | | | | | 0 | Daily, 6/wk | Meter |
| | Permit Requirement | Report Monthly | 0.05<br>Ann_Avg. | MGD | | | | | | Daily, 6/wk | Meter |
| CBOD5<br>Annual Average<br>STORET No. 80082 Y Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | | **3.8** | | mg/L | 0 | Every 2 Weeks | Grab |
| | Permit Requirement | | | | | 20.0<br>Annual | | mg/L | | Every 2 Weeks | Grab |
| CBOD5<br>STORET No. 80082 1 Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | **6.5** | | **11.0** | mg/L | | Every 2 Weeks | Grab |
| | Permit Requirement | | | | 30.0<br>Mon. Av | 45.0<br>Wkly. Avg. | 60.0<br>Single Sample | mg/L | | Every 2 Weeks | Grab |
| TSS<br>Annual Average<br>STORET No. 00530 Y Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | | **3.0** | | mg/L | 0 | Every 2 Weeks | Grab |
| | Permit Requirement | | | | | 20.0<br>Annual | | mg/L | | Every 2 Weeks | Grab |
| TSS<br>STORET No. 00530 1 Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | **3.9** | | **6.0** | mg/L | | Every 2 Weeks | Grab |
| | Permit Requirement | | | | 30.0<br>Mon. Av | 45.0<br>Wkly. Av | 60.0<br>Single Sample | mg/L | | Every 2 Weeks | Grab |
| Fecal Coliform<br>STORET No. 31616 1 Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | | **1U** | **1U** | mg/L | | Every 2 Weeks | Grab |
| | Permit Requirement | | | | | 200<br>Annual | 800<br>Single Sample | #/100ml | | Every 2 Weeks | Grab |

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

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|---|---|---|---|
| Harold Register Project Manager | | (850) 773-2802 | **04/04/05** |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): (Attach additional sheets if necessary.)

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: Florida Water Services
MAILING ADDRESS: 1000 Color Place
Apopka, FL 32703

Attention:

FACILITY: **Sunny Hills WWTF**
LOCATION: 3808 Gables Blvd., Sunny Hills, Florida
COUNTY: Washington

PERMIT/FACILITY ID NO.: **FLA010258-001**
MONITORING PERIOD--From: **3/1/2004** To: **3/31/2004**
LIMIT: **Final**
CLASS SIZE **Minor**
FACILITY ID: **FLA010258** GROUP: **DW**
GMS ID NO. **1067P02344**
DISCHARGE POINT NUMBER: **R001**
PLANT SIZE/TREATMENT TYP **2C**

**Please read instructions before completing this form.**

| Parameter | | Quantity or Loading | | | Quality or Concentration | | | | No. Ex | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Average | Maximum | Units | Min/Other | Average | Maximum | Units | | | |
| pH | Sample Measurement | | | | **6.8** | | **7.2** | std. | 0 | Daily 6/Week | Grab |
| STORET No. 00400 1 Range Mon. Site No. EFF-1 | Permit Requirement | | | | 6.0 Single S | | 8.5 Single S | std. | | Daily 6/Week | Grab |
| Total Residual Chlorine Disinfection | Sample Measurement | | | | **0.50** | | **2.90** | mg/L | | Daily 6/Week | Grab |
| STORET No. 50060 1 Range Mon. Site No. EFA-1 | Permit Requirement | | | | 0.50 Single S | | | mg/L | | Daily 6/Week | Grab |
| CBOD5 Influent | Sample Measurement | | | | | **84** | **126** | mg/L | | Every 2 Weeks | Grab |
| STORET No. 80082 1 Mon. Site No. INF-1 | Permit Requirement | | | | | Report Monthly | Report Single S | mg/L | | Every 2 Weeks | Grab |
| TSS Influent | Sample Measurement | | | | | **91** | **154** | mg/L | | Every 2 Weeks | Grab |
| STORET No. 00530 1 Mon. Site No. INF-1 | Permit Requirement | | | | | Report Monthly | Report Single S | mg/L | | Every 2 Weeks | Grab |
| STORET No. 1 Mon. Site No. | | | | | | | | | | | |
| | | | | | | | | | | | |
| STORET No. 1 Mon. Site No. | | | | | | | | | | | |
| | | | | | | | | | | | |
| STORET No. 1 Mon. Site No. | | | | | | | | | | | |
| | | | | | | | | | | | |

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

| NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT (Type or Print) | SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | TELEPHONE NO. | DATE (YY/MM/DD) |
|---|---|---|---|
| Harold Register Project Manager | | (850) 773-2802 | **04/04/05** |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): (Attach additional sheets if necessary.)

## DAILY SAMPLE RESULTS - PART B

Facility ID: **FLA010258-001** Facility Name: **Sunny Hills WWTF**

**Three-month Average Daily Flow:** **0.012**

**Daily Flow % of Permitted Capacity:** **14%**

Month/Year: **March-04**

| Days of the Month / Parameter / Units | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow mgd | 0.019 | 0.021 | 0.020 | 0.023 | 0.020 | 0.020 | 0.025 | 0.022 | 0.022 | 0.020 | 0.021 | 0.014 | 0.014 | 0.017 | 0.019 | 0.014 | 0.011 | 0.015 | 0.013 | 0.013 | 0.016 | 0.014 | 0.013 | 0.015 | 0.013 | 0.015 | 0.015 | 0.021 | 0.014 | 0.017 | 0.013 |
| CBOD5 mg/l effluent | | | | | | | | 2.0 | | | | | | | | | | | | | | 11.0 | | | | | | | | | |
| TSS mg/l effluent | | | | | | | | 1.8 | | | | | | | | | | | | | | 6.0 | | | | | | | | | |
| Fecal Coliform #/100ml | | | | | | | | 1U | | | | | | | | | | | | | | 1U | | | | | | | | | |
| pH standard units | 7.1 | 7.1 | 7.1 | 7.1 | 7.0 | | 7.2 | 7.0 | 7.0 | 7.0 | 7.1 | 7.1 | | 7.1 | 7.1 | 7.0 | 6.9 | 6.9 | 6.9 | | 7.1 | 7.2 | 7.2 | 6.9 | 6.9 | 6.8 | | 7.1 | 6.8 | 6.9 | 6.9 |
| Total Chlonne Residual mg/l | 0.7 | 0.5 | 0.5 | 0.7 | 0.7 | | 0.7 | 0.7 | 0.7 | 0.9 | 1.2 | 0.7 | | 0.6 | 0.5 | 0.5 | 0.6 | 2.9 | 2.0 | | 1.5 | 0.5 | 0.5 | 0.5 | 0.6 | 0.7 | | 0.7 | 0.7 | 0.5 | 0.5 |
| CBOD5 mg/l influent | | | | | | | | 42 | | | | | | | | | | | | | | 126 | | | | | | | | | |
| TSS mg/l influent | | | | | | | | 27 | | | | | | | | | | | | | | 154 | | | | | | | | | |

PLANT STAFFING:

| | | | | |
|---|---|---|---|---|
| Day Shift Operator | Class B | Certification No.: 6659 | Name: | Jean Pitzer |
| Evening Shift Operator | Class: | Certification No.: | Name: | |
| Night Shift Operator | Class: | Certification No.: | Name: | |
| Lead Operator | Class B | Certification No.: 2521 | Name: | Harold Register |

Type of Effluent Disposal or Reclaimed Water Reuse: Perc Ponds

Limited Wet Weather Discharge Activated: Yes: ☐ No: ☑ Not Applicable: ☐ If yes, cumulative days of wet weather discharge

* Attach additional sheets if necessary to list all certified operators.

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Northwest District **Domestic Wastewater Section**
**160 Government Center, Pensacola, FL 32501-5794**

PERMITTEE NAME: Florida Water Services
MAILING ADDRESS: P.O. Box 609520
Orlando, FL 32860-9520
Attention:

FACILITY: **Sunny Hills WWTF**
LOCATION: 3808 Gables Blvd., Sunny Hills, Florida
COUNTY: Washington

PERMIT NUMBER: **FLA010258-001**
MONITORING PERIOD–From: **04/01/2004** To: **04/30/2004**
LIMIT: **Final**
CLASS SIZE **Minor**
FACILITY ID: **FLA010258** GROUP: **DW**
GMS ID NO. **1067P02344**
DISCHARGE POINT NUMBER: **R001** WAFR SITE NO. **1931**
PLANT SIZE/TREATMENT TYP **2C**

**Please read instructions before completing this form.**

| Parameter | | Quantity or Loading | | | Quality or Concentration | | | | No. Ex | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Average | Maximum | Units | Min/Other | Average | Maximum | Units | | | |
| Flow<br>Annual Average<br>STORET No. 50050 Y Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | **0.02** | **0.02** | MGD | | | | | 0 | Daily, 6/wk | Meter |
| | Permit Requirement | Report Monthly | 0.05<br>Ann_Avg. | MGD | | | | | | Daily, 6/wk | Meter |
| CBOD5<br>Annual Average<br>STORET No. 80082 Y Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | | **3.4** | | mg/L | 0 | Every 2 Weeks | Grab |
| | Permit Requirement | | | | | 20.0<br>Annual | | mg/L | | Every 2 Weeks | Grab |
| CBOD5<br>STORET No. 80082 1 Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | **2.0** | | **2.0** | mg/L | | Every 2 Weeks | Grab |
| | Permit Requirement | | | | 30.0<br>Mon. Av | 45.0<br>Wkly. Avg. | 60.0<br>Single Sample | mg/L | | Every 2 Weeks | Grab |
| TSS<br>Annual Average<br>STORET No. 00530 Y Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | | **2.7** | | mg/L | 0 | Every 2 Weeks | Grab |
| | Permit Requirement | | | | | 20.0<br>Annual | | mg/L | | Every 2 Weeks | Grab |
| TSS<br>STORET No. 00530 1 Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | **2.0** | | **2.0** | mg/L | | Every 2 Weeks | Grab |
| | Permit Requirement | | | | 30.0<br>Mon. Av | 45.0<br>Wkly. Av | 60.0<br>Single Sample | mg/L | | Every 2 Weeks | Grab |
| Fecal Coliform<br>STORET No. 31616 1 Maximum<br>Mon. Site No. EFF-1 | Sample Measurement | | | | | **1U** | **1U** | mg/L | | Every 2 Weeks | Grab |
| | Permit Requirement | | | | | 200<br>Annual | 800<br>Single Sample | #/100ml | | Every 2 Weeks | Grab |

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

| NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT (Type or Print) | SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | TELEPHONE NO. | DATE (YY/MM/DD) |
|---|---|---|---|
| Harold Register Project Manager | | (850) 773-2802 | **04/05/06** |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): (Attach additional sheets if necessary.)

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A



DEP Form 62-620.910(10), effective November 29, 1994

PERMITTEE NAME: Florida Water Services
MAILING ADDRESS: 1000 Color Place
Apopka, FL 32703
Attention:

FACILITY: **Sunny Hills WWTF**
LOCATION: 3808 Gables Blvd., Sunny Hills, Florida
COUNTY: Washington

PERMIT/FACILITY ID NO.: **FLA010258-001**
MONITORING PERIOD--From: **4/1/2004** To: **4/30/2004**
LIMIT: **Final**
CLASS SIZE **Minor**
FACILITY ID: **FLA010258** GROUP: **DW**
GMS ID NO. **1067P02344**
DISCHARGE POINT NUMBER: **R001**
PLANT SIZE/TREATMENT TYP **2C**

**Please read instructions before completing this form.**

| Parameter | | Quantity or Loading | | | Quality or Concentration | | | | No. Ex | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Average | Maximum | Units | Min/Other | Average | Maximum | Units | | | |
| pH | Sample Measurement | | | | **6.7** | | **7.3** | std. | 0 | Daily 6/Week | Grab |
| STORET No. 00400 1 Range Mon. Site No. EFF-1 | Permit Requirement | | | | 6.0 Single S | | 8.5 Single S | std. | | Daily 6/Week | Grab |
| Total Residual Chlorine Disinfection | Sample Measurement | | | | **0.50** | | **2.20** | mg/L | | Daily 6/Week | Grab |
| STORET No. 50060 1 Range Mon. Site No. EFA-1 | Permit Requirement | | | | 0.50 Single S | | | mg/L | | Daily 6/Week | Grab |
| CBOD5 Influent | Sample Measurement | | | | | **110** | **153** | mg/L | | Every 2 Weeks | Grab |
| STORET No. 80082 1 Mon. Site No. INF-1 | Permit Requirement | | | | | Report Monthly | Report Single S | mg/L | | Every 2 Weeks | Grab |
| TSS Influent | Sample Measurement | | | | | **141** | **171** | mg/L | | Every 2 Weeks | Grab |
| STORET No. 00530 1 Mon. Site No. INF-1 | Permit Requirement | | | | | Report Monthly | Report Single S | mg/L | | Every 2 Weeks | Grab |
| STORET No. 1 Mon. Site No. | | | | | | | | | | | |
| | | | | | | | | | | | |
| STORET No. 1 Mon. Site No. | | | | | | | | | | | |
| | | | | | | | | | | | |
| STORET No. 1 Mon. Site No. | | | | | | | | | | | |
| | | | | | | | | | | | |

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

| NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT (Type or Print) | SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | TELEPHONE NO. | DATE (YY/MM/DD) |
|---|---|---|---|
| Harold Register Project Manager | | (850) 773-2802 | **04/05/06** |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): (Attach additional sheets if necessary.)

## DAILY SAMPLE RESULTS - PART B

Facility ID: **FLA010258-001** Facility Name: **Sunny Hills WWTF**

**Three-month Average Daily Flow:** **0.012**

**Daily Flow % of Permitted Capacity:** **14%**

Month/Year: **April-04**

| Days of the Month<br>Parameter / Units | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow mgd | 0.016 | 0.011 | 0.011 | 0.018 | 0.013 | 0.013 | 0.014 | 0.021 | 0.015 | 0.015 | 0.021 | 0.022 | 0.010 | 0.011 | 0.012 | 0.013 | 0.013 | 0.020 | 0.017 | 0.017 | 0.016 | 0.016 | 0.009 | 0.009 | 0.012 | 0.016 | 0.015 | 0.010 | 0.017 | 0.017 | |
| CBOD5 mg/l effluent | | | | | 2.0 | | | | | | | | | | | | | | 2.0 | | | | | | | | | | | | |
| TSS mg/l effluent | | | | | 2.0 | | | | | | | | | | | | | | 2.0 | | | | | | | | | | | | |
| Fecal Coliform #/100ml | | | | | 1U | | | | | | | | | | | | | | 1U | | | | | | | | | | | | |
| pH standard units | 7.0 | 7.0 | | 7.0 | 7.0 | 7.2 | 7.2 | 7.1 | 7.3 | | 7.2 | 7.1 | 7.0 | 7.0 | 7.0 | 7.1 | | 7.0 | 6.9 | 6.8 | 6.7 | 6.7 | 6.7 | | 6.8 | 6.8 | 6.7 | 6.7 | 6.7 | 6.7 | |
| Total Chlorine Residual mg/l | 0.6 | 0.5 | | 0.6 | 0.6 | 0.5 | 0.5 | 0.5 | 0.5 | | 0.6 | 0.5 | 0.5 | 0.5 | 0.5 | 0.6 | | 0.5 | 2.2 | 0.5 | 0.5 | 0.5 | 0.5 | | 0.6 | 0.5 | 0.5 | 0.5 | 0.5 | 0.5 | |
| CBOD5 mg/l influent | | | | | 66 | | | | | | | | | | | | | | 153 | | | | | | | | | | | | |
| TSS mg/l influent | | | | | 110 | | | | | | | | | | | | | | 171 | | | | | | | | | | | | |

PLANT STAFFING:

| | | | | |
|---|---|---|---|---|
| Day Shift Operator | Class B | Certification No.: 6659 | Name: | Jean Pitzer |
| Evening Shift Operator | Class: | Certification No.: | Name: | |
| Night Shift Operator | Class: | Certification No.: | Name: | |
| Lead Operator | Class B | Certification No.: 2521 | Name: | Harold Register |

Type of Effluent Disposal or Reclaimed Water Reuse: Perc Ponds

Limited Wet Weather Discharge Activated: Yes: ☐ No: ☑ Not Applicable: ☐ If yes, cumulative days of wet weather discharge

* Attach additional sheets if necessary to list all certified operators.

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Florida Water Services Corporation
MAILING ADDRESS: P.O. Box 609520
Orlando, FL 32860-9520

PERMIT NUMBER: **FLA010258**

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

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: **05/01/2004** To: **05/31/2004**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.016 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.015 | 0.016 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.2 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 1.9 | 2.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 3.0 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 6.0 | 10.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Harold Register / Project Manager | | (850) 773-2802 | **04/06/02** |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.7 | 7.1 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 3 | 4 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 31.3% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 96 | 113 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 75 | 87 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 5/1/04 To: 5/31/04

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.017 | | | | | | | | | |
| 2 | 0.023 | | | 7.0 | | 0.65 | | | | |
| 3 | 0.026 | 2 | | 6.8 | 4 | 0.55 | | 113 | 87 | |
| 4 | 0.014 | | | 6.8 | | 0.50 | | | | |
| 5 | 0.002 | | | 6.7 | | 0.93 | | | | |
| 6 | 0.016 | | | 6.7 | | 1.00 | | | | |
| 7 | 0.013 | | | 6.7 | | 1.10 | | | | |
| 8 | 0.013 | | | | | | | | | |
| 9 | 0.017 | | | 7.0 | | 1.00 | | | | |
| 10 | 0.014 | | | 6.7 | | 0.50 | | | | |
| 11 | 0.016 | | | 6.7 | | 0.50 | | | | |
| 12 | 0.014 | | | 6.8 | | 0.75 | | | | |
| 13 | 0.012 | | | 6.8 | | 0.81 | | | | |
| 14 | 0.013 | | | 6.9 | | 0.91 | | | | |
| 15 | 0.013 | | | | | | | | | |
| 16 | 0.022 | | | 7.1 | | 0.70 | | | | |
| 17 | 0.016 | 1.8 | | 7.1 | 2 | 0.70 | | 78 | 63 | |
| 18 | 0.019 | | | 6.9 | | 0.50 | | | | |
| 19 | 0.013 | | | 6.9 | | 1.24 | | | | |
| 20 | 0.016 | | | 6.9 | | 0.98 | | | | |
| 21 | 0.013 | | | 6.9 | | 0.88 | | | | |
| 22 | 0.013 | | | | | | | | | |
| 23 | 0.015 | | | 7.0 | | 0.85 | | | | |
| 24 | 0.013 | | | 6.9 | | 0.75 | | | | |
| 25 | 0.013 | | | 7.0 | | 0.70 | | | | |
| 26 | 0.014 | | | 7.1 | | 0.75 | | | | |
| 27 | 0.015 | | | 7.0 | | 0.65 | | | | |
| 28 | 0.014 | | | 7.0 | | 0.59 | | | | |
| 29 | 0.014 | | | | | | | | | |
| 30 | 0.016 | | | 7.0 | | 0.55 | | | | |
| 31 | 0.016 | | | 7.1 | | 0.50 | | | | |
| Total | 0.463 | | | | | | | | | |
| Mo. Avg. | 0.015 | 0.1 | | 5.8 | 0 | 0.63 | | 64 | 5 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: B Certification No.: 2521 Harold Register

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Florida Water Services Corporation
MAILING ADDRESS: P.O. Box 609520
Orlando, FL 32860-9520

PERMIT NUMBER: **FLA010258**

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

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: **06/01/2004** To: **06/30/2004**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.016 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.016 | 0.015 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.1 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 1.9 | 2.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.8 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.5 | 3.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Harold Register / Project Manager | | (850) 773-2802 | **04/07/01** |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.7 | 7.0 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1U | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1U | 1U | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 30.7% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 96 | 114 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 96 | 112 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 6/1/04 To: 6/30/04

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.020 | 2 | 3 | 6.9 | 1U | 0.50 | | 98 | 112 | |
| 2 | 0.019 | | | 6.9 | | 1.29 | | | | |
| 3 | 0.018 | | | 7.0 | | 0.50 | | | | |
| 4 | 0.013 | | | 7.0 | | 0.50 | | | | |
| 5 | 0.013 | | | | | | | | | |
| 6 | 0.019 | | | 7.0 | | 0.60 | | | | |
| 7 | 0.012 | | | 6.9 | | 0.50 | | | | |
| 8 | 0.015 | | | 6.9 | | 0.50 | | | | |
| 9 | 0.014 | | | 6.9 | | 0.50 | | | | |
| 10 | 0.013 | | | 6.7 | | 0.50 | | | | |
| 11 | 0.013 | | | 6.8 | | 0.70 | | | | |
| 12 | 0.013 | | | | | | | | | |
| 13 | 0.017 | | | 7.0 | | 0.80 | | | | |
| 14 | 0.018 | 2 | 2 | 6.8 | 1U | 0.50 | | 98 | 79 | |
| 15 | 0.020 | | | 6.8 | | 0.50 | | | | |
| 16 | 0.013 | | | 6.7 | | 0.50 | | | | |
| 17 | 0.016 | | | 6.7 | | 0.50 | | | | |
| 18 | 0.013 | | | 6.7 | | 0.51 | | | | |
| 19 | 0.013 | | | | | | | | | |
| 20 | 0.016 | | | 6.7 | | 0.50 | | | | |
| 21 | 0.017 | | | 6.7 | | 0.50 | | | | |
| 22 | 0.021 | | | 6.7 | | 0.55 | | | | |
| 23 | 0.020 | | | 6.7 | | 0.59 | | | | |
| 24 | 0.010 | | | 6.7 | | 0.51 | | | | |
| 25 | 0.017 | | | 6.8 | | 0.50 | | | | |
| 26 | 0.017 | | | | | | | | | |
| 27 | 0.015 | | | 6.8 | | 0.60 | | | | |
| 28 | 0.015 | | | 6.9 | | 0.51 | | | | |
| 29 | 0.016 | | | 6.8 | | 0.55 | | | | |
| 30 | 0.009 | | | 6.9 | | 0.55 | | | | |
| 31 | 0.000 | | | | | | | | | |
| Total | 0.467 | | | | | | | | | |
| Mo. Avg. | 0.016 | 0.1 | 0.2 | 5.7 | | 0.48 | | 49 | 6 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: B Certification No.: 2521 Harold Register

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: 1343 NE 17th Road
Ocala, FL 34470

PERMIT NUMBER: **FLA010258**

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

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: **07/01/2004** To: **07/31/2004**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.016 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.015 | 0.047 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.3 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.5 | 4.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.7 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 3.0 | 4.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Michael V. Fitzgerald, Operations Superintendent | | 352-732-6027 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.7 | 7.0 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1U | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 94.0% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 214 | 335 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 1528 | 2956 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 7/1/04 To: 7/31/04

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.015 | 4 | 2 | 7.0 | 2 | 0.55 | | 335 | 2,956 | |
| 2 | 0.013 | | | 7.0 | | 0.59 | | | | |
| 3 | 0.013 | | | | | | | | | |
| 4 | 0.013 | | | 7.0 | | 0.62 | | | | |
| 5 | 0.014 | | | 7.0 | | 0.60 | | | | |
| 6 | 0.012 | | | 7.0 | | 0.55 | | | | |
| 7 | 0.014 | | | 7.0 | | 0.59 | | | | |
| 8 | 0.014 | | | 6.9 | | 0.59 | | | | |
| 9 | 0.012 | | | | | 0.82 | | | | |
| 10 | 0.016 | | | | | | | | | |
| 11 | 0.016 | | | | | | | | | |
| 12 | 0.016 | 3 | 4 | 6.7 | >1600 | 0.60 | | 93 | 100 | |
| 13 | 0.012 | | | 6.8 | | 0.60 | | | | |
| 14 | 0.017 | | | 6.8 | | 0.50 | | | | |
| 15 | 0.015 | | | 6.8 | | 0.55 | | | | |
| 16 | 0.017 | | | 6.8 | | 0.65 | | | | |
| 17 | 0.015 | | | 6.9 | | 0.50 | | | | |
| 18 | 0.015 | | | | | | | | | |
| 19 | 0.015 | | | 7.0 | | 0.55 | | | | |
| 20 | 0.012 | | | 7.0 | | 0.90 | | | | |
| 21 | 0.012 | | | 7.0 | | 0.55 | | | | |
| 22 | 0.015 | | | 7.0 | | 0.55 | | | | |
| 23 | 0.015 | | | 6.9 | | 0.85 | | | | |
| 24 | 0.016 | | | 6.9 | | 0.80 | | | | |
| 25 | 0.016 | | | | | | | | | |
| 26 | 0.016 | | | 6.9 | | 1.65 | | | | |
| 27 | 0.013 | | | 6.9 | | 1.00 | | | | |
| 28 | 0.017 | | | 6.9 | | 0.80 | | | | |
| 29 | 0.015 | | | 7.0 | | 0.75 | | | | |
| 30 | 0.017 | | | 6.9 | | 0.59 | | | | |
| 31 | 0.029 | | | 6.9 | | 0.60 | | | | |
| Total | 0.467 | | | | | | | | | |
| Mo. Avg. | 0.015 | 1.0 | 0.9 | 6.2 | 0 | 0.62 | | 214 | 437 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: 1343 NE 17th Road
Ocala, FL 34470

PERMIT NUMBER: **FLA010258**

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

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: **08/01/2004** To: **08/31/2004**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.017 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.018 | 0.050 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.3 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.5 | 4.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.6 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 1.7 | 1.8 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Michael V. Fitzgerald, Operations Superintendent | | 352-369-4881 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.9 | 7.0 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 100.0% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 131 | 147 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 158 | 200 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 8/1/04 To: 8/31/04

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.019 | | | | | | | | | |
| 2 | 0.019 | | | 7.0 | | 0.50 | | | | |
| 3 | 0.019 | | | 6.9 | | 0.55 | | | | |
| 4 | 0.017 | | | 6.9 | | 0.53 | | | | |
| 5 | 0.018 | | | 7.0 | | 0.54 | | | | |
| 6 | 0.010 | | | 7.0 | | 0.59 | | | | |
| 7 | 0.019 | | | 7.0 | | 0.61 | | | | |
| 8 | 0.019 | | | | | | | | | |
| 9 | 0.019 | | | 7.0 | | 0.90 | | | | |
| 10 | 0.017 | 4 | 1.8 | 7.0 | 2U | 0.70 | | 147 | 200 | |
| 11 | 0.017 | | | 7.0 | | 0.65 | | | | |
| 12 | 0.019 | | | 7.0 | | 0.60 | | | | |
| 13 | 0.018 | | | 7.0 | | 0.55 | | | | |
| 14 | 0.019 | | | 6.9 | | 0.62 | | | | |
| 15 | 0.019 | | | | | | | | | |
| 16 | 0.019 | | | 7.0 | | 0.56 | | | | |
| 17 | 0.015 | | | 7.0 | | 0.54 | | | | |
| 18 | 0.013 | | | 6.9 | | 1.00 | | | | |
| 19 | 0.014 | | | 6.9 | | 0.95 | | | | |
| 20 | 0.017 | | | 6.9 | | 0.80 | | | | |
| 21 | 0.029 | | | 6.9 | | 0.72 | | | | |
| 22 | 0.029 | | | | | | | | | |
| 23 | 0.017 | | | 6.9 | | 0.62 | | | | |
| 24 | 0.014 | 3 | 1.6 | 7.0 | 2U | 0.60 | | 114 | 116 | |
| 25 | 0.015 | | | 7.0 | | 0.60 | | | | |
| 26 | 0.015 | | | 7.0 | | 0.55 | | | | |
| 27 | 0.016 | | | 7.0 | | 0.60 | | | | |
| 28 | 0.029 | | | 7.0 | | 0.60 | | | | |
| 29 | 0.029 | | | | | | | | | |
| 30 | 0.014 | | | 7.0 | | 0.55 | | | | |
| 31 | 0.014 | | | 7.0 | | 0.50 | | | | |
| Total | 0.566 | | | | | | | | | |
| Mo. Avg. | 0.018 | 0.9 | 0.4 | 5.8 | | 0.53 | | 131 | 40 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: 1343 NE 17th Road
Ocala, FL 34470

PERMIT NUMBER: **FLA010258**

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

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: **09/01/2004** To: **09/30/2004**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.016 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter& Totalizer |
| Flow | Sample Measurement | 0.015 | 0.047 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.4 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 4.5 | 5.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.8 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 3.5 | 5.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Michael V. Fitzgerald, Operations Superintendent | | 352-369-4881 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.9 | 7.1 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 94.0% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 89 | 105 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 46 | 51 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 9/1/04 To: 9/30/04

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.018 | | | 6.9 | | 0.70 | | | | |
| 2 | 0.019 | | | 7.0 | | 0.60 | | | | |
| 3 | 0.016 | | | 7.0 | | 0.60 | | | | |
| 4 | 0.016 | | | 6.9 | | 0.50 | | | | |
| 5 | 0.016 | | | | | | | | | |
| 6 | 0.016 | | | 7.0 | | 0.50 | | | | |
| 7 | 0.013 | | | 7.0 | | 0.50 | | | | |
| 8 | 0.015 | 4 | 2 | 7.0 | 2.0U | 0.60 | | 72 | 51 | |
| 9 | 0.013 | | | 7.0 | | 0.60 | | | | |
| 10 | 0.015 | | | 7.0 | | 0.50 | | | | |
| 11 | 0.016 | | | 7.1 | | 0.60 | | | | |
| 12 | 0.016 | | | | | | | | | |
| 13 | 0.016 | | | 7.1 | | 0.60 | | | | |
| 14 | 0.016 | | | 7.0 | | 0.80 | | | | |
| 15 | 0.015 | | | 7.0 | | 0.70 | | | | |
| 16 | 0.020 | | | 7.0 | | 0.60 | | | | |
| 17 | 0.021 | | | 7.0 | | 0.70 | | | | |
| 18 | 0.013 | | | 7.0 | | 0.60 | | | | |
| 19 | 0.013 | | | 6.9 | | 0.60 | | | | |
| 20 | 0.015 | | | 6.9 | | 0.60 | | | | |
| 21 | 0.016 | 5 | 5 | 7.0 | 2.0U | 0.60 | | 105 | 41 | |
| 22 | 0.015 | | | 7.0 | | 0.60 | | | | |
| 23 | 0.019 | | | 7.0 | | 0.70 | | | | |
| 24 | 0.012 | | | 7.1 | | 0.50 | | | | |
| 25 | 0.014 | | | 7.0 | | 0.60 | | | | |
| 26 | 0.014 | | | | | | | | | |
| 27 | 0.014 | | | 7.0 | | 0.70 | | | | |
| 28 | 0.019 | | | 6.9 | | 0.60 | | | | |
| 29 | 0.016 | | | 6.9 | | 0.60 | | | | |
| 30 | 0.015 | | | 6.9 | | 0.60 | | | | |
| 31 | 0.000 | | | | | | | | | |
| Total | 0.471 | | | | | | | | | |
| Mo. Avg. | 0.016 | 1.1 | 0.9 | 6.1 | | 0.53 | | 89 | 12 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: 1343 NE 17th Road
Ocala, FL 34470

PERMIT NUMBER: **FLA010258**

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

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: **10/01/2004** To: **10/31/2004**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.016 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.016 | 0.048 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.3 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.5 | 5.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.6 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 1.6 | 2.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| | | | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*:

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.8 | 7.1 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 96.0% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 89 | 102 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 49 | 50 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 10/1/04 To: 10/31/04

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.015 | | | 6.9 | | 0.60 | | | | |
| 2 | 0.015 | | | 6.9 | | 0.70 | | | | |
| 3 | 0.014 | | | | | | | | | |
| 4 | 0.014 | | | 7.0 | | 0.60 | | | | |
| 5 | 0.013 | | | 7.1 | | 0.60 | | | | |
| 6 | 0.024 | 2 | 2 | 7.1 | 2.0U | 0.70 | | 102 | 47 | |
| 7 | 0.011 | | | 7.0 | | 0.70 | | | | |
| 8 | 0.017 | | | 7.0 | | 0.70 | | | | |
| 9 | 0.013 | | | 6.9 | | 0.70 | | | | |
| 10 | 0.013 | | | | | | | | | |
| 11 | 0.013 | | | 6.9 | | 0.80 | | | | |
| 12 | 0.014 | | | 6.9 | | 0.80 | | | | |
| 13 | 0.014 | | | 7.0 | | 0.70 | | | | |
| 14 | 0.014 | | | 7.0 | | 0.70 | | | | |
| 15 | 0.014 | | | 7.0 | | 0.60 | | | | |
| 16 | 0.020 | | | 7.0 | | 0.70 | | | | |
| 17 | 0.020 | | | | | | | | | |
| 18 | 0.021 | | | 7.0 | | 0.60 | | | | |
| 19 | 0.025 | 5 | 1.2 | 7.0 | 2.0U | 0.50 | | 75 | 50 | |
| 20 | 0.018 | | | 6.8 | | 0.90 | | | | |
| 21 | 0.014 | | | 6.9 | | 0.90 | | | | |
| 22 | 0.018 | | | 7.0 | | 0.80 | | | | |
| 23 | 0.019 | | | 6.9 | | 0.90 | | | | |
| 24 | 0.019 | | | | | | | | | |
| 25 | 0.019 | | | 6.9 | | 0.90 | | | | |
| 26 | 0.020 | | | 6.8 | | 0.80 | | | | |
| 27 | 0.015 | | | 6.8 | | 0.90 | | | | |
| 28 | 0.015 | | | 6.8 | | 0.70 | | | | |
| 29 | 0.015 | | | 6.9 | | 0.80 | | | | |
| 30 | 0.015 | | | 6.9 | | 0.70 | | | | |
| 31 | 0.016 | | | | | | | | | |
| Total | 0.507 | | | | | | | | | |
| Mo. Avg. | 0.016 | 0.9 | 0.4 | 5.8 | | 0.61 | | 89 | 12 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: 1343 NE 17th Road
Ocala, FL 34470

PERMIT NUMBER: **FLA010258**

LIMIT: **Final** REPORT: **Monthly**
CLASS SIZE: **Minor** GROUP: **Domestic**
MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

*MONITORING PERIOD* *From:* ***11/01/2004*** *To:* ***11/30/2004***

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.017 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | *0.017* | *0.049* | mgd | | | | | *0* | 6 Days/Week | *Meter* |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.2 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 2.0 | 2.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.7 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.5 | 3.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*:

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.9 | 7.1 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 11 | >1600 | | #/100ML | 1 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 98.0% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 121 | 170 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 112 | 177 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 11/1/04 To: 11/30/04

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.019 | | | 7.0 | | 0.80 | | | | |
| 2 | 0.023 | | | 6.9 | | 0.70 | | | | |
| 3 | 0.014 | | | 6.9 | | 0.80 | | | | |
| 4 | 0.014 | 2 | 2 | 6.9 | 2U | 0.80 | | 72 | 47 | |
| 5 | 0.014 | | | 6.9 | | 0.80 | | | | |
| 6 | 0.017 | | | 6.9 | | 0.60 | | | | |
| 7 | 0.017 | | | | | | | | | |
| 8 | 0.016 | | | 6.9 | | 0.90 | | | | |
| 9 | 0.016 | | | 7.0 | | 0.90 | | | | |
| 10 | 0.014 | | | 7.0 | | 0.90 | | | | |
| 11 | 0.019 | | | 7.1 | | 0.80 | | | | |
| 12 | 0.019 | | | 7.1 | | 0.90 | | | | |
| 13 | 0.014 | | | 7.1 | | 0.80 | | | | |
| 14 | 0.014 | | | | | | | | | |
| 15 | 0.015 | | | 7.0 | | 0.70 | | | | |
| 16 | 0.015 | | | 7.0 | | 0.60 | | | | |
| 17 | 0.015 | 2 | 3 | 7.0 | >1600 | 1.60 | | 170 | 177 | |
| 18 | 0.015 | | | 7.0 | | 0.60 | | | | |
| 19 | 0.025 | | | 7.1 | | 0.60 | | | | |
| 20 | 0.020 | | | 7.1 | | 0.70 | | | | |
| 21 | 0.020 | | | | | | | | | |
| 22 | 0.020 | | | 7.0 | | 0.70 | | | | |
| 23 | 0.020 | | | 7.0 | 2U | 0.60 | | | | |
| 24 | 0.020 | | | 7.0 | 2U | 0.50 | | | | |
| 25 | 0.022 | | | 7.0 | | 0.50 | | | | |
| 26 | 0.018 | | | 7.1 | | 0.50 | | | | |
| 27 | 0.012 | | | 7.1 | | 0.60 | | | | |
| 28 | 0.012 | | | | | | | | | |
| 29 | 0.014 | | | 7.0 | | 0.70 | | | | |
| 30 | 0.019 | | | 7.0 | | 0.70 | | | | |
| 31 | 0.000 | | | | | | | | | |
| Total | 0.514 | | | | | | | | | |
| Mo. Avg. | 0.017 | 0.5 | 0.6 | 5.9 | | 0.62 | | 121 | 28 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: B Certification No.: 6659 Jean Pitzer

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: 1343 NE 17th Road
Ocala, FL 34470

PERMIT NUMBER: **FLA010258**

LIMIT: **Final** REPORT: **Monthly**
CLASS SIZE: **Minor** GROUP: **Domestic**
MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING PERIOD From: **12/01/2004** To: **12/31/2004**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.016 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.015 | 0.047 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.3 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.3 | 5.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.7 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.5 | 4.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.9 | 7.2 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 94.0% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 184 | 234 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 154 | 258 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 12/1/04 To: 12/31/04

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.008 | | | 6.9 | | 0.80 | | | | |
| 2 | 0.010 | | | 6.9 | | 0.80 | | | | |
| 3 | 0.016 | 5 | 1.6 | 7.0 | 2U | 0.70 | | 167 | 121 | |
| 4 | 0.015 | | | 7.0 | | 0.70 | | | | |
| 5 | 0.015 | | | | | | | | | |
| 6 | 0.020 | | | 7.1 | | 0.60 | | | | |
| 7 | 0.020 | | | 7.1 | | 0.60 | | | | |
| 8 | 0.016 | | | 7.1 | | 0.70 | | | | |
| 9 | 0.016 | | | 7.2 | | 0.70 | | | | |
| 10 | 0.016 | | | 7.1 | | 0.80 | | | | |
| 11 | 0.015 | | | 7.1 | | 0.70 | | | | |
| 12 | 0.015 | | | | | | | | | |
| 13 | 0.013 | | | 7.0 | | 0.60 | | | | |
| 14 | 0.016 | 3 | 4 | 7.0 | 2U | 0.60 | | 150 | 83 | |
| 15 | 0.015 | | | 7.1 | | 0.60 | | | | |
| 16 | 0.016 | | | 7.1 | | 0.50 | | | | |
| 17 | 0.015 | | | 7.1 | | 0.60 | | | | |
| 18 | 0.015 | | | 7.0 | | 0.60 | | | | |
| 19 | 0.015 | | | | | | | | | |
| 20 | 0.011 | | | 7.0 | | 0.70 | | | | |
| 21 | 0.012 | | | 7.0 | | 0.70 | | | | |
| 22 | 0.020 | | | 6.9 | | 0.70 | | | | |
| 23 | 0.018 | | | 7.0 | | 0.60 | | | | |
| 24 | 0.015 | | | 6.9 | | 0.60 | | | | |
| 25 | 0.015 | | | | | | | | | |
| 26 | 0.012 | | | 6.9 | | 0.50 | | | | |
| 27 | 0.013 | | | 7.0 | | 0.60 | | | | |
| 28 | 0.012 | 2 | 2 | 7.0 | 2U | 0.60 | | 234 | 258 | |
| 29 | 0.019 | | | 7.0 | | 0.70 | | | | |
| 30 | 0.019 | | | 7.0 | | 0.60 | | | | |
| 31 | 0.015 | | | 7.0 | | 0.60 | | | | |
| Total | 0.466 | | | | | | | | | |
| Mo. Avg. | 0.015 | 1.3 | 1.0 | 6.1 | | 0.56 | | 184 | 58 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: 1343 NE 17th Road
Ocala, FL 34470

PERMIT NUMBER: **FLA010258**

LIMIT: **Final** REPORT: **Monthly**
CLASS SIZE: **Minor** GROUP: **Domestic**
MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING PERIOD From: **01/01/2005** To: **01/31/2005**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.016 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.015 | 0.016 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.3 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.0 | 4.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.7 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 3.1 | 5.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.9 | 7.2 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 31.3% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 211 | 227 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 206 | 244 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 1/1/05 To: 1/31/05

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.014 | | | 7.0 | | 0.60 | | | | |
| 2 | 0.015 | | | | | | | | | |
| 3 | 0.017 | | | 7.0 | | 0.60 | | | | |
| 4 | 0.016 | | | 7.0 | | 0.70 | | | | |
| 5 | 0.019 | | | 6.9 | | 0.60 | | | | |
| 6 | 0.017 | | | 6.9 | | 0.60 | | | | |
| 7 | 0.023 | | | 6.9 | | 0.80 | | | | |
| 8 | 0.020 | | | 7.0 | | 0.70 | | | | |
| 9 | 0.020 | | | | | | | | | |
| 10 | 0.007 | 2 | 1.2 | 7.0 | 2U | 0.70 | | 227 | 244 | |
| 11 | 0.015 | | | 7.0 | | 0.60 | | | | |
| 12 | 0.015 | | | 7.1 | | 0.60 | | | | |
| 13 | 0.022 | | | 7.1 | | 0.60 | | | | |
| 14 | 0.015 | | | 7.2 | | 0.70 | | | | |
| 15 | 0.016 | | | | | | | | | |
| 16 | 0.012 | | | 7.1 | | 0.60 | | | | |
| 17 | 0.014 | | | 7.1 | | 0.60 | | | | |
| 18 | 0.013 | | | 7.1 | | 0.60 | | | | |
| 19 | 0.012 | | | 7.0 | | 0.50 | | | | |
| 20 | 0.018 | | | 7.0 | | 0.60 | | | | |
| 21 | 0.016 | | | 7.0 | | 0.50 | | | | |
| 22 | 0.014 | | | 6.9 | | 0.50 | | | | |
| 23 | 0.014 | | | | | | | | | |
| 24 | 0.011 | 4 | 5 | 7.0 | 2U | 0.60 | | 195 | 168 | |
| 25 | 0.016 | | | 7.0 | | 0.50 | | | | |
| 26 | 0.015 | | | 7.1 | | 0.60 | | | | |
| 27 | 0.016 | | | 7.1 | | 0.50 | | | | |
| 28 | 0.014 | | | 7.1 | | 0.60 | | | | |
| 29 | 0.014 | | | | | | | | | |
| 30 | 0.013 | | | 7.1 | | 0.60 | | | | |
| 31 | 0.014 | | | 7.1 | | 0.70 | | | | |
| Total | 0.476 | | | | | | | | | |
| Mo. Avg. | 0.015 | 0.8 | 0.8 | 5.9 | | 0.51 | | 211 | 52 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: PO Box 490310
Leesburg, FL 34749

PERMIT NUMBER: **FLA010258**

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

LIMIT: **Final** REPORT: **Monthly**
CLASS SIZE: **Minor** GROUP: **Domestic**
MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: **02/01/2005** To: **02/28/2005**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.016 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.015 | 0.016 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.4 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 5.0 | 6.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.9 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 5.5 | 6.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.7 | 7.1 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 31.3% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 163 | 176 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 167 | 233 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 2/1/05 To: 2/28/05

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.014 | | | 7.0 | | 0.50 | | | | |
| 2 | 0.015 | | | 7.1 | | 0.60 | | | | |
| 3 | 0.013 | | | 7.1 | | 0.70 | | | | |
| 4 | 0.021 | | | 7.1 | | 0.60 | | | | |
| 5 | 0.014 | | | 7.0 | | 0.60 | | | | |
| 6 | 0.014 | | | | | | | | | |
| 7 | 0.016 | 4 | 5 | 7.0 | 2.0U | 0.50 | | 149 | 100 | |
| 8 | 0.021 | | | 6.9 | | 0.60 | | | | |
| 9 | 0.020 | | | 6.9 | | 0.70 | | | | |
| 10 | 0.014 | | | 6.9 | | 0.60 | | | | |
| 11 | 0.014 | | | 7.0 | | 0.50 | | | | |
| 12 | 0.014 | | | 6.9 | | 0.50 | | | | |
| 13 | 0.013 | | | | | | | | | |
| 14 | 0.016 | | | 6.8 | | 0.70 | | | | |
| 15 | 0.018 | | | 6.7 | | 0.60 | | | | |
| 16 | 0.022 | | | 6.9 | | 0.70 | | | | |
| 17 | 0.012 | | | 6.9 | | 0.70 | | | | |
| 18 | 0.016 | | | 6.9 | | 0.70 | | | | |
| 19 | 0.016 | | | 7.0 | | 0.60 | | | | |
| 20 | 0.016 | | | | | | | | | |
| 21 | 0.021 | 6 | 6 | 7.0 | 2.0U | 0.60 | | 176 | 233 | |
| 22 | 0.016 | | | 7.0 | | 0.60 | | | | |
| 23 | 0.025 | | | 7.0 | | 0.60 | | | | |
| 24 | 0.016 | | | 7.0 | | 0.70 | | | | |
| 25 | 0.022 | | | 6.9 | | 0.90 | | | | |
| 26 | 0.014 | | | 6.8 | | 0.90 | | | | |
| 27 | 0.014 | | | | | | | | | |
| 28 | 0.014 | | | 6.8 | | 0.90 | | | | |
| 29 | 0.000 | | | | | | | | | |
| 30 | 0.000 | | | | | | | | | |
| 31 | 0.000 | | | | | | | | | |
| Total | 0.462 | | | | | | | | | |
| Mo. Avg. | 0.016 | 1.3 | 1.4 | 5.4 | | 0.50 | | 163 | 42 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: PO Box 490310
Leesburg, FL 34749

PERMIT NUMBER: **FLA010258**

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

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

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

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.017 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.018 | 0.017 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.5 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 6.0 | 7.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.9 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 4.5 | 5.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.8 | 7.1 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 33.3% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 118 | 125 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 117 | 122 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 3/1/05 To: 3/31/05

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.018 | | | 6.9 | | 0.80 | | | | |
| 2 | 0.013 | | | 6.9 | | 0.70 | | | | |
| 3 | 0.013 | | | 6.9 | | 0.70 | | | | |
| 4 | 0.019 | | | 6.9 | | 0.60 | | | | |
| 5 | 0.016 | | | 6.8 | | 0.60 | | | | |
| 6 | 0.016 | | | | | | | | | |
| 7 | 0.014 | 5 | 5 | 6.9 | 2U | 0.50 | | 111 | 122 | |
| 8 | 0.017 | | | 6.9 | | 1.00 | | | | |
| 9 | 0.014 | | | 7.0 | | 0.80 | | | | |
| 10 | 0.016 | | | 7.1 | | 0.70 | | | | |
| 11 | 0.018 | | | 7.1 | | 0.70 | | | | |
| 12 | 0.017 | | | 7.0 | | 0.60 | | | | |
| 13 | 0.017 | | | | | | | | | |
| 14 | 0.020 | | | 7.0 | | 0.50 | | | | |
| 15 | 0.028 | | | 7.0 | | 0.60 | | | | |
| 16 | 0.018 | | | 7.0 | | 0.50 | | | | |
| 17 | 0.017 | | | 7.0 | | 0.50 | | | | |
| 18 | 0.018 | | | 7.0 | | 0.50 | | | | |
| 19 | 0.017 | | | 7.0 | | 0.50 | | | | |
| 20 | 0.017 | | | | | | | | | |
| 21 | 0.016 | 7 | 4 | 7.1 | 2U | 0.60 | | 125 | 111 | |
| 22 | 0.018 | | | 7.0 | | 0.80 | | | | |
| 23 | 0.020 | | | 7.0 | | 0.70 | | | | |
| 24 | 0.019 | | | 6.9 | | 0.80 | | | | |
| 25 | 0.021 | | | 6.9 | | 0.80 | | | | |
| 26 | 0.018 | | | 6.9 | | 0.90 | | | | |
| 27 | 0.018 | | | | | | | | | |
| 28 | 0.021 | | | 7.0 | | 0.80 | | | | |
| 29 | 0.016 | | | 6.8 | | 0.90 | | | | |
| 30 | 0.022 | | | 6.8 | | 0.90 | | | | |
| 31 | 0.019 | | | 6.8 | | 0.90 | | | | |
| Total | 0.548 | | | | | | | | | |
| Mo. Avg. | 0.018 | 1.5 | 1.1 | 6.1 | | 0.61 | | 118 | 117 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: PO Box 490310
Leesburg, FL 34749

PERMIT NUMBER: **FLA010258**

LIMIT: **Final** REPORT: **Monthly**
CLASS SIZE: **Minor** GROUP: **Domestic**
MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING PERIOD From: **04/01/2005** To: **04/30/2005**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.017 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.019 | 0.017 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.5 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An.Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 5.5 | 8.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 3.4 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 11.5 | 17.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.8 | 7.1 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 34.0% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 163 | 183 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 159 | 228 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 4/1/05 To: 4/30/05

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.022 | | | 6.8 | | 0.90 | | | | |
| 2 | 0.018 | | | 6.9 | | 0.80 | | | | |
| 3 | 0.018 | | | | | | | | | |
| 4 | 0.016 | 3 | 17 | 6.9 | 2.0U | 0.50 | | 143 | 90 | |
| 5 | 0.016 | | | 6.9 | | 0.60 | | | | |
| 6 | 0.024 | | | 6.9 | | 0.60 | | | | |
| 7 | 0.016 | | | 6.9 | | 0.60 | | | | |
| 8 | 0.027 | | | 6.9 | | 0.60 | | | | |
| 9 | 0.017 | | | 6.9 | | 0.50 | | | | |
| 10 | 0.017 | | | | | | | | | |
| 11 | 0.020 | | | 7.0 | | 0.50 | | | | |
| 12 | 0.027 | | | 7.0 | | 0.60 | | | | |
| 13 | 0.016 | | | 6.9 | | 0.90 | | | | |
| 14 | 0.019 | | | 7.1 | | 0.90 | | | | |
| 15 | 0.020 | | | 7.1 | | 0.80 | | | | |
| 16 | 0.018 | | | 7.0 | | 0.70 | | | | |
| 17 | 0.018 | | | | | | | | | |
| 18 | 0.020 | 8 | 6 | 7.0 | 2.0U | 0.70 | | 183 | 228 | |
| 19 | 0.017 | | | 7.0 | | 0.60 | | | | |
| 20 | 0.017 | | | 7.0 | | 0.60 | | | | |
| 21 | 0.021 | | | 6.9 | | 0.60 | | | | |
| 22 | 0.023 | | | 6.9 | | 0.60 | | | | |
| 23 | 0.017 | | | 6.9 | | 0.60 | | | | |
| 24 | 0.017 | | | | | | | | | |
| 25 | 0.014 | | | 6.9 | | 0.60 | | | | |
| 26 | 0.020 | | | 7.0 | | 0.60 | | | | |
| 27 | 0.020 | | | 7.0 | | 0.60 | | | | |
| 28 | 0.020 | | | 7.0 | | 0.50 | | | | |
| 29 | 0.039 | | | 7.0 | | 0.50 | | | | |
| 30 | 0.019 | | | 7.1 | | 0.70 | | | | |
| 31 | 0.000 | | | | | | | | | |
| Total | 0.595 | | | | | | | | | |
| Mo. Avg. | 0.020 | 1.4 | 2.9 | 5.8 | | 0.54 | | 163 | 40 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: PO Box 490310
Leesburg, FL 34749

PERMIT NUMBER: **FLA010258**

LIMIT: **Final** REPORT: **Monthly**
CLASS SIZE: **Minor** GROUP: **Domestic**
MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING PERIOD From: **05/01/2005** To: **05/31/2005**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.017 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.018 | 0.017 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.3 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 4.0 | 6.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.8 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An.Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 3.5 | 4.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.9 | 7.2 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 33.3% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 144 | 177 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 117 | 118 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 5/1/05 To: 5/31/05

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.018 | | | | | | | | | |
| 2 | 0.018 | | | 7.1 | | 0.50 | | | | |
| 3 | 0.023 | 6 | 4 | 7.1 | 2.0U | 0.60 | | 177 | 118 | |
| 4 | 0.014 | | | 7.0 | | 0.60 | | | | |
| 5 | 0.017 | | | 7.0 | | 0.70 | | | | |
| 6 | 0.012 | | | 6.9 | | 0.80 | | | | |
| 7 | 0.014 | | | 6.9 | | 0.70 | | | | |
| 8 | 0.014 | | | | | | | | | |
| 9 | 0.040 | | | 6.9 | | 0.70 | | | | |
| 10 | 0.016 | | | 6.9 | | 0.60 | | | | |
| 11 | 0.018 | | | 7.0 | | 0.60 | | | | |
| 12 | 0.014 | | | 7.0 | | 0.60 | | | | |
| 13 | 0.024 | | | 7.0 | | 0.60 | | | | |
| 14 | 0.015 | | | 7.0 | | 0.60 | | | | |
| 15 | 0.015 | | | | | | | | | |
| 16 | 0.023 | | | 7.0 | | 0.70 | | | | |
| 17 | 0.024 | 2 | 3 | 7.0 | 2.0U | 0.60 | | 111 | 115 | |
| 18 | 0.017 | | | 7.0 | | 0.60 | | | | |
| 19 | 0.023 | | | 7.1 | | 0.60 | | | | |
| 20 | 0.022 | | | 7.1 | | 0.50 | | | | |
| 21 | 0.016 | | | 7.1 | | 0.60 | | | | |
| 22 | 0.016 | | | | | | | | | |
| 23 | 0.014 | | | 7.1 | | 0.70 | | | | |
| 24 | 0.016 | | | 7.2 | | 0.70 | | | | |
| 25 | 0.016 | | | 7.1 | | 0.60 | | | | |
| 26 | 0.016 | | | 7.1 | | 0.50 | | | | |
| 27 | 0.018 | | | 7.1 | | 0.60 | | | | |
| 28 | 0.017 | | | 7.1 | | 0.60 | | | | |
| 29 | 0.017 | | | | | | | | | |
| 30 | 0.018 | | | 7.0 | | 0.60 | | | | |
| 31 | 0.026 | | | 7.0 | | 0.60 | | | | |
| Total | 0.568 | | | | | | | | | |
| Mo. Avg. | 0.018 | 1.0 | 0.9 | 5.9 | | 0.52 | | 144 | 29 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: PO Box 490310
Leesburg, FL 34749

PERMIT NUMBER: **FLA010258**

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

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
*Sunny Hills, FL 32428*
COUNTY: Washington

MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: **06/01/2005** To: **06/30/2005**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.017 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.018 | 0.017 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.3 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.0 | 4.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 3.1 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 7.0 | 13.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.8 | 7.1 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 33.3% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 288 | 354 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 566 | 743 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 6/1/05 To: 6/30/05

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.019 | | | 7.0 | | 0.60 | | | | |
| 2 | 0.016 | 2 | 2 | 7.0 | 1.8U | 0.60 | | 282 | 743 | |
| 3 | 0.019 | | | 7.1 | | 0.50 | | | | |
| 4 | 0.018 | | | 7.1 | | 0.50 | | | | |
| 5 | 0.018 | | | | | | | | | |
| 6 | 0.020 | | | 7.1 | | 0.60 | | | | |
| 7 | 0.018 | | | 7.0 | | 0.50 | | | | |
| 8 | 0.017 | | | 7.0 | | 0.50 | | | | |
| 9 | 0.015 | | | 6.9 | | 0.50 | | | | |
| 10 | 0.022 | | | 6.9 | | 0.50 | | | | |
| 11 | 0.018 | | | 6.9 | | 0.60 | | | | |
| 12 | 0.018 | | | | | | | | | |
| 13 | 0.019 | | | 6.9 | | 0.70 | | | | |
| 14 | 0.020 | 3 | 6 | 6.9 | 1.8U | 0.70 | | 354 | 648 | |
| 15 | 0.017 | | | 6.9 | | 0.60 | | | | |
| 16 | 0.020 | | | 7.0 | | 0.50 | | | | |
| 17 | 0.017 | | | 7.0 | | 0.50 | | | | |
| 18 | 0.018 | | | 6.9 | | 0.50 | | | | |
| 19 | 0.018 | | | | | | | | | |
| 20 | 0.015 | | | 6.9 | | 0.50 | | | | |
| 21 | 0.027 | | | 6.9 | | 0.50 | | | | |
| 22 | 0.016 | | | 6.8 | | 1.40 | | | | |
| 23 | 0.016 | | | 6.8 | | 1.10 | | | | |
| 24 | 0.020 | | | 6.9 | | 0.70 | | | | |
| 25 | 0.018 | | | 6.9 | | 0.70 | | | | |
| 26 | 0.018 | | | | | | | | | |
| 27 | 0.021 | | | 6.8 | | 1.00 | | | | |
| 28 | 0.024 | 4 | 13 | 6.8 | 1.8U | 1.00 | | 228 | 307 | |
| 29 | 0.016 | | | 6.9 | | 0.90 | | | | |
| 30 | 0.018 | | | 6.9 | | 0.70 | | | | |
| 31 | 0.018 | | | | | | | | | |
| Total | 0.573 | | | | | | | | | |
| Mo. Avg. | 0.018 | 1.3 | 3.0 | 5.8 | | 0.56 | | 288 | 243 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: PO Box 490310
Leesburg, FL 34749

PERMIT NUMBER: **FLA010258**

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

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: **07/01/2005** To: **07/31/2005**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.017 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.020 | 0.017 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.7 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 8.5 | 9.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 3.4 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 11.5 | 12.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.9 | 7.1 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 34.7% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| *BOD, Carbonaceous 5* day, 20°C | *Sample* Measurement | | | | 127 | 149 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 161 | 192 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 7/1/05 To: 7/31/05

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.021 | | | 6.9 | | 0.50 | | | | |
| 2 | 0.027 | | | 6.9 | | 0.50 | | | | |
| 3 | 0.027 | | | | | | | | | |
| 4 | 0.016 | | | 7.0 | | 0.60 | | | | |
| 5 | 0.016 | | | 7.0 | | 0.60 | | | | |
| 6 | 0.021 | | | 7.0 | | 0.60 | | | | |
| 7 | 0.016 | | | 7.1 | | 0.80 | | | | |
| 8 | 0.026 | | | 7.1 | | 0.80 | | | | |
| 9 | 0.029 | | | 7.0 | | 0.80 | | | | |
| 10 | 0.029 | | | | | | | | | |
| 11 | 0.018 | | | 7.0 | | 0.80 | | | | |
| 12 | 0.017 | 8 | 12 | 7.0 | 1.8U | 0.70 | | 149 | 130 | |
| 13 | 0.023 | | | 6.9 | | 0.60 | | | | |
| 14 | 0.015 | | | 6.9 | | 0.60 | | | | |
| 15 | 0.021 | | | 6.9 | | 0.70 | | | | |
| 16 | 0.020 | | | 6.9 | | 0.80 | | | | |
| 17 | 0.020 | | | | | | | | | |
| 18 | 0.018 | | | 7.0 | | 0.60 | | | | |
| 19 | 0.016 | | | 7.0 | | 0.60 | | | | |
| 20 | 0.022 | | | 7.0 | | 0.70 | | | | |
| 21 | 0.030 | | | 7.0 | | 0.80 | | | | |
| 22 | 0.007 | | | 6.9 | | 0.80 | | | | |
| 23 | 0.015 | | | 6.9 | | 0.70 | | | | |
| 24 | 0.015 | | | | | | | | | |
| 25 | 0.015 | 9 | 11 | 6.9 | 1.8U | 0.80 | | 105 | 192 | |
| 26 | 0.014 | | | 6.9 | | 0.80 | | | | |
| 27 | 0.016 | | | 7.0 | | 0.70 | | | | |
| 28 | 0.016 | | | 7.0 | | 0.70 | | | | |
| 29 | 0.019 | | | 7.0 | | 0.60 | | | | |
| 30 | 0.026 | | | 7.1 | | 0.60 | | | | |
| 31 | 0.026 | | | | | | | | | |
| Total | 0.615 | | | | | | | | | |
| Mo. Avg. | 0.020 | 2.1 | 2.9 | 5.8 | | 0.57 | | 127 | 40 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: PO Box 490310
Leesburg, FL 34749

PERMIT NUMBER: **FLA010258**

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

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: **08/01/2005** To: **08/31/2005**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.017 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.020 | 0.017 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.5 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 5.5 | 9.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.8 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 3.5 | 4.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.7 | 7.0 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 34.7% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 264 | 403 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 518 | 910 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 8/1/05 To: 8/31/05

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.020 | | | 7.0 | | 0.70 | | | | |
| 2 | 0.020 | | | 7.0 | | 0.60 | | | | |
| 3 | 0.027 | | | 6.9 | | 0.60 | | | | |
| 4 | 0.023 | | | 6.9 | | 0.60 | | | | |
| 5 | 0.023 | | | 6.9 | | 0.60 | | | | |
| 6 | 0.021 | | | 6.9 | | 0.70 | | | | |
| 7 | 0.022 | | | | | | | | | |
| 8 | 0.023 | | | 7.0 | | 0.70 | | | | |
| 9 | 0.022 | | | 7.0 | | 0.70 | | | | |
| 10 | 0.019 | 9 | 3 | 7.0 | 1.8U | 0.70 | | 125 | 125 | |
| 11 | 0.019 | | | 6.9 | | 0.60 | | | | |
| 12 | 0.018 | | | 6.9 | | 0.60 | | | | |
| 13 | 0.019 | | | 6.9 | | 0.50 | | | | |
| 14 | 0.020 | | | | | | | | | |
| 15 | 0.022 | | | 6.9 | | 0.60 | | | | |
| 16 | 0.020 | | | 6.8 | | 0.50 | | | | |
| 17 | 0.020 | | | 6.7 | | 0.50 | | | | |
| 18 | 0.019 | | | 6.8 | | 0.50 | | | | |
| 19 | 0.020 | | | 6.8 | | 0.60 | | | | |
| 20 | 0.009 | | | 6.7 | | 0.60 | | | | |
| 21 | 0.009 | | | | | | | | | |
| 22 | 0.019 | | | 6.7 | | 0.60 | | | | |
| 23 | 0.012 | | | 6.8 | | 0.70 | | | | |
| 24 | 0.020 | | | 6.8 | | 0.90 | | | | |
| 25 | 0.020 | | | 6.8 | 1.8U | 0.90 | | | | |
| 26 | 0.021 | | | 6.9 | | 0.90 | | | | |
| 27 | 0.018 | | | 6.9 | | 0.80 | | | | |
| 28 | 0.019 | | | | | | | | | |
| 29 | 0.020 | 2 | 4 | 6.9 | 1.8U | 0.70 | | 403 | 910 | |
| 30 | 0.019 | | | 6.9 | | 0.80 | | | | |
| 31 | 0.025 | | | 6.9 | | 0.80 | | | | |
| Total | 0.607 | | | | | | | | | |
| Mo. Avg. | 0.020 | 1.6 | 1.0 | 6.0 | | 0.58 | | 264 | 148 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: PO Box 490310
Leesburg, FL 34749

PERMIT NUMBER: **FLA010258**

LIMIT: **Final** REPORT: **Monthly**
CLASS SIZE: **Minor** GROUP: **Domestic**
MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE:

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: *Washington*

MONITORING PERIOD From: **09/01/2005** To: **09/30/2005**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.017 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter& Totalizer |
| Flow | Sample Measurement | 0.019 | 0.017 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.2 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 2.5 | 3.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.7 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.2 | 3.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.8 | 7.0 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.6 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 34.0% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 112 | 164 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 261 | 480 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 9/1/05 To: 9/30/05

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.019 | | | 6.8 | | 0.90 | | | | |
| 2 | 0.039 | | | 6.8 | | 0.80 | | | | |
| 3 | 0.017 | | | 6.9 | | 0.80 | | | | |
| 4 | 0.018 | | | | | | | | | |
| 5 | 0.021 | | | 6.9 | | 0.70 | | | | |
| 6 | 0.018 | 3 | 3 | 6.8 | 1.8U | 0.70 | | 164 | 480 | |
| 7 | 0.018 | | | 6.8 | | 0.60 | | | | |
| 8 | 0.020 | | | 6.8 | | 0.60 | | | | |
| 9 | 0.020 | | | 6.8 | | 0.90 | | | | |
| 10 | 0.019 | | | 6.8 | | 0.90 | | | | |
| 11 | 0.020 | | | | | | | | | |
| 12 | 0.017 | | | 6.8 | | 1.00 | | | | |
| 13 | 0.018 | | | 6.8 | | 1.00 | | | | |
| 14 | 0.019 | | | 6.8 | | 1.00 | | | | |
| 15 | 0.018 | | | 6.8 | | 0.90 | | | | |
| 16 | 0.015 | | | 6.9 | | 0.70 | | | | |
| 17 | 0.014 | | | 6.9 | | 0.60 | | | | |
| 18 | 0.014 | | | | | | | | | |
| 19 | 0.019 | 2 | 1.4 | 7.0 | 1.8U | 0.60 | | 60 | 42 | |
| 20 | 0.019 | | | 6.9 | | 1.00 | | | | |
| 21 | 0.018 | | | 6.8 | | 0.80 | | | | |
| 22 | 0.018 | | | 6.8 | | 0.80 | | | | |
| 23 | 0.024 | | | 6.9 | | 0.70 | | | | |
| 24 | 0.024 | | | 6.9 | | 0.70 | | | | |
| 25 | 0.025 | | | | | | | | | |
| 26 | 0.020 | | | 6.9 | | 0.70 | | | | |
| 27 | 0.018 | | | 6.9 | | 0.70 | | | | |
| 28 | 0.018 | | | 6.9 | | 0.60 | | | | |
| 29 | 0.017 | | | 6.9 | | 0.60 | | | | |
| 30 | 0.016 | | | 7.0 | | 0.60 | | | | |
| 31 | | | | | | | | | | |
| Total | 0.578 | | | | | | | | | |
| Mo. Avg. | 0.019 | 0.6 | 0.6 | 5.8 | | 0.64 | | 112 | 65 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: PO Box 490310
Leesburg, FL 34749

PERMIT NUMBER: **FLA010258**

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

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: **10/01/2005** To: **10/31/2005**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.017 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.019 | 0.017 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.2 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 2.0 | 2.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.7 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.2 | 3.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

## DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 7.0 | 7.2 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 34.0% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 162 | 222 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 350 | 368 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 10/1/05 To: 10/31/05

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.016 | | | 7.0 | | 0.60 | | | | |
| 2 | 0.016 | | | | | | | | | |
| 3 | 0.016 | 2 | 3 | 7.0 | 1.8U | 0.50 | | 222 | 368 | |
| 4 | 0.016 | | | 7.0 | | 0.60 | | | | |
| 5 | 0.015 | | | 7.0 | | 0.60 | | | | |
| 6 | 0.045 | | | 7.1 | | 0.80 | | | | |
| 7 | 0.035 | | | 7.1 | | 0.80 | | | | |
| 8 | 0.028 | | | 7.1 | | 1.00 | | | | |
| 9 | 0.021 | | | | | | | | | |
| 10 | 0.021 | | | 7.2 | | 0.60 | | | | |
| 11 | 0.019 | | | 7.1 | | 0.60 | | | | |
| 12 | 0.019 | | | 7.1 | | 0.90 | | | | |
| 13 | 0.019 | | | 7.0 | | 0.70 | | | | |
| 14 | 0.019 | | | 7.0 | | 0.60 | | | | |
| 15 | 0.016 | | | 7.1 | | 0.60 | | | | |
| 16 | 0.017 | | | | | | | | | |
| 17 | 0.015 | 2 | 1.4 | 7.0 | 1.8U | 0.70 | | 102 | 331 | |
| 18 | 0.016 | | | 7.0 | | 0.70 | | | | |
| 19 | 0.016 | | | 7.0 | | 0.60 | | | | |
| 20 | 0.018 | | | 7.0 | | 0.60 | | | | |
| 21 | 0.015 | | | 7.0 | | 0.60 | | | | |
| 22 | 0.019 | | | 7.0 | | 0.50 | | | | |
| 23 | 0.019 | | | | | | | | | |
| 24 | 0.023 | | | 7.1 | | 0.50 | | | | |
| 25 | 0.023 | | | 7.1 | | 0.60 | | | | |
| 26 | 0.012 | | | 7.1 | | 0.50 | | | | |
| 27 | 0.013 | | | 7.1 | | 0.50 | | | | |
| 28 | 0.014 | | | 7.0 | | 0.50 | | | | |
| 29 | 0.020 | | | 7.0 | | 0.50 | | | | |
| 30 | 0.020 | | | | | | | | | |
| 31 | 0.020 | | | 7.0 | | 0.50 | | | | |
| Total | 0.602 | | | | | | | | | |
| Mo. Avg. | 0.019 | 0.5 | 0.6 | 5.9 | | 0.52 | | 162 | 87 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: PO Box 490310
Leesburg, FL 34749

PERMIT NUMBER: **FLA010258**

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

LIMIT: **Final** REPORT: **Monthly**
CLASS SIZE: **Minor** GROUP: **Domestic**
MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: **11/01/2005** To: **11/30/2005**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.017 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.017 | 0.016 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.3 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.0 | 3.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.7 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 2.3 | 3.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.8 | 7.1 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 1 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 32.7% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 138 | 165 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 381 | 589 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 11/1/05 To: 11/30/05

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.016 | 3 | 1.6 | 7.1 | 1.8U | 0.50 | | 165 | 589 | |
| 2 | 0.017 | | | 7.1 | | 0.50 | | | | |
| 3 | 0.021 | | | 7.0 | | 0.60 | | | | |
| 4 | 0.015 | | | 7.0 | | 0.60 | | | | |
| 5 | 0.010 | | | 7.0 | | 0.70 | | | | |
| 6 | 0.010 | | | | | | | | | |
| 7 | 0.010 | | | 6.9 | | 0.70 | | | | |
| 8 | 0.009 | | | 6.9 | | 0.80 | | | | |
| 9 | 0.018 | | | 6.9 | | 0.70 | | | | |
| 10 | 0.021 | | | 7.0 | | 0.60 | | | | |
| 11 | 0.019 | | | 7.0 | | 0.70 | | | | |
| 12 | 0.016 | | | 6.9 | | 0.70 | | | | |
| 13 | 0.016 | | | | | | | | | |
| 14 | 0.016 | | | 6.8 | | 0.90 | | | | |
| 15 | 0.019 | | | 6.9 | | 0.80 | | | | |
| 16 | 0.015 | | | 6.9 | | 0.80 | | | | |
| 17 | 0.015 | 3 | 3 | 6.9 | 1.8U | 0.80 | | 111 | 172 | |
| 18 | 0.017 | | | 6.9 | | 0.90 | | | | |
| 19 | 0.019 | | | 6.9 | | 0.80 | | | | |
| 20 | 0.019 | | | | | | | | | |
| 21 | 0.019 | | | 7.0 | | 0.80 | | | | |
| 22 | 0.019 | | | 7.0 | | 0.70 | | | | |
| 23 | 0.020 | | | 7.0 | | 0.60 | | | | |
| 24 | 0.019 | | | 7.0 | | 0.70 | | | | |
| 25 | 0.019 | | | | | | | | | |
| 26 | 0.019 | | | 7.1 | | 0.70 | | | | |
| 27 | 0.020 | | | 7.1 | | 0.80 | | | | |
| 28 | 0.020 | | | 7.1 | | 0.80 | | | | |
| 29 | 0.020 | | | 7.0 | | 0.70 | | | | |
| 30 | 0.020 | | | 7.0 | | 0.60 | | | | |
| 31 | 0.000 | | | | | | | | | |
| Total | 0.513 | | | | | | | | | |
| Mo. Avg. | 0.017 | 0.9 | 0.7 | 5.9 | | 0.60 | | 138 | 109 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When completed mail this report to:** Department. of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Aqua Utilities Florida
MAILING ADDRESS: PO Box 490310
Leesburg, FL 34749

PERMIT NUMBER: **FLA010258**

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

FACILITY: **Sunny Hills WWTP**
LOCATION: 3808 Gables Boulevard
Sunny Hills, FL 32428
COUNTY: Washington

MONITORING GROUP NUMBER: **R-001**
MONITORING GROUP DESC: **R-001 Dual-Cell Perc Ponds, Including Influent**
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: **12/01/2005** To: **12/31/2005**

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Flow | Sample Measurement | 0.018 | | mgd | | | | | 0 | 6 Days/Week | Meter & Totalizer |
| PARM Code 50050 Y Mon.Site No. FLW-01 | Permit Measurement | 0.05 (An.Avg.) | | mgd | | | | | | 6 Days/Week | Meter & Totalizer |
| Flow | Sample Measurement | 0.016 | 0.017 | mgd | | | | | 0 | 6 Days/Week | Meter |
| PARM Code 50050 1 Mon.Site No. FLW-01 | Permit Measurement | Report (Mo.Avg.) | Report (3-Mo.Avg.) | mgd | | | | | | 6 Days/Week | Meter |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 4.3 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 3.3 | 4.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 5.4 | | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 20.0 (An. Avg.) | | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 8.0 | 13.0 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 30.0 (Mo.Avg.) | 60.0 (Max) | | MG/L | | Every Two Weeks | 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) |
|---|---|---|---|
| Jean Pitzer, Lead Operator | | 850-773-2802 | |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DISCHARGE MONITORING REPORT - PART A (Continued)

**Facility Name:** Sunny Hills WWTP **Permit Number:** FLA010258 **Discharge Point No.:** R001

| Parameter | | Quantity of Loading | | Units | Quality or Concentration | | | Units | No. of Ex. | Frequency of Analysis | Sample Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| pH | Sample Measurement | | | | 6.8 | 7.1 | | S.U. | 0 | 6 Days/Week | Grab |
| PARM Code 00400 1 Mon.Site No. EFF-01 | Permit Measurement | | | | 6.0 (Min.) | 8.5 (Max.) | | S.U. | | 6 Days/Week | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 Y Mon.Site No. EFF-01 | Permit Measurement | | | | 200 (An.Avg.) | | | #/100ML | | Every Two Weeks | Grab |
| Coliform, Fecal | Sample Measurement | | | | 2 | 2 | | #/100ML | 0 | Every Two Weeks | Grab |
| PARM Code 74055 A Mon.Site No. EFF-01 | Permit Measurement | | | | Report (MoGeoMean) | 800 (Max) | | #/100ML | | Every Two Weeks | Grab |
| Total Residual Chlorine (For Disinfection) | Sample Measurement | | | | 0.5 | | | MG/L | 0 | 6 Days/Week | Grab |
| PARM Code 50060 A Mon.Site No. EFA-01 | Permit Measurement | | | | 0.5 (Min) | | | MG/L | | 6 Days/Week | Grab |
| Percent Capacity, (TMADF/Permitted Capacity) X 100 | Sample Measurement | | | | 34.7% | | | PERCENT | 0 | Monthly | Calculated |
| PARM Code 00180 P Mon.Site No. OTH-01 | Permit Measurement | | | | Report (Mo.Total) | | | PERCENT | | Monthly | Calculated |
| BOD, Carbonaceous 5 day, 20°C | Sample Measurement | | | | 875 | 2220 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 80082 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| Solids, Total Suspended | Sample Measurement | | | | 5604 | 16280 | | MG/L | 0 | Every Two Weeks | Grab |
| PARM Code 00530 G Mon.Site No. INF-01 | Permit Measurement | | | | Report (Mo.Avg.) | Report (Max) | | MG/L | | Every Two Weeks | Grab |
| | Sample Measurement | | | | | | | | | | |
| | Permit Measurement | | | | | | | | | | |

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010258 Facility Name: Sunny Hills WWTP

Monitoring Period From: 12/1/05 To: 12/31/05

| | Flow (MGD) | CBOD5 (MG/L) | TSS (MG/L) | pH (S.U.) | Fecal Coliform Bacteria (#/100ml) | TRC (For Disinfect.) (MG/L) | | CBOD5 (MG/L) | TSS (MG/L) | |
|---|---|---|---|---|---|---|---|---|---|---|
| Code | 50050 | 80082 | 00530 | 00400 | 74055 | 50060 | | 80082 | 00530 | |
| Mon.Site | FLW-01 | EFF-01 | EFF-01 | EFF-01 | EFF-01 | EFA-01 | | INF-01 | INF-01 | |
| 1 | 0.029 | | | 6.9 | | 0.50 | | | | |
| 2 | 0.015 | 4I | 6 | 6.9 | 1.8U | 0.50 | | 204 | 273 | |
| 3 | 0.015 | | | 6.9 | | 0.60 | | | | |
| 4 | 0.015 | | | | | | | | | |
| 5 | 0.002 | | | 6.9 | | 0.60 | | | | |
| 6 | 0.015 | | | 7.0 | | 0.50 | | | | |
| 7 | 0.015 | | | 7.0 | | 0.60 | | | | |
| 8 | 0.016 | | | 7.1 | | 0.70 | | | | |
| 9 | 0.014 | | | 7.1 | | 0.70 | | | | |
| 10 | 0.019 | | | 7.1 | | 0.60 | | | | |
| 11 | 0.019 | | | | | | | | | |
| 12 | 0.019 | | | 6.9 | | 0.50 | | | | |
| 13 | 0.012 | 3I | 5 | 6.9 | 1.8U | 0.50 | | 201 | 258 | |
| 14 | 0.012 | | | 6.9 | | 0.50 | | | | |
| 15 | 0.016 | | | 7.0 | | 0.50 | | | | |
| 16 | 0.015 | | | 6.9 | | 0.50 | | | | |
| 17 | 0.015 | | | 6.9 | | 0.60 | | | | |
| 18 | 0.015 | | | | | | | | | |
| 19 | 0.023 | | | 7.0 | | 0.60 | | | | |
| 20 | 0.009 | | | 7.0 | | 0.60 | | | | |
| 21 | 0.015 | | | 7.0 | | 0.70 | | | | |
| 22 | 0.016 | | | 6.9 | | 0.70 | | | | |
| 23 | 0.017 | | | 6.9 | | 0.70 | | | | |
| 24 | 0.017 | | | 6.9 | | 0.80 | | | | |
| 25 | 0.017 | | | | | | | | | |
| 26 | 0.013 | | | 6.9 | | 0.80 | | | | |
| 27 | 0.012 | | | 6.8 | | 0.80 | | | | |
| 28 | 0.025 | 3I | 13 | 6.8 | 1.8U | 0.70 | | 2,220 | 16,280 | |
| 29 | 0.018 | | | 6.9 | | 0.70 | | | | |
| 30 | 0.023 | | | 6.9 | | 0.80 | | | | |
| 31 | 0.023 | | | 7.0 | | 0.70 | | | | |
| Total | 0.505 | | | | | | | | | |
| Mo. Avg. | 0.016 | | 3.4 | 6.0 | | 0.55 | | 875 | 2,402 | |

PLANT STAFFING:

Day Shift Operator Class: B Certification No.: 6659 Jean Pitzer

Evening Shift Operator Class: ___ Certification No.: _____ _____

Night Shift Operator Class: ___ Certification No.: _____ _____

Lead Operator Class: ___ Certification No.: _____