

# LAKE COUNTY

Palms MHP  
Picciola Island  
Piney Woods

Docket No. 080121-WS

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

Florida

Volume 5  
Book 2  
Set 5 of 16

Part 5 of 8

**Containing:**  
Monthly Operating Reports  
Sample Results  
Permits  
Correspondence

Aqua Utilities Florida, Inc.

DOCUMENT NUMBER-DATE

04312 MAY 22 88

FPSC-COMMISSION CLERK

**2007 MOR**

**PALMS MHP**

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** January, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Palms Mobile Home	PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	62	Total Population Served at End of Month:	124
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com		

**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home	Plant Telephone Number:	352-787-0980
Plant Address:	24702 Plumosa Drive	City:	Leesburg
		State:	Florida
		Zip Code:	34748
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Licensed Operators:	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operator:	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

*Will Fontaine*      2-9-07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

DOCUMENT NUMBER - DATE

04312 MAY 22 08

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: January, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place X)	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations or UV Dose (to Demonstrate Four-Log Virus Inactivation, if Applicable)										Emergency or Abnormal Operating Conditions/Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (C x T) Measurement Point During Peak Flow, minutes	Lowest CTR Provided Before or at First Customer During Peak Flow, min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	20,200		1.2									0.9	
2	X	24.0	16,400		1.1									1.0	
3	X	24.0	19,700		1.5									1.3	
4	X	24.0	17,400		1.6									1.5	
5	X	24.0	25,200		2.0									1.8	
6	X	24.0	24,500		1.7										
7		24.0	20,600												
8	X	24.0	20,600		1.3									1.1	
9	X	24.0	19,700		1.2									1.1	
10	X	24.0	20,700		1.3									1.1	
11	X	24.0	22,200		1.3									1.0	
12	X	24.0	13,600		1.2									1.0	
13	X	24.0	18,500		1.3										
14		24.0	24,300												
15	X	24.0	24,300		1.1									0.9	
16	X	24.0	20,000		1.1									0.9	
17	X	24.0	17,300		1.3									1.0	
18	X	24.0	17,500		1.1									1.0	
19	X	24.0	18,000		1.2									1.0	
20	X	24.0	23,700		1.4										
21		24.0	19,450												
22	X	24.0	19,450		1.4									1.2	
23	X	24.0	19,500		1.2									1.0	
24	X	24.0	15,900		1.4									1.2	
25	X	24.0	19,000		1.1									1.0	
26	X	24.0	20,000		1.0									0.9	
27	X	24.0	45,600		1.5										
28		24.0	19,500												
29	X	24.0	19,500		1.7									1.4	
30	X	24.0	21,600		2.0									1.8	
31	X	24.0	44,800		1.4									1.3	
Jan Total			668,700												
Minimum			21,571												
Maximum			45,600												

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** February, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Palms Mobile Home			PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	62			Total Population Served at End of Month:	124
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333		
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home			Plant Telephone Number:	352-787-0980
Plant Address:	24702 Plumosa Drive	City:	Leesburg	State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water			<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	
				D	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>	
<b>Lead/Chief Operator:</b>	Will Fontaine	C	6813	Days 1st Shift	
<b>Other Operators:</b>	Marty Neal	C	10027	Days 1st Shift	
	John Worrell	C	6597	Days 1st Shift	

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine      3-8-07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: February, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L <sup>5</sup>		
1	X	24.0	22,900		1.3									1.1	
2	X	24.0	26,400		1.3									1.0	
3	X	24.0	11,500		1.2										
4		24.0	18,600												
5	X	24.0	18,600		1.3									1.0	
6	X	24.0	19,500		1.3									1.0	
7	X	24.0	21,700		1.1									0.9	
8	X	24.0	19,300		1.0									0.9	
9	X	24.0	29,900		1.2									1.0	
10	X	24.0	20,700		1.3										
11		24.0	18,450												
12	X	24.0	18,450		1.5									1.4	
13	X	24.0	25,700		1.4									1.2	
14	X	24.0	14,100		1.2									1.1	
15	X	24.0	21,300		1.3									1.1	
16	X	24.0	18,000		1.4									1.3	
17	X	24.0	22,500		1.5										
18		24.0	17,350												
19	X	24.0	17,350		1.2									1.0	
20	X	24.0	27,400		1.1									1.0	
21	X	24.0	15,500		1.4									1.1	
22	X	24.0	20,900		1.2									1.0	
23	X	24.0	18,000		1.1									0.9	
24	X	24.0	15,700		1.1										
25		24.0	19,750												
26	X	24.0	19,750		1.1									0.9	
27	X	24.0	18,500		1.2									1.1	
28	X	24.0	25,700		1.1									1.0	
29		24.0													
30		24.0													
31		24.0													
Total			563,500												
Average			18,177												
Maximum			29,900												

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** March, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Palms Mobile Home	PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	62	Total Population Served at End of Month:	124
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com		

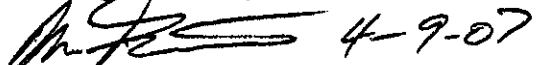
**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home	Plant Telephone Number:	352-787-0980
Plant Address:	24702 Plumosa Drive	City:	Leesburg
		State:	Florida
		Zip Code:	34748
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Licensed Operators:	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.


  
 Signature and Date 4-9-07

 Will Fontaine  
 Printed or Typed Name
 

 C-6813  
 License Number

**MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: March, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24.0	17,300		1.2										1.0	
2	X	24.0	20,000		1.1										0.8	
3		24.0	16,000													
4	X	24.0	16,000		1.4											
5	X	24.0	18,800		1.2										1.0	
6	X	24.0	17,900		1.4										1.1	
7	X	24.0	14,600		1.4										1.1	
8	X	24.0	17,200		1.6										1.4	
9	X	24.0	17,800		1.2										1.1	
10		24.0	17,300													
11	X	24.0	17,300		1.1											
12	X	24.0	18,300		1.4										1.2	
13	X	24.0	19,800		1.5										1.4	
14	X	24.0	20,500		1.5										1.2	
15	X	24.0	18,300		1.7										1.5	
16	X	24.0	13,800		1.8										1.5	
17	X	24.0	16,500		1.6											
18		24.0	18,100													
19	X	24.0	18,100		1.2										1.0	
20	X	24.0	23,400		1.0										0.7	
21	X	24.0	16,600		1.2										1.0	
22	X	24.0	20,000		1.4										1.3	
23	X	24.0	17,500		1.5										1.3	
24	X	24.0	17,400		1.4											
25		24.0	18,000													
26	X	24.0	18,000		1.6										1.3	
27	X	24.0	16,800		1.3										1.2	
28	X	24.0	18,200		1.5										1.2	
29	X	24.0	17,500		1.2										1.1	
30	X	24.0	18,500		1.3										1.1	
31	X	24.0	17,100		1.4											
Total			552,600													
Average			17,826													
Maximum			23,400													

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



# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** April, 2007

**A. Public Water System (PWS) Information**

PWS Name: Palms Mobile Home		PWS Identification Number: 3350981	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 63		Total Population Served at End of Month: 158	
PWS Owner: Aqua Utilities Florida		Contact Person's Title: Area Manager	
Contact Person: Brian Heath		City: Leesburg State: Florida Zip Code: 34749	
Contact Person's Mailing Address: PO Box 490310		Contact Person's Telephone Number: (352) 787-0980	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Palms Mobile Home		Plant Telephone Number: 352-787-0980	
Plant Address: 24702 Plumosa Drive		City: Leesburg State: Florida Zip Code: 34748	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 93,600			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): D	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813 / Days 1st Shift
Other Operators:	Marty Neal	C	10027 / Days 1st Shift
	John Worrell	C	6597 / Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

\_\_\_\_\_  
 Signature and Date

Will Fontaine  
 \_\_\_\_\_  
 Printed or Typed Name

C-6813  
 \_\_\_\_\_  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: April, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm	Minimum UV Dose Required, mW-sec/cm	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1		24.0	16,350												
2	X	24.0	16,350		1.4										
3	X	24.0	22,000		1.2									1.2	
4	X	24.0	14,100		1.2									1.1	
5	X	24.0	15,800		1.0									1.0	
6	X	24.0	15,800		1.0									0.8	
7	X	24.0	16,000		1.1									0.8	
8		24.0	15,000												
9	X	24.0	15,000		1.2									1.0	
10	X	24.0	14,700		1.1									1.0	
11	X	24.0	14,600		1.1									0.9	
12	X	24.0	18,500		1.0									0.7	
13	X	24.0	10,700		0.9									0.7	
14	X	24.0	22,600		1.0										
15		24.0	15,450												
16	X	24.0	15,450		1.0									0.7	
17	X	24.0	13,600		1.0									0.8	
18	X	24.0	19,500		0.7									0.5	
19	X	24.0	22,100		0.9									0.6	
20	X	24.0	14,700		0.9									0.7	
21	X	24.0	17,200		1.0										
22		24.0	14,500												
23	X	24.0	14,500		1.5									1.3	
24	X	24.0	16,900		1.5									1.3	
25	X	24.0	16,600		1.3									1.2	
26	X	24.0	14,700		1.6									1.3	
27	X	24.0	15,100		1.1									1.0	
28	X	24.0	16,000		1.5										
29		24.0	15,750												
30	X	24.0	15,750		1.4									1.2	
31		24.0													
			485,300												
			15,655												
			22,600												

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** May, 2007

**A. Public Water System (PWS) Information**

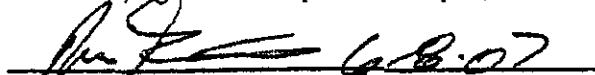
PWS Name:	Palms Mobile Home			PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	63			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980	Zip Code:	34749		
Contact Person's E-Mail Address:	beheath@aquaaamerica.com			Contact Person's Fax Number:	(352) 787-6333

**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home			Plant Telephone Number:	352-787-0980	
Plant Address:	24702 Plumosa Drive			City:	Leesburg	
				State:	Florida	
				Zip Code:	34748	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water			<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	D	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>		
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift		
Other Operators:	Marty Neal	C	10027	Days 1st Shift		
	John Worrell	C	6597	Days 1st Shift		

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

 Signature and Date	<u>Will Fontaine</u> Printed or Typed Name	<u>C-6813</u> License Number
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# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: May, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose:						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	20,600		1.2									1.0	
2	X	24.0	13,400		1.2									0.9	
3	X	24.0	14,700		1.1									0.9	
4	X	24.0	14,100		1.1									0.9	
5	X	24.0	16,400		1.1										
6		24.0	14,800												
7	X	24.0	14,800		1.0									0.7	
8	X	24.0	20,300		1.2									1.0	
9	X	24.0	18,700		1.2									1.0	
10	X	24.0	15,300		1.3									1.0	
11	X	24.0	14,800		1.2									1.0	
12		24.0	20,000												
13	X	24.0	20,000		1.6										
14	X	24.0	15,100		1.5									1.1	
15	X	24.0	17,300		1.6									1.1	
16	X	24.0	18,900		0.9									0.7	
17	X	24.0	18,000		0.9									0.6	
18	X	24.0	15,500		1.0									0.8	
19	X	24.0	11,700		1.1										
20		24.0	19,500												
21	X	24.0	19,500		1.2									1.0	
22	X	24.0	21,800		1.1									1.0	
23	X	24.0	17,200		1.2									1.0	
24	X	24.0	15,100		1.1									1.0	
25	X	24.0	15,000		1.0									0.8	
26	X	24.0	22,600		1.4										
27		24.0	15,150												
28	X	24.0	15,150		1.2									1.0	
29	X	24.0	21,700		1.0									0.8	
30	X	24.0	11,700		1.0									0.7	
31	X	24.0	25,400		1.8									0.6	
Total			534,200												
Average			17,232												
Maximum			25,400												

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** June, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Palms Mobile Home			PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	63			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Zip Code:	34749
Contact Person's E-Mail Address:	beheath@aquamerica.com				
Contact Person's Fax Number:	(352) 787-6333				

**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home			Plant Telephone Number:	352-787-0980	
Plant Address:	24702 Plumosa Drive	City:	Leesburg	State:	Florida	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	D	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine 7-6-07  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: June, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>				
1	X	24.0	18,000		0.9										0.6	
2	X	24.0	18,000		0.9											
3		24.0	15,050													
4	X	24.0	15,050		0.9										0.6	
5	X	24.0	17,100		1.2										1.0	
6	X	24.0	16,700		0.9										0.7	
7	X	24.0	20,900		1.6										1.4	
8	X	24.0	20,200		1.0										0.9	
9	X	24.0	20,000		0.9											
10		24.0	14,700													
11	X	24.0	14,700		1.7										1.5	
12	X	24.0	19,200		1.6										1.5	
13	X	24.0	13,400		0.9										0.7	
14	X	24.0	14,300		0.8										0.6	
15	X	24.0	26,200		1.1										0.8	
16	X	24.0	14,600		2.2											
17		24.0	16,200													
18	X	24.0	16,200		2.2										1.7	
19	X	24.0	10,400		2.1										1.9	
20	X	24.0	14,100		1.4										1.3	
21	X	24.0	14,100		1.3										0.9	
22	X	24.0	14,300		1.6										1.5	
23	X	24.0	14,700		1.7											
24		24.0	15,350													
25	X	24.0	15,350		1.4										1.1	
26	X	24.0	14,000		1.0										0.8	
27	X	24.0	13,900		1.2										0.7	
28	X	24.0	23,700		1.1										0.8	
29	X	24.0	14,000		1.2										0.8	
30	X	24.0	16,200		1.2											
31		24.0														
Total			490,600													
Average			15,826													
Maximum			26,200													

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** July, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Palms Mobile Home			PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	63			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Zip Code:	34749
Contact Person's E-Mail Address:	beheath@aguaamerica.com				
Contact Person's Fax Number:	(352) 787-6333				

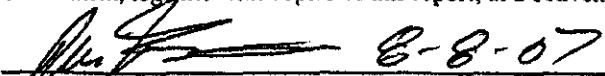
**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home			Plant Telephone Number:	352-787-0980	
Plant Address:	24702 Plumosa Drive			City:	Leesburg	
				State:	Florida	
				Zip Code:	34748	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	D	

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

 8-8-07  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: July, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1			24.0	16,300												
2	X		24.0	16,300		1.2									0.8	
3	X		24.0	12,100		1.2									0.7	
4	X		24.0	13,200		2.0									1.5	
5	X		24.0	15,800		1.8									1.4	
6	X		24.0	13,100		1.8									1.3	
7	X		24.0	13,700		1.7										
8			24.0	13,750												
9	X		24.0	13,750		1.3									1.2	
10	X		24.0	14,600		1.4									1.1	
11	X		24.0	18,700		1.6									1.4	
12	X		24.0	15,600		1.5									1.3	
13	X		24.0	16,900		1.4									1.1	
14	X		24.0	12,300		1.4										
15			24.0	17,900												
16	X		24.0	17,900		1.0									0.7	
17	X		24.0	10,500		0.9									0.8	
18	X		24.0	19,100		1.4									1.2	
19	X		24.0	17,300		1.6									1.2	
20	X		24.0	12,800		1.2									0.9	
21	X		24.0	16,100		1.4										
22			24.0	17,400												
23	X		24.0	17,400		1.1									1.0	
24	X		24.0	14,300		1.0									0.7	
25	X		24.0	16,100		1.0									0.9	
26	X		24.0	11,100		1.0									0.8	
27	X		24.0	13,300		0.9									0.7	
28	X		24.0	25,500		1.1										
29			24.0	14,650												
30	X		24.0	14,650		0.8									0.6	
31	X		24.0	14,200		1.0									0.9	
Total				478,300												
Average				15,429												
Maximum				25,500												

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





# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

**III. Daily Data for the Month/Year of:** August, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm	Minimum UV Dose Required, mW-sec/cm	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	15,100		1.1									1.0	
2	X	24.0	17,300		1.4									1.1	
3	X	24.0	14,300		1.4									1.2	
4	X	24.0	14,300		1.5										
5		24.0	17,850												
6	X	24.0	17,850		1.7									1.4	
7	X	24.0	14,900		1.3									0.9	
8	X	24.0	17,200		1.1									1.0	
9	X	24.0	28,600		0.8									0.6	
10	X	24.0	13,100		1.0									0.7	
11	X	24.0	13,800		1.3										
12		24.0	15,600												
13	X	24.0	15,600		1.1									0.7	
14	X	24.0	18,600		1.3									1.1	
15	X	24.0	12,300		2.1									1.7	
16	X	24.0	18,500		1.7									1.6	
17	X	24.0	17,100		2.1									1.9	
18	X	24.0	18,200		1.6										
19		24.0	14,600												
20	X	24.0	14,600		1.1									0.9	
21	X	24.0	24,200		0.7									0.6	
22	X	24.0	17,500		0.8									0.6	
23	X	24.0	14,700		1.0									0.8	
24	X	24.0	12,400		1.1									0.9	
25	X	24.0	13,200		1.3										
26		24.0	15,450												
27	X	24.0	15,450		1.2									1.1	
28	X	24.0	17,100		1.5									1.4	
29	X	24.0	12,700		1.3									1.0	
30	X	24.0	20,100		1.5									1.4	
31	X	24.0	16,500		1.3									1.2	
Total			508,700												
Average			16,410												
Maximum			28,600												

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** September, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Palms Mobile Home			PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	63			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
				Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home			Plant Telephone Number:	352-787-0980
Plant Address:	24702 Plumosa Drive	City:	Leesburg	State:	Florida
				Zip Code:	34748
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	D
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>	
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift	
Other Operators:	Marty Neal	C	10027	Days 1st Shift	
	John Worrell	C	6597	Days 1st Shift	

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

 Signature and Date	<u>10-5-07</u>	<u>Will Fontaine</u> Printed or Typed Name	<u>C-6813</u> License Number
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# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: September, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out-of-Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>		
1	X	24.0	15,200		1.5								
2		24.0	17,500										
3	X	24.0	17,500		1.3							1.1	
4	X	24.0	15,100		0.9							0.8	
5	X	24.0	16,400		0.8							0.6	
6	X	24.0	18,400		1.1							1.0	
7	X	24.0	12,900		0.9							0.8	
8	X	24.0	15,800		1.3								
9		24.0	16,700										
10	X	24.0	16,700		1.5							1.0	
11	X	24.0	31,100		0.9							0.7	
12	X	24.0	14,500		0.9							0.8	
13	X	24.0	15,100		1.2							1.0	
14	X	24.0	12,300		1.1							0.8	
15	X	24.0	18,200		1.8								
16		24.0	17,050										
17	X	24.0	17,050		1.6							1.3	
18	X	24.0	17,000		1.5							1.2	
19	X	24.0	16,000		1.4							1.1	
20	X	24.0	16,300		1.4							1.0	
21	X	24.0	13,800		1.3							1.0	
22	X	24.0	11,800		1.4								
23		24.0	16,500										
24	X	24.0	16,500		1.0							0.9	
25	X	24.0	24,200		0.7							0.5	
26	X	24.0	15,600		0.7							0.6	
27	X	24.0	15,600		0.9							0.6	
28	X	24.0	15,100		1.2							1.0	
29	X	24.0	16,100		1.5								
30		24.0	14,600										
31		24.0											
Total			496,600										
Average			16,019										
Maximum			31,100										

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** October, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Palms Mobile Home			PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	63			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Zip Code:	34749
Contact Person's E-Mail Address:	bheath@aquaaamerica.com			Contact Person's Fax Number:	(352) 787-6333

**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home			Plant Telephone Number:	352-787-0980
Plant Address:	24702 Plumosa Drive	City:	Leesburg	State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	
				D	
Licensed Operators:	Name	License Class	License Number	Day(s)/Shift(s) Worked	
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift	
Other Operators:	Marty Neal	C	10027	Days 1st Shift	
	John Worrell	C	6597	Days 1st Shift	

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

*Will Fontaine* 11-8-07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: October, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CIL Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24.0	14,600		1.4											
2	X	24.0	16,900		1.3											
3	X	24.0	13,600		1.4											
4	X	24.0	15,300		1.3											
5	X	24.0	14,100		1.1											
6	X	24.0	15,400		1.7											
7		24.0	17,900													
8	X	24.0	17,900		1.6											
9	X	24.0	17,700		1.5											
10	X	24.0	14,400		1.5											
11	X	24.0	15,100		1.7											
12	X	24.0	18,600		1.2											
13		24.0	16,450													
14	X	24.0	16,450		1.5											
15	X	24.0	17,200		1.0											
16	X	24.0	13,700		0.7											
17	X	24.0	17,500		1.0											
18	X	24.0	20,100		1.0											
19	X	24.0	13,200		1.1											
20	X	24.0	16,300		1.1											
21		24.0	15,200													
22	X	24.0	15,200		1.2											
23	X	24.0	15,000		0.9											
24	X	24.0	23,300		2.2											
25	X	24.0	14,700		2.2											
26	X	24.0	16,100		1.8											
27	X	24.0	14,100		1.6											
28		24.0	13,250													
29	X	24.0	13,250		1.5											
30	X	24.0	12,500		1.2											
31	X	24.0	12,300		1.0											
Total			487,300													
Average			15,719													
Maximum			23,300													

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



# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: **3350981** Plant Name: **Palms Mobile Home**

III. Daily Data for the Month/Year of: **November, 2007**

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Month	Day of Month	Days Plant Staffed or Operated (Place X's)	Hours plant in Operation	Quantity of Finished Water Produced (gal)	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
					CT Calculations					UV Dose						
					Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
		X	24.0	14,500		1.1									1.0	
		X	24.0	31,100		0.8									0.6	
		X	24.0	16,800		1.0										
			24.0	15,400												
		X	24.0	15,400		0.8									0.6	
		X	24.0	16,900		1.0									0.8	
		X	24.0	13,600		0.8									0.7	
		X	24.0	13,500		1.3									0.9	
		X	24.0	20,600		1.0									0.8	
		X	24.0	9,100		1.4										
			24.0	8,350												
		X	24.0	8,350		1.4									0.8	
		X	24.0	9,100		1.0									0.8	
		X	24.0	7,600		1.0									0.6	
		X	24.0	10,400		1.0									0.6	
		X	24.0	6,700		1.0									0.6	
		X	24.0	8,400		1.4										
			24.0	9,450												
		X	24.0	9,450		1.0									0.6	
		X	24.0	9,000		1.2									1.1	
		X	24.0	8,500		1.5									1.1	
		X	24.0	9,400		1.3									1.1	
		X	24.0	7,600		1.3									1.0	
			24.0	8,100												
		X	24.0	8,100		1.2										
		X	24.0	8,600		1.0									0.7	
		X	24.0	15,800		0.8									0.6	
		X	24.0	10,300		0.7									0.5	
		X	24.0	9,600		1.1									0.6	
		X	24.0	10,300		1.0									0.6	
			24.0	10,700												
				360,700												
				11,635												
				31,100												

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



**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



Polymer Page 3 Due in December

See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** December, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Palms Mobile Home			PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	63			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
				Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home			Plant Telephone Number:	352-787-0980
Plant Address:	24702 Plumosa Drive			City:	Leesburg
				State:	Florida
				Zip Code:	34748
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water			<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	
				D	
<b>Licensed Operators:</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>	
<b>Lead/Chief Operator:</b>	Will Fontaine	C	6813	Days 1st Shift	
<b>Other Operators:</b>	Marty Neal	C	10027	Days 1st Shift	
	John Worrell	C	6597	Days 1st Shift	

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

*Will Fontaine* 1-9-08  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: December, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Purchased Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
16	X	24.0	10,700		1.2										
17		24.0	8,300												
18	X	24.0	8,300		1.0								0.5		
19	X	24.0	10,000		0.9								0.7		
20	X	24.0	8,400		1.4								0.7		
21	X	24.0	8,000		1.6								1.2		
22	X	24.0	9,500		1.4								0.8		
23	X	24.0	9,700		1.6										
24		24.0	11,400												
25	X	24.0	11,400		1.4								1.3		
26	X	24.0	9,800		1.2								1.1		
27	X	24.0	9,700		1.6								1.5		
28	X	24.0	7,300		1.7								1.0		
29	X	24.0	10,800		1.6								1.2		
30	X	24.0	13,100		1.8										
31		24.0	10,700												
1	X	24.0	10,700		1.5								1.1		
2	X	24.0	11,600		2.0								1.8		
3	X	24.0	10,100		1.7								1.6		
4	X	24.0	14,300		1.9								1.7		
5	X	24.0	10,400		1.7								1.2		
6	X	24.0	10,800		1.5										
7		24.0	11,400												
8	X	24.0	11,400		1.4								1.2		
9	X	24.0	11,300		1.5								1.2		
10	X	24.0	10,300		1.1								0.9		
11	X	24.0	11,000		1.2								1.1		
12	X	24.0	21,100		1.4								0.9		
13	X	24.0	14,800		1.4										
14		24.0	11,850												
15	X	24.0	11,850		1.5								1.2		
			340,000												
			10,968												
			21,100												

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

PWS ID:	3350981	Plant Name:	Palms Mobile Home
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<b>IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: *</b>	<b>2007</b>
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A. Is any polymer containing the monomer acrylamide used at the water treatment plant?       No       Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose ppm =	Acrylamide Level, % <sup>†</sup> =
--------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant?       No       Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose ppm =	Epichlorohydrin Level, % <sup>†</sup> =
--------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant?       No       Yes, and the type of sequestrant, sequestrant dose, ect., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO <sub>4</sub> or mg/L of silicate as SiO <sub>2</sub> =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO <sub>2</sub> =

\* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

<sup>†</sup> Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

2006 MOR

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** January, 2006

**A. Public Water System (PWS) Information**

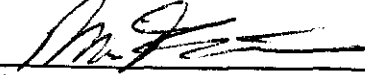
PWS Name:	Palms Mobile Home			PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	62			Total Population Served at End of Month:	124
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home			Plant Telephone Number:	352-787-0980
Plant Address:	24702 Plumosa Drive	City:	Leesburg	State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water			<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	
				D	
<b>Licensed Operators:</b>	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift	
Other Operators:	Marty Neal	C	10027	Days 1st Shift	
	John Worrell	C	6597	Days 1st Shift	

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.


2-6-06
C-6813  
 Signature and Date DOCUMENT NUMBER-DATE Will Fontaine License Number  
Printed or Typed Name

FPSC-COMMISSION CLERK

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: January, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT-Calculations; or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1		24.0	14,750												
2	X	24.0	14,750		1.7										1.4
3	X	24.0	16,800		1.6										1.4
4	X	24.0	14,000		1.6										1.3
5	X	24.0	16,200		1.7										1.6
6	X	24.0	17,700		1.7										1.5
7	X	24.0	9,500		1.5										
8		24.0	14,750												
9	X	24.0	14,750		1.5										1.3
10	X	24.0	17,000		1.6										1.3
11	X	24.0	19,900		1.6										1.3
12	X	24.0	17,800		1.5										1.3
13	X	24.0	15,500		1.5										1.2
14	X	24.0	13,000		1.7										
15		24.0	17,400												
16	X	24.0	17,400		1.6										1.3
17	X	24.0	10,200		1.8										1.6
18	X	24.0	19,500		1.6										1.4
19	X	24.0	22,500		1.5										1.3
20	X	24.0	13,900		1.5										1.2
21	X	24.0	10,200		1.5										
22		24.0	14,450												
23	X	24.0	14,450		1.6										1.3
24	X	24.0	15,500		1.3										1.1
25	X	24.0	23,500		1.5										1.3
26	X	24.0	9,200		1.9										1.7
27	X	24.0	21,200		1.7										1.5
28	X	24.0	11,000		1.7										
29		24.0	13,650												
30	X	24.0	13,650		1.6										1.4
31	X	24.0	16,300		2.0										1.8
Total			480,400												
Average			15,497												
Maximum			23,500												

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** February, 2006

**A. Public Water System (PWS) Information**

PWS Name:	Palms Mobile Home			PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	62			Total Population Served at End of Month:	124
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980	Zip Code:	34749		
Contact Person's E-Mail Address:	beheath@aquaaamerica.com				
Contact Person's Fax Number:	(352) 787-6333				

**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home			Plant Telephone Number:	352-787-0980	
Plant Address:	24702 Plumosa Drive	City:	Leesburg	State:	Florida	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	D	

Licensed Operator	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	Will Fontaine	C	6813	Days 1st Shift
Other Operators	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them together with copies of this report, at a convenient location for at least ten years.

*Will Fontaine*  
 Signature and Date      3/6/06

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: February, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place X's)	Hours plant in Operation	Net Quantity of Finished Water Produced (gals)	Calculations for Free Chlorine Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergencies or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Shutting Water System Components Out of Operation		
				Peak Flow Rate (gpd)	Lowest Residual Disinfectant Concentration (Ct) Before or After Customer During Peak/Low Flow	Disinfectant Contact Time (min)	Residual Provided (mg/L)	Water Temp (C)	pH (if Applicable)	Minimum Ct Required (min/L)	Residual (mg/L)	Minimum Residual Disinfectant Concentration at Remote Point in Distribution System (mg/L)				
1	X	24.0	17,800		1.5									1.2		
2	X	24.0	22,100		2.0									1.7		
3	X	24.0	15,900		1.6									1.4		
4	X	24.0	14,900		1.5											
5		24.0	14,000													
6	X	24.0	14,000		1.5									1.3		
7	X	24.0	22,800		1.4									1.1		
8	X	24.0	13,800		1.4									1.1		
9	X	24.0	17,500		1.5									1.2		
10	X	24.0	19,700		1.5									1.2		
11	X	24.0	12,700		1.3											
12		24.0	15,150													
13	X	24.0	15,150		1.5									1.2		
14	X	24.0	14,600		1.7									1.5		
15	X	24.0	28,600		1.5									1.4		
16	X	24.0	15,700		1.5									1.3		
17	X	24.0	10,100		1.5									1.2		
18	X	24.0	18,400		1.5											
19		24.0	14,900													
20	X	24.0	14,900		1.6									1.4		
21	X	24.0	23,300		1.5									1.4		
22	X	24.0	8,300		1.5									1.2		
23	X	24.0	27,000		1.5									1.2		
24	X	24.0	15,000		1.6									1.2		
25	X	24.0	13,200		1.8											
26		24.0	13,450													
27	X	24.0	13,450		1.6									1.3		
28	X	24.0	23,400		1.6									1.3		
29		24.0														
30		24.0														
31		24.0														
Total			469,800													
AVG			15,155													
Maximum			28,600													

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





# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: March, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of Month	Days Plant Staffed for Operation (Place 'X's)	Hours in Operation	Net Quantity of Water Produced (gals)	CFC Calculations on UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CFC Calculations					UV Dose							
				Peak Flow Rate (gpd)	Lowest Residual Disinfectant Concentration (mg/L) Before or During Peak Flow	Disinfectant Contact Time (min)	Lowest Ct Provided (min/mg/L)	Minimum Ct Required (min/mg/L)	Peak Flow Rate (gpd)	Minimum UV Dose (mW-sec/cm <sup>2</sup> )	Operating UV Dose (mW-sec/cm <sup>2</sup> )	Minimum UV Dose Required (mW-sec/cm <sup>2</sup> )	Lowest Residual Disinfectant Concentration (mg/L) at Remote Point in Distribution System			
1	X	24.0	14,100		1.5										1.3	
2	X	24.0	12,800		1.7										1.5	
3	X	24.0	16,900		1.7										1.5	
4	X	24.0	15,100		1.4											
5		24.0	17,200													
6	X	24.0	17,200		1.4										1.2	
7	X	24.0	17,900		1.4										1.2	
8	X	24.0	25,700		1.4										1.2	
9	X	24.0	15,100		1.3										1.1	
10	X	24.0	10,300		1.2										0.9	
11	X	24.0	19,000		1.4											
12		24.0	17,550													
13	X	24.0	17,550		1.2										1.0	
14	X	24.0	12,600		1.3										1.0	
15	X	24.0	19,300		1.4										1.2	
16	X	24.0	12,300		1.5										1.3	
17	X	24.0	27,900		1.4										1.2	
18	X	24.0	11,000		1.5											
19		24.0	15,150													
20	X	24.0	15,150		1.3										1.0	
21	X	24.0	23,000		1.2										1.0	
22	X	24.0	16,100		1.2										0.9	
23	X	24.0	21,200		1.3										0.9	
24	X	24.0	16,000		1.1										0.8	
25		24.0	14,000													
26	X	24.0	14,000		1.5											
27	X	24.0	11,900		1.5										1.2	
28	X	24.0	19,100		1.6										1.4	
29	X	24.0	22,000		1.4										1.1	
30	X	24.0	12,500		1.4										1.0	
31	X	24.0	26,000		1.4										1.1	
Total			525,600													
Avg			16,955													
Maximum			27,900													

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

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** April, 2006

**A. Public Water System (PWS) Information**

PWS Name: Palms Mobile Home		PWS Identification Number: 3350981	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 62		Total Population Served at End of Month: 124	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Palms Mobile Home		Plant Telephone Number: 352-787-0980		
Plant Address: 24702 Plumosa Drive		City: Leesburg	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 93,600				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): D		
Licensed Operator	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator	Will Fontaine	C	6813	Days 1st Shift
Other Operator	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

5-5-06  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: April, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Started or Visited by Operator (Place an X)	Hours plant in Operation	Net Quantity of Finished Water Produced (gal)	CIT Calculations, or CT Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CIT Calculations					CT Dose					
				Peak Flow Rate (gpd)	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow (mg/l)	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow (minutes)	Lowest C Provided Before or at First Customer During Peak Flow (mg/l)	Temp of Water (C)	pH of Water (if Applicable)	Minimum C Required (mg/l)	Lowest Operating C (mg/l)	Minimum C Required (mg/l)	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System (mg/l)	
1	X	24.0	11,100		1.4									
2		24.0	16,250											
3	X	24.0	16,250		1.4								1.1	
4	X	24.0	16,200		1.4								1.2	
5	X	24.0	15,700		1.5								1.2	
6	X	24.0	12,300		1.4								1.0	
7	X	24.0	23,200		1.4								1.1	
8	X	24.0	13,100		1.2									
9		24.0	16,100											
10	X	24.0	16,100		1.2								1.0	
11	X	24.0	10,200		1.2								1.0	
12	X	24.0	23,700		1.3								1.0	
13	X	24.0	10,500		1.3								1.0	
14	X	24.0	15,300		1.4								1.1	
15	X	24.0	11,800		1.4									
16		24.0	16,800											
17	X	24.0	16,800		1.4								1.2	
18	X	24.0	10,400		1.4								1.1	
19	X	24.0	15,600		1.5								1.2	
20	X	24.0	10,000		1.5								1.1	
21	X	24.0	16,600		1.5								1.2	
22	X	24.0	10,400		1.4									
23		24.0	14,450											
24	X	24.0	14,450		1.4								1.1	
25	X	24.0	21,400		1.5								1.0	
26	X	24.0	12,800		1.3								0.9	
27	X	24.0	13,500		1.4								1.1	
28	X	24.0	19,700		1.4								1.0	
29	X	24.0	9,000		1.6									
30		24.0	14,300											
31		24.0												
Total			444,000											
Average			14,323											
Maximum			23,700											

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

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED MUNICIPAL WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** May, 2006

**A. Public Water System (PWS) Information**

PWS Name: <u>Palms Mobile Home</u>		PWS Identification Number: <u>3350981</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: <u>62</u>		Total Population Served at End of Month: <u>124</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Brian Heath</u>		Contact Person's Title: <u>Area Manager</u>	
Contact Person's Mailing Address: <u>PO Box 490310</u>		City: <u>Leesburg</u>	State: <u>Florida</u> Zip Code: <u>34749</u>
Contact Person's Telephone Number: <u>(352) 787-0980</u>		Contact Person's Fax Number: <u>(352) 787-6333</u>	
Contact Person's E-Mail Address: <u>bheath@aquaflo.com</u>			

**B. Water Treatment Plant Information**

Plant Name: <u>Palms Mobile Home</u>		Plant Telephone Number: <u>352-787-0980</u>	
Plant Address: <u>24702 Plumosa Drive</u>		City: <u>Leesburg</u>	State: <u>Florida</u> Zip Code: <u>34748</u>
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>93,600</u>			
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>V</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>D</u>	
Licensed Operator	Name	License Class	License Number / Day(s) / Shift(s) Worked
	<u>Will Fontaine</u>	<u>C</u>	<u>6813</u> / <u>Days 1st Shift</u>
	<u>Marty Neal</u>	<u>C</u>	<u>10027</u> / <u>Days 1st Shift</u>
	<u>John Worrell</u>	<u>C</u>	<u>6597</u> / <u>Days 1st Shift</u>

**II Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

*Will Fontaine* 6-5-06  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: **3350981** Plant Name: **Palms Mobile Home**

III. Daily Data for the Month/Year of: **May, 2006**

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of Month	Day of Operation	Hours of Operation	Volume of Water Treated (gallons)	Lowest Residual Disinfectant Concentration (mg/L) Before or at First Customer During Peak Flow	CD Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable		UV Dose		Lowest Residual Disinfectant Concentration at Remote Point of Distribution System (mg/L)	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
					Disinfectant Contact Time (min)	Lowest Residual Disinfectant Concentration (mg/L) at End of Distribution	Minimum UV Dose Required (mW-sec/cm)	Operating UV Dose (mW-sec/cm)		
X		24.0	14,400	1.4					1.1	
X		24.0	13,100	1.5					1.1	
X		24.0	14,300	1.5					1.2	
X		24.0	19,400	1.5					1.2	
X		24.0	17,000	1.4					1.1	
X		24.0	9,300	1.4						
		24.0	16,550							
X		24.0	16,550	1.5					1.1	
X		24.0	12,600	1.4					1.0	
X		24.0	13,000	1.5					1.0	
X		24.0	12,300	1.5					1.1	
X		24.0	17,400	1.4					1.1	
X		24.0	10,400	1.5						
		24.0	14,300							
X		24.0	14,300	1.5					1.2	
X		24.0	13,600	1.5					1.2	
X		24.0	9,400	1.6					1.4	
X		24.0	16,400	1.5					1.2	
X		24.0	13,300	1.4					1.0	
		24.0	13,200							
X		24.0	13,200	1.5						
X		24.0	17,300	1.6					1.4	
X		24.0	19,000	1.5					1.2	
X		24.0	13,500	1.2					1.0	
X		24.0	12,800	1.2					1.0	
X		24.0	13,200	1.5					1.2	
X		24.0	19,500	1.2						
		24.0	15,650							
X		24.0	15,650	1.4					1.0	
X		24.0	17,900	1.4					1.0	
X		24.0	14,200	1.3					0.9	
			453,300							
			14,623							
			19,500							

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



# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: June, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*									Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>		
1	X	24.0	17,800		1.1								0.9	
2	X	24.0	13,600		1.0								0.7	
3	X	24.0	10,100		1.3									
4		24.0	15,850											
5	X	24.0	15,850		1.3								1.0	
6	X	24.0	11,700		1.5								1.3	
7	X	24.0	17,500		2.2								2.0	
8	X	24.0	15,300		2.2								1.3	
9	X	24.0	27,500		1.2								0.9	
10	X	24.0	11,700		1.2									
11		24.0	17,900											
12	X	24.0	17,900		1.4								1.0	
13	X	24.0	13,800		1.1								0.8	
14	X	24.0	14,900		0.9								0.6	
15	X	24.0	15,500		1.5								1.0	
16	X	24.0	19,700		1.2								0.9	
17	X	24.0	11,600		1.3									
18		24.0	16,700											
19	X	24.0	16,700		0.9								0.6	
20	X	24.0	15,600		1.0								0.7	
21	X	24.0	13,700		1.3								0.9	
22	X	24.0	14,700		1.7								1.2	
23	X	24.0	17,500		1.6								1.1	
24	X	24.0	14,600		1.4									
25		24.0	21,550											
26	X	24.0	21,550		1.1								0.9	
27	X	24.0	14,100		0.8								0.6	
28	X	24.0	16,000		1.1								0.8	
29	X	24.0	9,500		1.1								0.9	
30	X	24.0	24,600		2.2								2.2	
31		24.0												
Total			485,000											
Average			15,645											
Maximum			27,500											

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



# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** July, 2006

**A. Public Water System (PWS) Information**

PWS Name: Palms Mobile Home		PWS Identification Number: 3350981	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 62		Total Population Served at End of Month: 124	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaamerica.com		Contact Person's Fax Number: (352) 787-6333	

**B. Water Treatment Plant Information**

Plant Name: Palms Mobile Home		Plant Telephone Number: 352-787-0980	
Plant Address: 24702 Plumosa Drive		City: Leesburg	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 34748	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 93,600			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): D	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator	Will Fontaine	C	6813
Other Operators	Marty Neal	C	10027
	John Worrell	C	6597

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date
 

 Will Fontaine  
 Printed or Typed Name
 

 C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

**III. Daily Data for the Month/Year of:** July, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations for UV Dose to Demstrate Four-Log Virus Inactivation, if Applicable								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg·min/L	Temp of Water, °C	pH of Water if Applicable	Minimum CT Required, mg·min/L	Lowest Operating UV Dose, mW·sec/cm <sup>2</sup>			Minimum UV Dose Required, mW·sec/cm <sup>2</sup>
1	X	24.0	23,200		1.7									
2		24.0	23,700											
3	X	24.0	23,700		1.7								1.3	
4	X	24.0	11,800		1.7								1.2	
5	X	24.0	18,800		2.2								1.6	
6	X	24.0	10,200		2.2								2.2	
7	X	24.0	18,700		1.1								1.0	
8	X	24.0	11,400		1.4									
9		24.0	15,050											
10	X	24.0	15,050		1.3								1.0	
11	X	24.0	26,100		1.0								0.8	
12	X	24.0	11,000		1.1								0.7	
13	X	24.0	13,900		1.1								0.8	
14	X	24.0	15,800		1.4								1.2	
15	X	24.0	15,800		1.5									
16		24.0	23,400											
17	X	24.0	23,400		1.5								1.1	
18	X	24.0	21,000		1.4								1.0	
19	X	24.0	15,100		1.2								0.9	
20	X	24.0	15,200		1.5								1.2	
21	X	24.0	15,400		1.4								1.0	
22	X	24.0	12,600		1.5									
23		24.0	18,450											
24	X	24.0	18,450		1.8								1.2	
25	X	24.0	16,700		1.7								1.3	
26	X	24.0	14,900		1.7								1.3	
27	X	24.0	20,600		1.7								1.2	
28	X	24.0	13,900		1.0								0.7	
29	X	24.0	11,700		1.5									
30		24.0	18,300											
31	X	24.0	18,300		1.2								0.9	
Total			531,600											
Average			17,148											
Maximum			26,100											

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



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** August, 2006

**A. Public Water System (PWS) Information**

PWS Name:	Palms Mobile Home			PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	62			Total Population Served at End of Month:	124
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

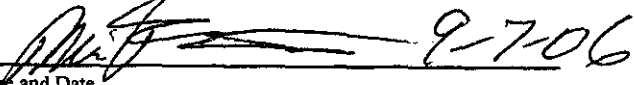
**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home			Plant Telephone Number:	352-787-0980	
Plant Address:	24702 Plumosa Drive	City:	Leesburg	State:	Florida	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water			<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	D	

Licensed Operator	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator	Will Fontaine	C	6813	Days 1st Shift
Operator	Marty Neal	C	10027	Days 1st Shift
Operator	John Worrell	C	6597	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

 8-7-06  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: August, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Started or Visited by Operator (Place "X" in Cell)	Hours plant in Operation	Quantity of Finished Water Produced (gals)	CFC Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CFC Calculations				UV Dose					
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (mg/L) Before or at First Customer during Peak Flow, mg/L	Disinfectant Contact Time (min) at C	Measurement Point during Peak Flow, minutes	Lowest Cl Provided Before or at First Customer during Peak Flow, mg/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum Cl Required, mg/L		
	X	24.0	15,300		1.1							0.9	
	X	24.0	15,000		1.3							1.0	
	X	24.0	16,100		1.3							0.9	
	X	24.0	26,000		1.4							1.1	
	X	24.0	11,500		1.4								
	X	24.0	15,100		1.3							1.0	
	X	24.0	15,400		1.2							0.8	
	X	24.0	14,600		1.4							1.1	
	X	24.0	15,500		1.4							0.9	
	X	24.0	23,800		1.2							0.8	
	X	24.0	12,600		1.7								
		24.0	16,900										
	X	24.0	16,900		1.2							0.9	
	X	24.0	17,000		1.2							0.9	
	X	24.0	21,700		1.1							0.8	
	X	24.0	23,500		2.2							1.6	
	X	24.0	28,500		2.2							1.8	
	X	24.0	21,600		2.0								
		24.0	65,800										
	X	24.0	65,800		2.2							2.2	
	X	24.0	14,000		1.6							1.2	
	X	24.0	15,000		1.4							1.1	
	X	24.0	13,000		1.4							1.0	
	X	24.0	13,300		1.4							1.0	
	X	24.0	10,000		1.3								
		24.0	15,800										
	X	24.0	15,800		1.2							0.8	
	X	24.0	13,700		1.4							0.9	
	X	24.0	20,500		1.3							0.9	
	X	24.0	10,400		1.2							0.9	
			615,200										
			19,845										
			65,800										

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: September, 2006

A. Public Water System (PWS) Information

PWS Name: Palms Mobile Home PWS Identification Number: 3350981
PWS Type: Community
Number of Service Connections at End of Month: 62 Total Population Served at End of Month: 124
PWS Owner: Aqua Utilities Florida
Contact Person: Brian Heath Contact Person's Title: Area Manager
Contact Person's Mailing Address: PO Box 490310 City: Leesburg State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980 Contact Person's Fax Number: (352) 787-6333
Contact Person's E-Mail Address: beheath@aquaaamerica.com

B. Water Treatment Plant Information

Plant Name: Palms Mobile Home Plant Telephone Number: 352-787-0980
Plant Address: 24702 Plumosa Drive City: Leesburg State: Florida Zip Code: 34748
Type of Water Treatment by Plant: Raw Ground Water
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 93,600
Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): D
Licensed Operator Table:
Name: Will Fontaine License Class: C License Number: 6813 Day(s)/Shift(s) Worked: Days 1st Shift
Name: Marty Neal License Class: C License Number: 10027 Day(s)/Shift(s) Worked: Days 1st Shift
Name: John Worrell License Class: C License Number: 6597 Day(s)/Shift(s) Worked: Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date: [Handwritten Signature] 10-6-06

Will Fontaine
Printed or Typed Name

C-6813
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: September, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of Month	Plant Status (On/Off)	Plant Operation	Peak Flow (MGD)	Ct Calculations to Demonstrate Four-Log Virus Inactivation, if Applicable				Minimum Ct Required (mg/L-min)	Operating UV Dose (mW-sec/cm <sup>2</sup> )	Minimum UV Dose Required (mW-sec/cm <sup>2</sup> )	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System (mg/L)	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				Lowest Residual Disinfectant Concentration (mg/L)	Disinfectant Contact Time (min)	Flow (MGD)	Flow (MGD)					
X		24.0	16,100		1.5					1.2		
X		24.0	26,000		1.5							
		24.0	12,200									
X		24.0	12,200		1.3					1.1		
X		24.0	16,000		1.2					1.0		
X		24.0	15,400		1.2					0.9		
X		24.0	15,000		1.5					1.1		
X		24.0	14,100		1.5					1.1		
X		24.0	14,000		1.4							
		24.0	17,300									
X		24.0	17,300		0.9					0.6		
X		24.0	17,100		1.3					0.8		
X		24.0	8,000		1.3					0.8		
X		24.0	16,500		1.3					0.9		
X		24.0	20,500		1.3					0.9		
X		24.0	10,800		1.5							
		24.0	17,150									
X		24.0	17,150		1.2					0.9		
X		24.0	18,100		1.3					0.9		
X		24.0	15,500		1.3					1.0		
X		24.0	14,700		1.4					0.8		
X		24.0	27,700		1.3					0.8		
		24.0	19,200									
X		24.0	19,200		1.4							
X		24.0	20,500		1.3					0.9		
X		24.0	21,000		1.5					1.1		
X		24.0	18,600		1.5					1.1		
X		24.0	20,900		1.5					1.2		
X		24.0	21,500		1.5					1.1		
X		24.0	20,600		1.8							
		24.0										
			520,300									
			16,784									
			27,700									

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



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** October, 2006

**A. Public Water System (PWS) Information**

PWS Name:	Palms Mobile Home	PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	62	Total Population Served at End of Month:	124
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
Contact Person's Telephone Number:	(352) 787-0980	Zip Code:	34749
Contact Person's E-Mail Address:	bheath@aquamerica.com	Contact Person's Fax Number:	(352) 787-6333

**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home	Plant Telephone Number:	352-787-0980
Plant Address:	24702 Plumosa Drive	City:	Leesburg
		State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	Zip Code:	34748

Permitted Maximum Day Operating Capacity of Plant, gallons per day: 93,600

Plant Category (per subsection 62-699.310(4), F.A.C.): \_\_\_\_\_ Plant Class (per subsection 62-699.310(4), F.A.C.): D

Licensed Operator	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator	Will Fontaine	C	6813	Days 1st Shift
Operator	Marty Neal	C	10027	Days 1st Shift
Operator	John Worrell	C	6597	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine 11-3-06  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/year of: October, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date	Time	Flow (gpm)	Flow (MGD)	Calculations of UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Residual Disinfectant Concentration at Remote Point in Distribution System (mg/L)	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				Calculations					UV Dose							
				Flow (gpm)	Disinfectant Concentration (mg/L)	Disinfectant Contact Time (min)	Flow (gpm)	UV Intensity (mW/cm <sup>2</sup> )	UV Dose (mJ/cm <sup>2</sup> )	Flow (gpm)	Disinfectant Concentration (mg/L)	Disinfectant Contact Time (min)	Flow (gpm)			Disinfectant Concentration (mg/L)
		24.0	23,000													
X		24.0	23,000		1.6										1.1	
X		24.0	23,600		1.6										1.2	
X		24.0	22,700		2.1										1.6	
X		24.0	23,500		1.5										1.3	
X		24.0	33,600		1.6										1.3	
X		24.0	19,800		1.6											
		24.0	24,900													
X		24.0	24,900		1.3										1.0	
X		24.0	17,800		1.1										0.8	
X		24.0	16,500		1.4										0.9	
X		24.0	20,300		1.3										0.9	
X		24.0	10,800		1.1										0.9	
X		24.0	17,000		1.3											
		24.0	18,400													
X		24.0	18,400		1.4										1.0	
X		24.0	10,000		1.3										0.9	
X		24.0	13,900		1.2										0.9	
X		24.0	13,500		2.0										1.5	
X		24.0	20,100		1.1										0.8	
X		24.0	16,300		1.1											
		24.0	12,850													
X		24.0	12,850		1.3										1.1	
X		24.0	12,300		1.5										1.2	
X		24.0	17,500		2.0										1.6	
X		24.0	15,800		1.8										1.6	
X		24.0	14,300		1.6										1.4	
X		24.0	11,100		1.5											
		24.0	14,050													
X		24.0	14,050		1.7										1.4	
X		24.0	17,200		1.7										1.5	
			553,500													
			17,855													
			33,600													

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



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** November, 2006

**A. Public Water System (PWS) Information**

PWS Name:	Palms Mobile Home			PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	62			Total Population Served at End of Month:	124
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980	Zip Code:	34749		
Contact Person's E-Mail Address:	beheath@aguaamerica.com				
Contact Person's Fax Number:	(352) 787-6333				

**B. Water Treatment Plant Information**

Plant Name:	Palms Mobile Home			Plant Telephone Number:	352-787-0980
Plant Address:	24702 Plumosa Drive	City:	Leesburg	State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	
			D		
<b>Licensed Operators:</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s)/Shift(s) Worked</b>	
<b>Lead/Chief Operator:</b>	Will Fontaine	C	6813	Days 1st Shift	
<b>Other Operators:</b>	Marty Neal	C	10027	Days 1st Shift	
	John Worrell	C	6597	Days 1st Shift	

**II Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date: Will Fontaine 12-8-06  
 Printed or Typed Name: Will Fontaine  
 License Number: C-6813

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: November, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*														
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations					UV Dose			Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>			Minimum UV Dose Required, mW-sec/cm <sup>2</sup>
1	X	24.0	14,800		1.6								1.3	
2	X	24.0	13,200		1.4								1.2	
3	X	24.0	14,900		1.6								1.3	
4	X	24.0	13,400		1.5									
5		24.0	15,350											
6	X	24.0	15,350		1.4								1.2	
7	X	24.0	12,100		1.8								1.5	
8	X	24.0	17,800		1.4								1.3	
9	X	24.0	13,900		1.4								1.2	
10	X	24.0	16,500		1.5								1.2	
11	X	24.0	15,100		1.4									
12		24.0	14,400											
13	X	24.0	14,400		1.4								1.2	
14	X	24.0	14,300		1.6								1.3	
15	X	24.0	15,300		1.5								1.3	
16	X	24.0	14,400		1.5								1.3	
17	X	24.0	14,500		1.3								1.2	
18	X	24.0	14,800		1.3									
19		24.0	14,650											
20	X	24.0	14,650		1.2								1.0	
21	X	24.0	17,500		1.3								1.2	
22	X	24.0	15,600		1.5								1.3	
23	X	24.0	14,300		1.4								1.1	
24	X	24.0	15,900		1.4								1.0	
25		24.0	14,150											
26	X	24.0	14,150		1.6									
27	X	24.0	17,400		1.4								1.2	
28	X	24.0	14,700		1.4								1.2	
29	X	24.0	20,400		1.6								1.3	
30	X	24.0	16,100		1.4								1.2	
31		24.0												
Total			454,000											
Average			14,645											
Maximum			20,400											

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



Polymer Page 3 Due in December

See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** December, 2006

**A. Public Water System (PWS) Information**


PWS Name:	Palmis Mobile Home			PWS Identification Number:	3350981
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	62	Total Population Served at End of Month:	124		
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager		
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
		Zip Code:	34749		
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333		
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Palmis Mobile Home			Plant Telephone Number:	352-787-0980
Plant Address:	24702 Plumosa Drive	City:	Leesburg	State:	Florida
		Zip Code:	34748		
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	93,600				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	
				D	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator	Will Fontaine	C	6813	Days 1st Shift	
Other Operators	Marty Neal	C	10027	Days 1st Shift	
	John Worrell	C	6597	Days 1st Shift	

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

 1-5-07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3350981 Plant Name: Palms Mobile Home

III. Daily Data for the Month/Year of: December, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe): \_\_\_\_\_

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date	Plant	Operator	Disinfectant	Water Produced	GT Calculations for UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Remarks	
					GT Calculations					UV Dose						
					Flow Rate (gpm)	Flow Rate (mgd)	Disinfectant Concentration (mg/L)	Retention Time (min)	GT (min-mg/L)	Flow Rate (gpm)	Flow Rate (mgd)	Minimum UV Dose (mJ/cm <sup>2</sup> )	UV Dose (mJ/cm <sup>2</sup> )	UV System		
X				19,100			1.3								1.0	
X				16,400			1.4									
				18,150												
X				18,150			1.3									1.0
X				16,500			1.4									1.1
X				10,600			1.4									1.2
X				14,800			1.2									1.0
X				15,400			1.5									1.2
X				18,900			1.3									
				16,950												
X				16,950			1.2									1.0
X				13,300			1.3									1.0
X				15,600			1.3									1.1
X				21,500			1.2									1.1
X				14,900			1.2									1.0
X				14,800			1.2									
				15,650												
X				15,650			1.2									1.0
X				16,800			1.3									1.0
X				18,000			1.5									1.3
X				24,400			1.3									1.2
X				17,200			1.1									0.9
X				15,900			0.8									
				17,700												
X				17,700			1.6									1.4
X				18,500			1.8									1.7
X				19,800			1.1									1.0
X				17,000			1.4									1.2
X				18,600			1.3									1.2
X				19,800			1.3									
				20,100												
				534,800												
				17,252												
				24,400												

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

PWS ID:	3350981	Plant Name:	Palms Mobile Home
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**IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: \* 2006**

A. Is any polymer containing the monomer acrylamide used at the water treatment plant?  No  Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose ppm =		Acrylamide Level, % <sup>†</sup> =	
--------------------	--	------------------------------------	--

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant?  No  Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose ppm =		Epichlorohydrin Level, % =	
--------------------	--	----------------------------	--

C. Is any iron or manganese sequestrant used at the water treatment plant?  No  Yes, and the type of sequestrant, sequestrant dose, ect., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):	
Sequestrant Dose, mg/L of phosphate as PO <sub>4</sub> or mg/L of silicate as SiO <sub>2</sub> =	
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO <sub>2</sub> =	

\* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

<sup>†</sup> Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

**PERMIT**

Palms MHP



# St. Johns River Water Management District

Kirby B. Green III Executive Director • David W. Fisk Assistant Executive Director

4049 Reid Street • P.O. Box 1429 • Palatka, FL 32178-1429 • (386) 329-4500  
On the Internet at [www.sjrwmd.com](http://www.sjrwmd.com).

CERTIFIED NUMBER: 7004 0750 0003 3823 0233

August 12, 2004

Aqua Utilities of Florida  
6960 Professional Parkway East, Suite 400  
Sarasota, FL 34240

SUBJECT: Consumptive Use Permit #2612

The District has received a copy of the Bill of Sale naming Aqua Utilities Florida as the owner of the parcel of property formerly owned by Florida Water Services.

The above referenced permit is hereby transferred to Aqua Utilities Florida as the new permit holder, you are required to comply with all the conditions as noted in the permit. If you have any questions concerning the conditions of your permit, please contact Shannon Joyce, Hydrologist IV, 407-659-4848.

Thank you for your cooperation with this matter. If you have any questions or if the District can be of further assistance, please do not hesitate to contact us.

Sincerely,

Gloria Lewis, Director  
Division of Permit Data Services

Enclosures:

- Permit
- Conditions of Issuance
- Compliance Forms
- Well Tags

CC: District Permit File  
Lynn Minor, Data Management Supervisor

DOCUMENT NUMBER - DATE  
04312 MAY 22 08  
FPSC-COMMISSION CLERK

GOVERNING BOARD

- |  |   |                                     |  |
|--|---|-------------------------------------|--|
| Ometrias D. Long<br>CHAIRMAN<br>APOPKA | David G. Graham, JCE<br>VICE CHAIRMAN<br>JACKSONVILLE | R. Clay Albright, SECRETARY<br>DELA | Duane Ottenstroer<br>TREASURER<br>JACKSONVILLE |
| W. Michael Branch<br>FERNANDO/A BEACH  | John G. Sowinski<br>ORLANDO                           | William Kerr<br>MELBOURNE BEACH     | Ann T. Moore<br>DUVAL                          |
|  |   |                                     | Susan N. Hughes<br>JACKSONVILLE                |

#### 40C-1.612 TRANSFER OF OWNERSHIP OF PERMIT

- (1) **Transfer of Permitted Facility.** Within (30) days of any sale, conveyance, or other transfer of a facility, system, or well permitted by the District, the existing permittee must notify the District, in writing, of such transfer, giving the name and address of the transferee and providing a copy of the instrument effectuating the transfer.
- (2) **Transfer of Interest in Real Property.** Within (30) days of any transfer of ownership or control of the real property at which any permitted facility, system, consumptive use, or activity is located the permittee must notify the District, in writing, of the transfer, giving the name and address of the new owner or person in effectuating the transfer.
- (3) **Transfer of Permit.** To transfer a permit, the permittee must provide the information required in subsections (1) and (2), together with a written statement from the proposed transferee that it will bound by all terms and conditions of the permit. Additionally, where applicable, the transferee must demonstrate that it is capable of constructing, operating and maintaining the permitted facility, system, consumptive use, well or activity. Once the required information has been provided, the District may transfer the permit to the transferee.



PERMIT NO. 2612

ORIGINAL PERMIT ISSUED: November 17, 1999

TRANSFER PROCESS DATE: August 19, 2004

PROJECT NAME: Palms Mobile Home Park

**A PERMIT AUTHORIZING:**

The use of 7.857 million gallons per year of ground water from the Floridan aquifer to serve a projected population of 192 people in the year 2019, with water for household and water utility type uses.

**LOCATION:**

Site: Palms Mobile Home Park  
Lake County

Section(s): 36 Township(s): 20S Range(s): 24E

**ISSUED TO:**

Aqua Utilities Florida  
6960 Professional Parkway East, Suite 400  
Sarasota, FL 34240

Permittee agrees to hold and save the St. Johns River Water Management District and its successors harmless from any and all damages, claims, or liabilities which may arise from permit issuance. Said application, including all maps and specifications attached thereto, is by reference made a part hereof.

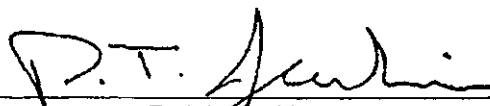
This permit does not convey to permittee any property rights nor any rights of privileges other than those specified herein, nor relieve the permittee from complying with any law, regulation or requirement affecting the rights of other bodies or agencies. All structures and works installed by permittee hereunder shall remain the property of the permittee.

This permit may be revoked, modified or transferred at any time pursuant to the appropriate provisions of Chapter 373, Florida Statutes and 40C-1, Florida Administrative Code.

**PERMIT IS CONDITIONED UPON:**

See conditions on attached "Exhibit A", dated November 17, 1999

**AUTHORIZED BY:** St. Johns River Water Management District  
Department of Resource Management

By:   
Dwight Jenkins  
Division Director

**"EXHIBIT A"**  
**CONDITIONS FOR ISSUANCE OF PERMIT NUMBER 2612**  
**AQUA UTILITIES FLORIDA**  
**DATED NOVEMBER 17, 1999**

1. District Authorized staff, upon proper identification, will have permission to enter, inspect and observe permitted and related facilities in order to determine compliance with the approved plans, specifications and conditions of this permit.
2. Nothing in this permit should be construed to limit the authority of the St. Johns River Water Management District to declare a water shortage and issue orders pursuant to Section 373.175, Florida Statutes, or to formulate a plan for implementation during periods of water shortage, pursuant to Section 373.246, Florida Statutes. In the event a water shortage, is declared by the District Governing Board, the permittee must adhere to the water shortage restriction as specified by the District, even though the specified water shortage restrictions may be inconsistent with the terms and conditions of this permit.
3. Prior to the construction, modification, or abandonment of a well, the permittee must obtain a Water Well Construction Permit from the St. Johns River Water Management District, or the appropriate local government pursuant to Chapter 40C-3, Florida Administrative Code. Construction, modification, or abandonment of a well will require modification of the consumptive use permit when such construction, modification or abandonment is other than that specified and described on the consumptive use permit application form.
4. Leaking or inoperative well casings, valves, or controls must be repaired or replaced as required to eliminate the leak or make the system fully operational.
5. Legal uses of water existing at the time of the permit application may not be interfered with by the consumptive use. If unanticipated interference occurs, the District may revoke the permit in whole or in part to curtail or abate the interference unless the permittee mitigates for the interference. In those cases where other permit holders are identified by the District as also contributing to the interference, the permittee may choose to mitigate in a cooperative effort with these other permittees. The permittee must submit a mitigation plan to the District for approval prior to implementing such mitigation.
6. Off-site land uses existing at the time of permit application may not be significantly adversely impacted as a result of the consumptive use. If unanticipated significant adverse impacts occur, the District shall revoke the permit in whole or in part to curtail or abate the adverse impacts, unless the impacts can be mitigated by the permittee.
7. The District must be notified, in writing, within 30 days of any sale, conveyance, or other transfer of a well or facility from which the permitted consumptive use is made or within 30 days of any transfer of ownership or control of the real property at which the permitted consumptive use is located. All transfers of ownership or transfers of permits are subject to the provisions of section 40C-1.612, Florida Administrative Code.
8. A District-issued identification tag shall be prominently displayed at each withdrawal site by permanently affixing such tag to the pump, headgate, valve or other withdrawal facility as provided by Section 40C-2.401, Florida Administrative Code. Permittee shall notify the District in the event that a replacement tag is needed.
9. Landscape irrigation is prohibited between the hours of 10:00 a.m. and 4:00 p.m., except as follows:
  - (a) Irrigation using a micro-irrigation system is allowed anytime.
  - (b) The use of reclaimed water for irrigation is allowed anytime, provided appropriate signs

are placed on the property to inform the general public and District enforcement personnel of such use. Such signs must be in accordance with local restrictions.

(c) Irrigation of, or in preparation for planting, new landscape is allowed any time of day for one 30 day period provided irrigation is limited to the amount necessary for plant establishment.

(d) Watering in of chemicals, including insecticides, pesticides, fertilizers, fungicides, and herbicides when required by law, the manufacturer, or best management practices is allowed anytime within 24 hours of application.

(e) Irrigation systems may be operated anytime for maintenance and repair purposes not to exceed ten minutes per hour per zone.

10. The lowest quality water source, such as reclaimed water and surface/storm water, must be used as irrigation water when deemed feasible pursuant to District rules and applicable state law.
11. This permit will expire on November 17, 2019.
12. Maximum annual withdrawal from the Confined or Semi-confined Aquifer for household type uses must not exceed:
  - 6.419 million gallons from 1999 to 2005 for 13.200 acres.
  - 6.895 million gallons from 2005 to 2010 for 13.200 acres.
  - 7.371 million gallons from 2010 to 2015 for 13.200 acres.
  - 7.857 million gallons from 2015 to 2019 for 13.200 acres.
13. Permittee must implement the conservation plan approved by the District in accordance with the schedule contained therein.
14. All submittals made to demonstrate compliance with this permit must include the permit number 2612 plainly labeled.
15. Well No.1, as listed on the application, is equipped with an individual, totalizing flowmeter. This meter must maintain 95% accuracy, be verifiable, and be installed according to the manufacturer's specifications.
16. Total withdrawal from Well No. 1, as listed on the application, must be recorded continuously, totaled monthly, and reported to the District at least every six months for the duration of this permit using District Form No. EN-50. The reporting dates each year will be as follows:

Reporting Period	Report Due Date
January - June	July 31
July - December	January 31
17. The permittee must maintain all meters. In case of failure or breakdown of any meter, the District must be notified in writing within 5 days of its discovery. A defective meter must be repaired or replaced within 30 days of its discovery.
18. The permittee must have the flow meters calibrated once every 3 years within 30 days of the anniversary date of permit issuance, and recalibrated if the difference between the actual flow and the meter reading is greater than 5%. District Form No. EN-51 must be submitted to the District within 10 days of the inspection/ calibration.

**SAMPLES**

# DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION AND LABORATORY REPORTING FORMAT

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080  
 4155 St. Johns Parkway Suite 1300 Sanford, FL 32771 FDOH # E83509  
 307 Coolidge Ave. Lehigh Acres, FL 33936 FDOH # E85370  
 18331 Cortez Blvd. Brooksville, FL 3480 FDOH # E84418

**HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.**  
 5600 U.S. 1 North, Fort Pierce FL 34946  
 Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-5884

HBEL Report Number: 2130131 Sub-Contract Lab ID: \_\_\_\_\_

Lab Receipt Date and Time: 12/6/07 1215

Analysis Method Requested:  
 Coliort  Membrane Filtration PWS I.D. 33509B1

Received for Laboratory By: Paul

Analysis Date and Time: 12/6/07 1505

System Name: 4116 PALMS WMA (AUF-LAKE CO.)  
 System Address: 24702 Rumasa Dr.

Sample Acceptance Criteria:  
 Sample Preservation  On Ice  Not On Ice 35°C  
 Disinfectant Check  Not Detected  >0.1 mg/l

City: LEESBURG System or Owner's Phone #: 352-787-0980 Fax #: 787-6333

Collector: John Johnson Collector's Phone #: SAME

Relinquished By: [Signature] Received By: [Signature] Relinquished By: [Signature]

Date/Time: 12/6/07 Date/Time: 12/6/07 Date/Time: 12/6/07 1215

Type of Supply: (check only one)  
 Community Water System  Noncommunity Water System  Nontransient-Noncommunity Water System  Limited Use System  
 Private Well  Swimming Pool  Bottled Water  Other

Reason for Sampling: (check only one)  
 Routine Compliance  Repeat  Replacement  Main Clearance  Well Survey  Other

Sample Collection Date(s): 12/6/07

LABORATORY CERTIFICATE OF ANALYSIS				
Total Coliform Analysis Method: (MF) SM9222B (Coliort) SM9223B				
Fecal (MF) SM9221E		E. coli (MF) EC+MUG		(Coliort) SM9223B
Non Coliform	Total Coliform	Fecal or E. Coli	Data Qual. 2	Lab Sample Number
	A			2130131001
	A			002
	A			2130131003

TO BE COMPLETED BY COLLECTOR OF SAMPLE					
Sample number	SAMPLE POINT (Location or Specific Address)	Collection Time	Sample Type <sup>1</sup>	Disinfect Resid mg/L	pH
W1	WMA	9:35A	R	-	-
*R1	5611 Palm Way	9:20A	D	1.4	-
R2	24616 PALMETTO DR	9:10A	D	1.2	-

Average of disinfectant residuals for routine and repeat samples. (Complete for community and nontransient noncommunity systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.) 1.3

Key: P - Present A - Absent C - Confluent Growth  
 TNTC - Too Numerous to Count TA - Turbid  
 L.C.A. Absence of gas or acid  
 Analyst: Paul

Disinfectant Residual Analysis Method:  DPD Colorimetric  Other  
 Person performing analysis is:  
 A certified operator (# 216597)  Employed by a certified lab  
 Supervised by a certified operator (# \_\_\_\_\_)  Employed by DEP or DOH

Report authorized by: [Signature] Technical Director or Designee

Date: 12/6/07 Unless otherwise noted, all test results contained within this report meet all applicable Method, Laboratory and NELAC guidelines. Questions regarding this report should be directed to the report Signatory at the phone number above.

Name and Mailing Address of Person/Firm to Receive Report  
**Aqua Utilities Florida, Inc.**  
 1100 Thomas Avenue  
 Leesburg, FL 34748  
AITA: Patricia Ferris



Page 1 of 1

Satisfactory  Repeat Samples Required  
 Incomplete Collection Information  Replacement Samples Required  
 Date Reviewed by DEP/DOH: \_\_\_\_\_  
 DEP/DOH Reviewing Official: \_\_\_\_\_

<sup>1</sup> DEP Sample Types: D-Distribution (Routine Compliance); C-Repeat or Check; R-Raw; N-Entry to Distribution; P-Plant Tap; S-Special (clearance, etc.) <sup>2</sup> Defined in Florida Administrative Code Rule 62-180  
 Top Form - ORIGINAL FORM # 1875 - PRINTING BY HEARN Middle Form - LABORATORY Pink Form - CLIENT

FPSC-COMMISSION CLERK  
 DOCUMENT NUMBER - DATE  
 043 2 MAY 22 08

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

Date issued: February 27, 2007

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

---

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Palms MHP DW NO3/NO2 [2127990]  
Received: 2/22/07 13:00

---

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:  
E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,



Cindy Cromer  
Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 2/27/07



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 467-2400, Ext. 285 Fax: (772) 467-584

**Quality Control Summary**

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Palms MHP DW NO3/NO2  
Received: 2/22/07 13:00

[2127990]

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

HBEL Sample

**Method Narratives (If Applicable)**

Number      Sample ID      Analytical Method      Description

**Quality Control Summary**

Method    HBEL Batch    Analyte

Analytical Issue

5800 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418



Printed: 2/27/07

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

**CERTIFICATE OF ANALYSIS**

[2127990]

Client: Aqua Utilities Florida, Inc.

Workorder ID: Palms MHP DW NO3/NO2

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID: <b>2127990001</b> Sample ID: <b>Point of Entry Grab</b>						Sampled: 02/22/07 10:05    Received: 02/22/07 13:00 Matrix: Water                      Results reported on Wet Weight Basis				
Nitrate as N		0.65	mg/L	0.0030	EPA 300.0	IC7134		02/23/07 14:01	JL	E96080
Nitrite as N		0.0022 U	mg/L	0.0022	EPA 300.0	IC7134		02/23/07 14:01	JL	E96080

Result Qualifiers: U = Not Detected    I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
 Applicable Florida Department of Environmental Protection Qualifiers defined below.    Statement of Estimated Uncertainty available upon request.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080  
Printed: 2/27/07

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509



307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

500 U.S. 1 North, Fort Pierce, FL 34946  
Tel: (772) 465-2400, Ext. 285 Fax: (772) 467-584

Date issued: November 9, 2006

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Palms MHP 6416 Tri-Annual  
Received: 10/17/06 13:31

[2127100]

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:  
E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,

  
Cindy Cromer  
Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

5800 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
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Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 11/9/06



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**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

**Quality Control Summary**

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Palms MHP 6416 Tri-Annual  
Received: 10/17/06 13:31

[2127100]

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

HBEL Sample

**Method Narratives (If Applicable)**

<u>Number</u>	<u>Sample ID</u>	<u>Analytical Method</u>	<u>Description</u>
2127100001	POE Grab	EPA 525.2	No MS/MSD analyzed in batch. Precision and Accuracy determined with LCS/LCSD
		EPA 548.1	No MS/MSD analyzed in batch. Precision and Accuracy determined with LCS/LCSD

**Quality Control Summary**

<u>Method</u>	<u>HBEL Batch</u>	<u>Analyte</u>	<u>Analytical Issue</u>
EPA 505	PEST4814		
2127100001	Decachlorobiphenyl		Surrogate - Outside acceptance Limits.

The above due to matrix effects.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

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FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 11/9/06



# HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.

5600 US 1 North, Fort Pierce, FL 34946  
 Phone: (772) 467-2400, Ext. 235 Fax: (772) 467-584

## CERTIFICATE OF ANALYSIS

[2127100]

Client: Aqua Utilities Florida, Inc.

Workorder ID: Palms MHP 6416 Tri-Annual

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID: 2127100001						Sampled: 10/17/06 9:20 Received: 10/17/06 13:31				
Sample ID: POE Grab						Matrix: Water Results reported on Wet Weight Basis				
Odor - Dechlorinated		1.0 U	T.O.N.	1.0	EPA 140.1	WCDE15263		10/17/06 13:45	PA	E83509
pH	Q	7.49	SU	0.200	EPA 150.1	WCGE26459		10/18/06 18:13	GS	E96080
Aluminum		0.0030 U	mg/L	0.0030	EPA 200.7	META8196		11/7/06 15:44	DM	E96080
Barium		0.0064	mg/L	0.0018	EPA 200.7	META8196		11/7/06 15:44	DM	E96080
Beryllium		0.00010 U	mg/L	0.00010	EPA 200.7	META8196		11/7/06 15:44	DM	E96080
Cadmium		0.00070 U	mg/L	0.00070	EPA 200.7	META8196		11/7/06 15:44	DM	E96080
Chromium		0.0018 U	mg/L	0.0018	EPA 200.7	META8196		11/7/06 15:44	DM	E96080
Copper		0.0019	mg/L	0.0014	EPA 200.7	META8196		11/7/06 15:44	DM	E96080
Iron		0.025 U	mg/L	0.025	EPA 200.7	META8196		11/7/06 15:44	DM	E96080
Manganese		0.0037 U	mg/L	0.0037	EPA 200.7	META8196		11/7/06 15:44	DM	E96080
Nickel		0.0020 U	mg/L	0.0020	EPA 200.7	META8196		11/7/06 15:44	DM	E96080
Silver		0.0010 U	mg/L	0.0010	EPA 200.7	META8196		11/7/06 15:44	DM	E96080
Sodium		18	mg/L	0.50	EPA 200.7	META8196		11/7/06 15:44	DM	E96080
Zinc		0.012	mg/L	0.010	EPA 200.7	META8196		11/7/06 15:44	DM	E96080
Antimony		0.0042 U	mg/L	0.0042	EPA 200.9	META8192		11/1/06 15:15	DM	E96080
Lead		0.00061 U	mg/L	0.00061	EPA 200.9	META8191		10/31/06 13:54	DM	E96080
Selenium		0.0022 U	mg/L	0.0022	EPA 200.9	META8186		10/26/06 17:34	DM	E96080
Thallium		0.0010 U	mg/L	0.0010	EPA 200.9	META8177		10/18/06 19:24	DM	E96080
Mercury		0.000060 U	mg/L	0.000060	EPA 245.1	META8184	10/23/06 10:30	10/23/06 16:40	DM	E96080
Chloride		30	mg/L	5.0	EPA 300.0	IC6988		10/19/06 23:03	JL	E96080
Fluoride		0.085	mg/L	0.011	EPA 300.0	IC6985		10/18/06 14:26	JL	E96080
Nitrate as N		0.85	mg/L	0.0030	EPA 300.0	IC6985		10/18/06 14:26	JL	E96080
Nitrite as N		0.0022 U	mg/L	0.0022	EPA 300.0	IC6985		10/18/06 14:26	JL	E96080
Sulfate		4.1	mg/L	1.4	EPA 300.0	IC6988		10/19/06 23:03	JL	E96080
1,2-Dibromo-3-chloropropane		0.0021 U	ug/L	0.0021	EPA 504.1	PEST4806	10/20/06 11:56	10/20/06 22:20	JL	E96080
1,2-Dibromoethane		0.0049 U	ug/L	0.0049	EPA 504.1	PEST4806	10/20/06 11:56	10/20/06 22:20	JL	E96080
Chlordane		0.13 U	ug/L	0.13	EPA 505	PEST4814	10/23/06 13:33	10/24/06 0:07	JL	E96080
Endrin		0.10 U	ug/L	0.10	EPA 505	PEST4814	10/23/06 13:33	10/24/06 0:07	JL	E96080
gamma-BHC (Lindane)		0.020 U	ug/L	0.020	EPA 505	PEST4814	10/23/06 13:33	10/24/06 0:07	JL	E96080
Heptachlor		0.035 U	ug/L	0.035	EPA 505	PEST4814	10/23/06 13:33	10/24/06 0:07	JL	E96080
Heptachlor epoxide		0.027 U	ug/L	0.027	EPA 505	PEST4814	10/23/06 13:33	10/24/06 0:07	JL	E96080
Methoxychlor		0.043 U	ug/L	0.043	EPA 505	PEST4814	10/23/06 13:33	10/24/06 0:07	JL	E96080
PCB		0.14 U	ug/L	0.14	EPA 505	PEST4814	10/23/06 13:33	10/24/06 0:07	JL	E96080
Toxaphene		0.59 U	ug/L	0.59	EPA 505	PEST4814	10/23/06 13:33	10/24/06 0:07	JL	E96080
2,4,5-TP		0.19 U	ug/L	0.19	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 22:12	JL	E96080
2,4-D		0.22 U	ug/L	0.22	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 22:12	JL	E96080
Dalapon		2.3 U	ug/L	2.3	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 22:12	JL	E96080
Dinoseb		0.23 U	ug/L	0.23	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 22:12	JL	E96080
Pentachlorophenol		0.39 U	ug/L	0.39	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 22:12	JL	E96080
cloram		0.23 U	ug/L	0.23	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 22:12	JL	E96080
1,1,1-Trichloroethane		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080

5600 US 1 North  
 Fort Pierce, FL 34946  
 FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
 Sanford, FL 32771  
 FDOH # E83509

307 Coolidge Avenue  
 Lehigh Acres, FL 33936  
 FDOH # E85370

16331 Cortez Blvd  
 Brooksville, FL 34601  
 FDOH # E84418



# HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.

5600 U.S. 1 North, Fort Pierce, FL 34946  
 Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

## CERTIFICATE OF ANALYSIS

[2127100]

Client: Aqua Utilities Florida, Inc.

Workorder ID: Palms MHP 6416 Tri-Annual

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
1,1,2-Trichloroethane		0.44 U	ug/L	0.44	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
1,1-Dichloroethene		0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
1,2,4-Trichlorobenzene		0.41 U	ug/L	0.41	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
1,2-Dichlorobenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
1,2-Dichloroethane		0.29 U	ug/L	0.29	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
1,2-Dichloropropane		0.40 U	ug/L	0.40	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
1,4-Dichlorobenzene		0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
Benzene		0.20 U	ug/L	0.20	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
Carbon tetrachloride		0.24 U	ug/L	0.24	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
Chlorobenzene		0.30 U	ug/L	0.30	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
cis-1,2-Dichloroethene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
Ethylbenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
Methylene chloride		0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
Styrene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
Tetrachloroethene		0.24 U	ug/L	0.24	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
Toluene		0.22 U	ug/L	0.22	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
Total Xylenes		0.46 U	ug/L	0.46	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
trans-1,2-Dichloroethene		0.35 U	ug/L	0.35	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
Trichloroethene		0.36 U	ug/L	0.36	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
Vinyl chloride		0.32 U	ug/L	0.32	EPA 524.2	VOC2715		10/25/06 4:53	WR	E96080
Alachlor		0.61 U	ug/L	0.61	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 7:38	WR	E96080
Atrazine		0.48 U	ug/L	0.48	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 7:38	WR	E96080
Benzo(a)pyrene		0.069 U	ug/L	0.069	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 7:38	WR	E96080
bis(2-ethylhexyl)phthalate		0.84 U	ug/L	0.84	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 7:38	WR	E96080
Di(2-ethylhexyl)adipate		0.68 U	ug/L	0.68	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 7:38	WR	E96080
Hexachlorobenzene		0.30 U	ug/L	0.30	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 7:38	WR	E96080
Hexachlorocyclopentadiene		0.23 U	ug/L	0.23	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 7:38	WR	E96080
Simazine		0.63 U	ug/L	0.63	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 7:38	WR	E96080
Carbofuran		0.18 U	ug/L	0.18	EPA 531.1	HPLC2343		10/25/06 20:21	JJM	E96080
Oxamyl		0.41 U	ug/L	0.41	EPA 531.1	HPLC2343		10/25/06 20:21	JJM	E96080
Glyphosate		29 U	ug/L	29	EPA 547	HPLC2344		10/23/06 15:12	JJM	E96080
Endothal		2.8 U	ug/L	2.8	EPA 548.1	SVOC2449	10/23/06 9:43	10/24/06 1:24	WR	E96080
Diquat		1.9 U	ug/L	1.9	EPA 549.2	HPLC2346	10/23/06 9:44	10/31/06 13:03	JJM	E96080
Arsenic		0.0010 U	mg/L	0.0010	SM 3113 B	SAL1835		11/7/06 17:10	SAL	E84129
Color		4.0	CU	1.8	SM2120 B	WCGE26453		10/18/06 15:20	TCL	E96080
Total Dissolved Solids		240	mg/L	16	SM2540 C	WCGE26470		10/19/06 22:00	EE	E96080
Cyanide		0.0047 U	mg/L	0.0047	SM4500CN E	WCGE26524	10/24/06 12:15	10/25/06 15:32	GG	E96080
Surfactants as LAS, Mol.wt.340		0.022 U	mg/L	0.022	SM5540 C	WCGE26461	10/18/06 14:30	10/19/06 9:09	GG	E96080

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 FDOH # E85370

16331 Cortez Blvd  
 Brooksville, FL 34601  
 FDOH # E84418



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Page 4 of 6

# HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.

500 US 1 North, Fort Pierce, FL 34946  
 Phone: (772) 465-2400, Ext. 235 Fax: (772) 467-584

## CERTIFICATE OF ANALYSIS

[2127100]

Client: Aqua Utilities Florida, Inc.

Workorder ID: Palms MHP 6416 Tri-Annual

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID: 2127100002						Sampled: 10/17/06 13:31				
Sample ID: TRIP BLANK						Matrix: Water				
Results reported on Wet Weight Basis										
1,1,1-Trichloroethane	0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
1,1,2-Trichloroethane	0.44 U	ug/L	0.44	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
1,1-Dichloroethene	0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
1,2,4-Trichlorobenzene	0.41 U	ug/L	0.41	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
1,2-Dichlorobenzene	0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
1,2-Dichloroethane	0.29 U	ug/L	0.29	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
1,2-Dichloropropane	0.40 U	ug/L	0.40	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
1,4-Dichlorobenzene	0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
Benzene	0.20 U	ug/L	0.20	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
Carbon tetrachloride	0.24 U	ug/L	0.24	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
Chlorobenzene	0.30 U	ug/L	0.30	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
cis-1,2-Dichloroethene	0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
Ethylbenzene	0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
Methylene chloride	0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
Styrene	0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
Tetrachloroethene	0.24 U	ug/L	0.24	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
Toluene	0.22 U	ug/L	0.22	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
Total Xylenes	0.46 U	ug/L	0.46	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
trans-1,2-Dichloroethene	0.35 U	ug/L	0.35	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
Trichloroethene	0.36 U	ug/L	0.36	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	
Vinyl chloride	0.32 U	ug/L	0.32	EPA 524.2	VOC2715		10/25/06 5:27	WR	E96080	

Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
 Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.  
 Q Sample held beyond the accepted holding time.

5600 US 1 North  
 Fort Pierce, FL 34946  
 FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
 Sanford, FL 32771  
 FDOH # E83509

307 Coolidge Avenue  
 Lakeland, FL 33936  
 FDOH # E85370

16331 Cortez Blvd  
 Brooksville, FL 34601  
 FDOH # E84418

Printed: 11/9/06



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

Date issued: October 9, 2006

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Palms MHP 6416 THM/HAA5  
Received: 9/14/06 13:20

[2126805]

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:  
E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,



Cindy Cromer  
Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 10/9/06



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 467-2400, Ext. 255 Fax: (772) 467-584

**Quality Control Summary**

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Palms MHP 6416 THM/HAA5  
Received: 9/14/06 13:20

[2126805]

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

<u>HBEL Sample</u>		<b>Method Narratives (if Applicable)</b>	
<u>Number</u>	<u>Sample ID</u>	<u>Analytical Method</u>	<u>Description</u>

**Quality Control Summary**

<u>Method</u>	<u>HBEL Batch</u>	<u>Analyte</u>	<u>Analytical Issue</u>
---------------	-------------------	----------------	-------------------------

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080  
Printed: 10/9/06

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509



307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

**HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
 Phone: (772) 465-2400, Ext. 255 Fax: (772) 467-584

**CERTIFICATE OF ANALYSIS**

[2126805]

Client: Aqua Utilities Florida, Inc.

Workorder ID: Palms MHP 6416 THM/HAA5

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID: 2126805001					Sampled: 09/13/06 10:25 Received: 09/14/06 13:20					
Sample ID: 5617 Palm Way MRT Loc. Grab					Matrix: Water Results reported on Wet Weight Basis					
Bromodichloromethane		7.7	ug/L	0.25	EPA 524.2	VOC2697		09/26/06 18:02	WR	E96080
Bromoform		0.41 U	ug/L	0.41	EPA 524.2	VOC2697		09/26/06 18:02	WR	E96080
Chloroform		12	ug/L	0.25	EPA 524.2	VOC2697		09/26/06 18:02	WR	E96080
Dibromochloromethane		3.8	ug/L	0.30	EPA 524.2	VOC2697		09/26/06 18:02	WR	E96080
Total THMs		24	ug/L	0.50	EPA 524.2	VOC2697		09/26/06 18:02	WR	E96080
Laboratory ID: 2126805002					Sampled: Received: 09/14/06 13:20					
Sample ID: Trip Blank					Matrix: Water Results reported on Wet Weight Basis					
Bromodichloromethane		0.25 U	ug/L	0.25	EPA 524.2	VOC2697		09/26/06 18:35	WR	E96080
Bromoform		0.41 U	ug/L	0.41	EPA 524.2	VOC2697		09/26/06 18:35	WR	E96080
Chloroform		0.25 U	ug/L	0.25	EPA 524.2	VOC2697		09/26/06 18:35	WR	E96080
Dibromochloromethane		0.30 U	ug/L	0.30	EPA 524.2	VOC2697		09/26/06 18:35	WR	E96080
Total THMs		0.50 U	ug/L	0.50	EPA 524.2	VOC2697		09/26/06 18:35	WR	E96080

Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
 Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.

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 Lehigh Acres, FL 33936  
 FDOH # E85370

16331 Cortez Blvd  
 Brooksville, FL 34601  
 FDOH # E84418

Printed: 10/9/06





**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

Date issued: March 20, 2006

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

---

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Palms MHP 6416 NO2/NO3 [2125119]  
Received: 3/16/06 13:45

---

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:  
E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,



Cindy Cromer  
Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

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FDOH # E96080

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Sanford, FL 32771  
FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

2514 Osawaw Boulevard  
Spring Hill, FL 34607  
FDOH # E84418

Printed: 3/20/06



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 205 Fax: (772) 467-584

**Quality Control Summary**

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Palms MHP 6416 NO2/NO3  
Received: 3/16/06 13:45

[2125119]

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

HBEL Sample

**Method Narratives (If Applicable)**

<u>Number</u>	<u>Sample ID</u>	<u>Analytical Method</u>	<u>Description</u>
---------------	------------------	--------------------------	--------------------

**Quality Control Summary**

<u>Method</u>	<u>HBEL Batch</u>	<u>Analyte</u>	<u>Analytical Issue</u>
---------------	-------------------	----------------	-------------------------

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

2514 Osawaw Boulevard  
Spring Hill, FL 34607  
FDOH # E84418

Printed: 3/20/06



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-1584

**CERTIFICATE OF ANALYSIS**

[2125119]

Client: Aqua Utilities Florida, Inc.

Workorder ID: Palms MHP 6416 NO2/NO3

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID:		2125119001		Sampled: 03/15/06 15:55		Received: 03/16/06 13:45				
Sample ID:		POE Grab		Matrix: Water		Results reported on Wet Weight Basis				
Nitrate as N		0.84	mg/L	0.0030	EPA 300.0	IC6725		03/17/06 14:39	RS	E96080
Nitrite as N		0.0022 U	mg/L	0.0022	EPA 300.0	IC6725		03/17/06 14:39	RS	E96080

<sup>1</sup>Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.

5600 US 1 North  
Fort Pierce, FL 34946  
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4155 St. Johns Pkwy Suite 1300  
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Lehigh Acres, FL 33936  
FDOH # E85370

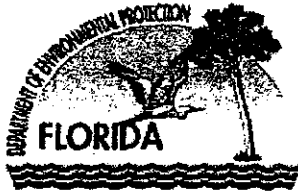
2514 Osawaw Boulevard  
Spring Hill, FL 34607  
FDOH # E84418



Printed: 3/20/06

Page 3 of 4

**CORRESPONDENCE**



# Florida Department of Environmental Protection

Central District  
3319 Maguire Boulevard, Suite 232  
Orlando, Florida 32803-3767

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

VIA EMAIL  
[JMLIHVARCIK@AQUAAMERICA.COM]

June 29, 2007

Jack Lihvarcik, President  
Aqua Utilities Florida, Inc.  
1100 Thomas Avenue  
Leesburg, FL 34748

OCD-PW-SS-07-0817

<u>Lake County - PW</u>	<u>PWS ID Number</u>
Friendly Center Subdivision	3350426
East Lake Harris Estates	3350322
Stone Mountain Estates	3351282
Palm Mobile Home Estates	3350981
Piney Woods Subdivision (2 WTPs)	3351021
Hobby Hill Subdivision	3350544
Picciola Island Subdivision	3351009
Carlton Village	3350152

Dear Mr. Lihvarcik:

This confirms a visit to the subject community public water systems on April 18, 2007, by Danielle Owens to conduct sanitary survey inspections. Copies of the sanitary survey inspection reports are enclosed for your reference and records.

Deficiencies found during the sanitary surveys and in Department records are listed in the enclosed reports. These deficiencies shall be corrected in order to return to compliance with *Florida Administrative Code* (F.A.C.) Rules 62-550, 62-555, 62-560 and 62-602.

Please correct the indicated deficiencies, and notify the Department in writing that the deficiencies have been corrected, **no later than August 6, 2007**. (You may use the attached response form to indicate the corrective actions taken.)

If you have any questions, please contact Danielle Owens by email at [Danielle.D.Owens@dep.state.fl.us](mailto:Danielle.D.Owens@dep.state.fl.us) or by phone at (407) 894-7555, extension 2216.

Sincerely,

Kim Dodson, Environmental Manager  
Drinking Water Compliance and Enforcement

KMD/ddo  
Enclosures

cc: Patrick Farris, Aqua Utilities Florida, Inc. [PAFarris@aquaaamerica.com]  
Danielle Owens, FDEP Drinking Water Compliance

DOCUMENT NUMBER - 04312

04312 MAY 22 08

FPSC-COMMISSION CLERK

State of Florida  
Department of Environmental Protection  
Central District

## SANITARY SURVEY REPORT

Plant Name PALM MOBILE HOME ESTATES County          Lake          PWS ID # 3350981  
 Plant Location 24702 Plumosa Drive, Leesburg, FL 34748 Phone (352) 435-4028  
 Owner Name Aqua Utilities Florida, Inc. Phone (352) 435-4028  
 Owner Address 1100 Thomas Ave., Leesburg, FL 34748  
 Contact Person Patrick Farris Title Environmental Compliance Specialist Phone (352) 435-4029  
 This Survey Date 04/18/07 Last Survey Date 04/29/04 Last C.I. Date 06/06/00

**PWS TYPE & CLASS**

- Community (3C)
- Non-transient Non-community
- Non-Community

**PWS STATUS**

- Approved system with approval number & date  
HRS #2380, 4/7/61, WC35-4940, 6/5/61  
WC35-210288, 4/8/92
- Unapproved system

**SERVICE AREA CHARACTERISTICS**

Subdivision           
Mobile Home Park  
 Food Service:  Yes  No  N/A

**OPERATION & MAINTENANCE**

Certified Operator:  Yes  No  Not required  
 Operator(s) & Certification Class-Number  
Will Fontaine C-6813 Lead/Chief Operator  
See MOR for complete list of operators

O & M Log:  Yes  No  Not required

Operator Visitation Frequency  

Hrs/day: Required	Visit	Actual	Visit
Days/wk: Required	5 + 1	Actual	5 + 1

 Non-consecutive Days?  Yes  No  N/A  
 MORs submitted regularly?  Yes  No  N/A  
 Data missing from MORs?  No  Yes  N/A  
Will Fontaine C-6813 Lead/Chief Operator  
See MOR for complete list of operators

Number of Service Connections 63  
 Population Served 158 Basis Operator  
 Average Day (from MORs) 17,141 gpd  
 Max. Day (from MORs) 65,800 gpd 08/06  
 Max-day Design Capacity 93,600 gpd

**WRITTEN PROGRAMS**

O & M Manual Yes Located Water treatment plant  
 Written Preventive Maintenance Program Yes  
 Flushing Plan  Yes  No Records No  
 Valve Maintenance Plan  Yes  No Records No  
 Emergency Response Plan  Yes  No  N/A  
 Comments         

**RAW WATER SOURCE**

- GROUND; Number of Wells 1
- SURFACE/UDI; Source
- PURCHASED from PWS ID #
- Emergency Water Source           
 Emergency Water Capacity

**AUXILIARY POWER SOURCE**

Yes  None  Not Required  
 Source           
 Capacity of Standby (kW)           
 Switchover:  Automatic  Manual  
 Standby Plan:  Yes  No  
 Hrs Operated Under Load           
 What equipment does it operate?  
 Well pumps           
 High Service Pumps           
 Treatment Equipment           
 Satisfy 1/2 max-day demand?  Yes  No  Unk  
 Comments         

**TREATMENT PROCESSES IN USE**

Disinfection           
 Iron removal           
 What additional treatment is needed?  
None at this time  
 For control of what deficiencies?  
N/A

**DISTRIBUTION SYSTEM**

Flow Measuring Device Flow Meter  
 Meter Size & Type 4" Water Specialties  
 Backflow Prevention Devices:  Yes  No  
 Cross-Connections None observed  
 Disinfectant/Disinfection Byproduct Rule Monitoring  
 Plan:  Yes  No  N/A  
 Distribution System Map  Yes  No  N/A  
 Cross-connection Control Program:  
Implementation started April 2007.  
 Comments Flow meter last calibrated 03/22/05 by  
Central Florida Controls, Inc.

**GROUND WATER SOURCE**

Well Number (FLUWID No.)	1 (AAC3255)			
Year Drilled	1961			
Depth Drilled	340'			
Drilling Method	Unknown			
Type of Grout	Unknown			
Static Water Level	Unknown			
Pumping Water Level	Unknown			
Design Well Yield	Unknown			
Test Yield	Unknown			
Actual Yield (if different than rated capacity)	Unknown			
Strainer	Unknown			
Length (outside casing)	Unknown			
Diameter (outside casing)	8"			
Material (outside casing)	Black steel			
Well Contamination History	None			
Is inundation of well possible?	No			
6' X 6' X 4" Concrete Pad	Yes			
SET BACKS	Septic Tank	> 100'		
	Reuse Water	N/A		
	WW Plumbing	> 100'		
	Other Sanitary Hazard	None observed		
PUMP	Type	Submersible		
	Manufacturer Name	Franklin		
	Model Number	2366069020		
	Rated Capacity (gpm)	130		
	Motor Horsepower	15		
Well casing 12" above grade?	Yes			
Well Casing Sanitary Seal	Ok			
Raw Water Sampling Tap	Yes			
Above Ground Check Valve	Yes			
Fence/Housing	Housing			
Well Vent Protection	Yes			

**COMMENTS:** Provide information for all items marked "unknown."

**CHLORINATION (Disinfection)**

Type:  Gas  Hypo  
 Make Stenner (2 pumps) Capacity      • gpd  
 Chlorine Feed Rate 3.8 stroke (both cl2 pumps)  
 Avg. Amount of Cl<sub>2</sub> gas used N/A  
 Chlorine Residuals: Plant 0.61 Remote 0.36  
 Remote tap location 24616 Palmetto Ave  
 DPD Test Kit:  On-site  With operator  
 None  Not Used Daily  
 Injection Points: Prior to hydropneumatic tank  
 Booster Pump Info       
 Comments: Two Stenner hypochlorinator pumps:  
#1 - 40 gpd, #2 - 17 gpd

Chlorine Gas Use Requirements	YES	NO	Comments
Dual System	<input type="checkbox"/>	<input type="checkbox"/>	
Auto-switchover	<input type="checkbox"/>	<input type="checkbox"/>	
Alarms:			
Loss of Cl <sub>2</sub> capability	<input type="checkbox"/>	<input type="checkbox"/>	
Loss of Cl <sub>2</sub> residual	<input type="checkbox"/>	<input type="checkbox"/>	
Cl <sub>2</sub> leak detection	<input type="checkbox"/>	<input type="checkbox"/>	
Scale	<input type="checkbox"/>	<input type="checkbox"/>	
Chained Cylinders	<input type="checkbox"/>	<input type="checkbox"/>	
Reserve Supply	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate Air-pak	<input type="checkbox"/>	<input type="checkbox"/>	
Sign of Leaks	<input type="checkbox"/>	<input type="checkbox"/>	
Fresh Ammonia	<input type="checkbox"/>	<input type="checkbox"/>	
Ventilation	<input type="checkbox"/>	<input type="checkbox"/>	
Room Lighting	<input type="checkbox"/>	<input type="checkbox"/>	
Warning Signs	<input type="checkbox"/>	<input type="checkbox"/>	
Repair Kits	<input type="checkbox"/>	<input type="checkbox"/>	
Fitted Wrench	<input type="checkbox"/>	<input type="checkbox"/>	
Housing/Protection	<input type="checkbox"/>	<input type="checkbox"/>	

**AERATION (Gases, Fe, & Mn Removal)**  
 Type      Capacity       
 Aerator Condition       
 Bloodworm Presence       
 Visible Algae Growth       
 Protective Screen Condition       
 Comments     

**STORAGE FACILITIES**

(G) Ground (H) Hydropneumatic (E) Elevated  
 (B) Bladder (C) Clearwell

Tank Type/Number	H/1		
Capacity (gal)	1,500		
Material	Steel		
Gravity Drain	Yes		
By-pass Piping	Yes		
Pressure Gauge	Yes		
Sight Glass or Level Indicator	Yes		
Fittings for Sight Glass	Yes		
Protected Openings	Yes		
PRV/ARV	Both		
On/Off Pressure	40/60		
Access Padlocked	Yes		
Height to Bottom of Elevated Tank	N/A		
Height to Max. Water Level	N/A		

Comments Provide documentation of last cleaning and inspection of finished water storage tanks.

**HIGH SERVICE PUMPS**

Pump Number			
Type			
Make			
Model			
Capacity (gpm)			
Motor HP			
Date Installed			
Maintenance			

Comments



## **DEFICIENCIES:**

1. **Failure to adequately establish and implement a cross-connection control program.** Implementation of the program was not started until April 2007. Currently, commercial customers are being surveyed, and residential customers should be surveyed by December 31, 2007.

Community water systems, and all public water systems that have service areas also served by reclaimed water systems regulated under Part III of Chapter 62-610, F.A.C., shall establish and implement a routine cross-connection control program to detect and control cross-connections and prevent backflow of contaminants into the water system. This program shall include a written plan that is developed using recommended practices of the American Water Works Association set forth in *Recommended Practice for Backflow Prevention and Cross-Connection Control*, AWWA Manual M14, as incorporated into Rule 62-555.330, F.A.C. [Rule 62-555.360(2), F.A.C.]

Upon discovery of a prohibited cross-connection, public water systems shall either eliminate the cross-connection by installation of an appropriate backflow prevention device acceptable to the Department or shall discontinue service until the contaminant source is eliminated. [Rule 62-555.360(3), F.A.C.]

2. **Failure to keep records documenting that isolation valves are being exercised.**

Suppliers of water shall keep records documenting that their isolation valves are being exercised in accordance with subsection 62-555.350(2), F.A.C. [Rule 62-555.350(12)(c), F.A.C.]

3. **Failure to keep records documenting that dead-end water mains are being flushed.**

Suppliers of water shall keep records documenting that their water mains conveying finished drinking water are being flushed in accordance with subsection 62-555.350(2), F.A.C. [Rule 62-555.350(12)(c), F.A.C.]

## **COMMENTS/REMINDERS:**

- **Lead and copper tap sampling must be conducted during the June-September 2008 monitoring period.**
- **Based on information provided to the Department by email on April 19, 2007, the population served and number of service connections for this system has been changed.** These changes may affect this systems monitoring requirements.

For chemical monitoring requirements, you are advised to call Marie Carrasquillo at (407) 894-7555, extension 2242, or Paul Morrison at (407) 893-3988.

All results must be submitted to DEP within the first 10 days following the end of the required monitoring period or the first 10 days following the month in which the sample results were received, whichever time is the shortest. A Florida Department of Health (DOH) certified laboratory must analyze all laboratory samples.

- **Provide documentation of last cleaning and inspection for finished water storage tanks.**

Accumulated sludge and bio-growths shall be cleaned routinely (i.e., at least annually) from all treatment facilities that are in contact with raw, partially treated, or finished drinking water and that are not specifically designed to collect sludge or support a bio-growth; and blistering, chipped, or cracked coatings and linings on treatment or storage facilities in contact with raw, partially treated, or finished drinking water shall be rehabilitated or repaired. [Rule 62-555.350(2), F.A.C.]

Finished-drinking-water storage tanks, including conventional hydropneumatic tanks with an access manhole but excluding bladder- or diaphragm-type hydropneumatic tanks without an access manhole, shall be checked at least annually to ensure that hatches are closed and screens are in place; shall be cleaned at least once every five years to remove biogrowths, calcium or iron/manganese deposits, and sludge from inside the tanks; and shall be inspected for structural and coating integrity at least once every five years by personnel under the responsible charge of a professional engineer licensed in Florida. [Rule 62-555.350(2), F.A.C.]

Ensure proper disinfection and bacteriological evaluation of public water system components in accordance with 62-555.340, F.A.C. Also, ensure proper disposal of heavily chlorinated water from the tank disinfection process.

PWS ID # 3350981  
Date 04/18/07

**COMMENTS/REMINDERS (continued):**

- Provide information for all items marked "unknown."

Inspector *Donald D. Owens* Title Environmental Specialist I Date 06/21/07

Approved by *Kim Dutton* Title Environmental Manager Date 6/29/07

**AQUA**  
Utilities Florida.

Aqua Utilities Florida, Inc.  
1100 Thomas Avenue  
Leesburg, FL 34748

T: 352.787.0990  
F: 352.787.6333  
www.aquautilitiesflorida.com

August 10, 2007

Danielle Owens  
Environmental Specialist  
FDEP Central District  
3319 Maguire Blvd., Suite 232  
Orlando, FL 32803-3767

**RE: Reply to Lake County Sanitary Surveys**

Dear Ms. Owens:

Thank you for your inspection on April 18, 2007. The purpose of the correspondence is to provide a written response as requested in your letter.

**For All Systems:**

1. *Failure to adequately establish and implement a cross-connection control program.*

**Response:**

Kim Dodson came to our office on June 28, 2007, and completed a very thorough evaluation of Aqua's Cross Connection Control Policy and our records. Although there is room for improvement, overall she seemed pleased with the progress since your inspection. Aqua will continue to develop this policy and implement it as necessary.

2. *Failure to keep records documenting that isolation valves are being exercised.*

**Response:**

Aqua is looking at software for tracking this statewide which will make our records more organized. Our staff will work on becoming more diligent in making records of the work that they do.

3. *Failure to keep records documenting that dead-end water mains are being flushed.*

**Response:**

Records of flushing are kept on the monthly log sheets are kept at the plant and then at the end of each month, these sheets are brought back to the Leesburg office to be entered on the MORs. These sheets include flushing, main breaks, and fire usage. The month of April

sheet was at each plant during your inspection on the clipboard kept near the operator's logbook. A copy of April 2007's sheets for each facility are attached for your review.

**Friendly Center PWS 3350426:**

1. *Failure to describe emergency or abnormal operating conditions and all maintenance or repair work that involves taking out of operation public water system components.*

**Response:**

Friendly Center is interconnected with East Lake Harris. There were no emergency or abnormal events during the time frame specified in the inspection. There are times when East Lake Harris treatment plant provides the water for both systems. There are also times when Friendly Center pumps more and the East Lake Harris flows are down.

**Hobby Hill Subdivision PWS 3350544:**

1. *Failure to maintain public water systems components. The hydropneumatic tank is showing signs of corrosion.*

**Response:**

The hydropneumatic tank is scheduled to be cleaned and painted. Aqua is in the process of hiring a contractor to inspect all tanks statewide for structural integrity. Copies of these inspections will be forwarded to DEP upon completion.

**Piney Woods Subdivision – 2 WTPs PWS 3351021**

1. *Failure to maintain a separate operation and maintenance log for each water treatment plant. There is only one operation and maintenance logbook for both plants.*

**Response:**

Separate log books for each plant will be maintained from now on.

2. *Failure to provide an operation and maintenance manual for each water treatment plant. There is only one operation and maintenance manual for both plants.*

**Response:**

Separate O+M manuals will be created and maintained for each plant.

If you have any questions, please contact me at (352) 435-4029 or by e-mail at [PAFarris@aquaaamerica.com](mailto:PAFarris@aquaaamerica.com). Thank you.

Sincerely,

*Patrick Farris*

Patrick A. Farris  
Environmental Compliance Specialist  
Aqua Utilities Florida, Inc.

Enclosure: April 2007 Flushing Records

cc: Will Fontaine, via e-mail  
Brain Heath, via e-mail  
Michael O'Reilly, via e-mail



















**2007 MOR**

**PICCIOLA ISLAND**

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** January, 2007

**A. Public Water System (PWS) Information**


PWS Name:	Picciola Island			PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	145			Total Population Served at End of Month:	508
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Picciola Island			Plant Telephone Number:	352-787-0980	
Plant Address:	5133 Albert Road			City:	Leesburg	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	D	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator	Will Fontaine	C	6813	Days 1st Shift		
Other Operator	John Worrell	C	6597	Days 1st Shift		
	Marty Neal	C	10027	Days 1st Shift		

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

 2-9-07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

DOCUMENT NUMBER-DATE  
 04312 MAY 22 08  
 FPSC-COMMISSION CLERK

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: January, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place X's)	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repairs or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, min/L	Temp of Water, °C	Temp of Water, °F (if Applicable)	Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm	Minimum UV Dose Required, mW-sec/cm	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24.0	32,970		1.2										0.9	
2	X	24.0	34,600		1.2										0.9	
3	X	24.0	30,700		1.1										0.7	
4	X	24.0	38,300		1.1										0.8	
5	X	24.0	40,100		1.1										0.7	
6		24.0	32,633													
7		24.0	32,633													
8	X	24.0	32,633		1.0										0.7	
9	X	24.0	34,900		1.2										0.9	
10	X	24.0	25,900		1.1										0.9	
11	X	24.0	39,300		1.1										0.8	
12	X	24.0	34,400		1.1										0.8	
13		24.0	33,500													
14		24.0	33,500													
15	X	24.0	33,500		1.2										0.9	
16	X	24.0	36,900		1.1										0.9	
17	X	24.0	28,900		1.1										0.8	
18	X	24.0	42,600		1.2										0.8	
19	X	24.0	27,700		1.2										0.9	
20		24.0	42,800													
21		24.0	42,800													
22	X	24.0	42,800		1.4										0.9	
23	X	24.0	30,300		1.3										0.9	
24	X	24.0	35,900		1.3										0.8	
25	X	24.0	36,400		1.3										0.8	
26	X	24.0	29,300		1.3										0.9	
27		24.0	33,167													
28		24.0	33,167													
29	X	24.0	33,167		1.3										0.9	
30	X	24.0	45,100		1.3										1.0	
31	X	24.0	19,600		1.3										1.0	
Total			1,070,170													
Average			34,522													
Maximum			45,100													

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



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** February, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island	PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	145	Total Population Served at End of Month:	508
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com		

**B. Water Treatment Plant Information**

Plant Name:	Picciola Island	Plant Telephone Number:	352-787-0980
Plant Address:	5133 Albert Road	City:	Leesburg
		State:	Florida
		Zip Code:	34731
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine 3-8-07  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: February, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Minimum CT Required, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>				
1	X	24.0	41,200		1.3										1.0	
2	X	24.0	24,400		1.3										1.0	
3		24.0	38,033													
4		24.0	38,033													
5	X	24.0	38,033		1.4										1.0	
6	X	24.0	31,000		1.3										1.0	
7	X	24.0	30,700		1.3										1.0	
8	X	24.0	37,900		1.3										1.1	
9	X	24.0	30,100		1.4										1.1	
10		24.0	38,233													
11		24.0	38,233													
12	X	24.0	38,233		1.3										1.0	
13	X	24.0	30,900		1.3										1.1	
14	X	24.0	29,860		1.2										0.9	
15	X	24.0	39,800		1.2										0.9	
16	X	24.0	24,600		1.2										0.9	
17		24.0	34,867													
18		24.0	34,867													
19	X	24.0	34,867		1.2										0.9	
20	X	24.0	31,400		1.2										0.9	
21	X	24.0	36,000		1.0										0.8	
22	X	24.0	49,900		1.0										0.7	
23	X	24.0	35,100		1.1										0.7	
24		24.0	36,433													
25		24.0	36,433													
26	X	24.0	36,433		1.1										0.8	
27	X	24.0	25,900		1.0										0.7	
28	X	24.0	30,300		1.3										0.9	
29		24.0														
30		24.0														
31		24.0														
Total			971,760													
Average			31,347													
Maximum			49,900													

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



**MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: March, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	39,200		1.4									1.1	
2	X	24.0	34,900		1.3									1.0	
3		24.0	31,567												
4		24.0	31,567												
5	X	24.0	31,567		1.4									1.1	
6	X	24.0	40,000		1.4									1.1	
7	X	24.0	25,400		1.4									1.1	
8	X	24.0	49,600		1.4									1.0	
9	X	24.0	28,100		1.5									1.2	
10		24.0	50,633												
11		24.0	50,633												
12	X	24.0	50,633		1.4									1.1	
13	X	24.0	42,400		1.4									1.1	
14	X	24.0	39,200		1.7									1.3	
15	X	24.0	40,800		1.3									1.1	
16	X	24.0	54,600		1.2									0.9	
17		24.0	30,767												
18		24.0	30,767												
19	X	24.0	30,767		1.4									1.1	
20	X	24.0	34,300		1.6									1.2	
21	X	24.0	37,000		1.5									1.2	
22	X	24.0	45,500		1.4									1.1	
23	X	24.0	32,400		1.4									1.1	
24		24.0	48,133												
25		24.0	48,133												
26	X	24.0	48,133		1.4									1.0	
27	X	24.0	54,100		1.4									1.1	
28	X	24.0	50,900		1.6									1.3	
29	X	24.0	59,000		1.3									1.1	
30	X	24.0	54,700		1.2									0.9	
31		24.0	59,530												
Total			1,304,930												
Average			42,095												
Maximum			59,530												

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** April, 2007

**A. Public Water System (PWS) Information**

PWS Name: Picciola Island	PWS Identification Number: 3351009
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 151	Total Population Served at End of Month: 529
PWS Owner: Aqua Utilities Florida	
Contact Person: Brian Heath	Contact Person's Title: Area Manager
Contact Person's Mailing Address: PO Box 490310	City: Leesburg State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980	Contact Person's Fax Number: (352) 787-6333
Contact Person's E-Mail Address: beheath@aduuaamerica.com	

**B. Water Treatment Plant Information**

Plant Name: Picciola Island	Plant Telephone Number: 352-787-0980			
Plant Address: 5133 Albert Road	City: Leesburg State: Florida Zip Code: 34731			
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 198,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V	Plant Class (per subsection 62-699.310(4), F.A.C.): D			
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s)/Shift(s) Worked</b>
Lead/Chief Operators	Will Fontaine	C	6813	Days 1st Shift
Other Operators	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

*Will Fontaine* 5-4-07  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number



**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** May, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island	PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	151	Total Population Served at End of Month:	529
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com		

**B. Water Treatment Plant Information**

Plant Name:	Picciola Island	Plant Telephone Number:	352-787-0980
Plant Address:	5133 Albert Road	City:	Leesburg
		State:	Florida
		Zip Code:	34731
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

*Will Fontaine* 6-8-07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

**III. Daily Data for the Month/Year of:** May, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>			Minimum UV Dose Required, mW-sec/cm <sup>2</sup>
1	X	24.0	77,900		1.1								0.9	
2	X	24.0	58,400		1.0								0.7	
3	X	24.0	61,400		1.0								0.8	
4	X	24.0	35,700		1.0								0.7	
5		24.0	50,833											
6		24.0	50,833											
7	X	24.0	50,833		1.0								0.7	
8	X	24.0	42,600		1.0								0.9	
9	X	24.0	68,040		1.1								0.8	
10	X	24.0	52,400		1.0								0.7	
11	X	24.0	39,300		1.0								0.7	
12		24.0	42,367											
13		24.0	42,367											
14	X	24.0	42,367		1.0								0.8	
15	X	24.0	29,300		1.0								0.7	
16	X	24.0	35,200		1.0								0.8	
17	X	24.0	49,400		1.0								0.7	
18	X	24.0	28,100		0.9								0.7	
19		24.0	50,633											
20		24.0	50,633											
21	X	24.0	50,633		1.2								0.9	
22	X	24.0	35,500		1.2								0.9	
23	X	24.0	45,700		1.3								1.1	
24	X	24.0	48,200		1.1								0.9	
25	X	24.0	42,100		1.1								0.8	
26		24.0	47,400											
27		24.0	47,400											
28	X	24.0	47,400		1.0								0.8	
29	X	24.0	49,100		1.1								0.9	
30	X	24.0	55,400		1.0								0.9	
31	X	24.0	57,200		1.3								1.0	
Total			1,484,640											
Average			47,892											
Maximum			77,900											

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



**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** June, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island	PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	151	Total Population Served at End of Month:	529
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com		

**B. Water Treatment Plant Information**

Plant Name:	Picciola Island	Plant Telephone Number:	352-787-0980
Plant Address:	5133 Albert Road	City:	Leesburg
		State:	Florida
		Zip Code:	34731
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Licensed Operators:	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

7-6-07   
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciofa Island

III. Daily Data for the Month/Year of: June, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	42,400		1.2										1.0
2		24.0	30,800												
3		24.0	30,800												
4	X	24.0	30,800		1.6										1.4
5	X	24.0	32,800		1.3										1.1
6	X	24.0	35,000		1.0										0.8
7	X	24.0	37,900		1.0										0.8
8	X	24.0	39,420		1.3										1.0
9		24.0	48,233												
10		24.0	48,233												
11	X	24.0	48,233		1.4										1.2
12	X	24.0	41,000		1.3										0.9
13	X	24.0	23,700		1.4										1.3
14	X	24.0	59,300		1.4										1.2
15	X	24.0	37,200		1.4										1.2
16		24.0	51,567												
17		24.0	51,567												
18	X	24.0	51,567		1.4										1.3
19	X	24.0	54,400		1.2										1.0
20	X	24.0	35,100		1.2										1.0
21	X	24.0	37,800		1.0										0.9
22	X	24.0	36,900		1.8										1.7
23		24.0	57,400												
24		24.0	57,400												
25	X	24.0	57,400		1.0										0.8
26	X	24.0	38,800		1.0										0.8
27	X	24.0	51,300		1.3										1.1
28	X	24.0	50,000		1.5										1.1
29	X	24.0	31,100		1.6										1.2
30		24.0	48,670												
31		24.0													
Total			1,296,790												
Average			41,832												
Maximum			59,300												

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



OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** July, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island			PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community		
Number of Service Connections at End of Month:	151			<input type="checkbox"/> Consecutive	
PWS Owner:	Aqua Utilities Florida			Total Population Served at End of Month:	529
Contact Person:	Brian Heath				
Contact Person's Mailing Address:	PO Box 490310		Contact Person's Title:	Area Manager	
Contact Person's Telephone Number:	(352) 787-0980	City:	Leesburg	State:	Florida
Contact Person's E-Mail Address:	beheath@aquaaamerica.com			Zip Code:	34749
			Contact Person's Fax Number:	(352) 787-6333	

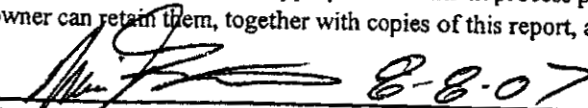
**B. Water Treatment Plant Information**

Plant Name:	Picciola Island			Plant Telephone Number:	352-787-0980
Plant Address:	5133 Albert Road			City:	Leesburg
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water	State:	Florida	
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000			Zip Code:	34731
Plant Category (per subsection 62-699.310(4), F.A.C.):	V				

Licensed Operators	Name	License Class	License Number	Plant Class (per subsection 62-699.310(4), F.A.C.):	Day(s) / Shift(s) Worked
Lead/Chief Operator	Will Fontaine			D	
Other Operators	John Worrell	C	6813		Days 1st Shift
	Marty Neal	C	6597		Days 1st Shift
			10027		Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to the NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

  
 Signature and Date 8-8-07

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: July, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Started or Missed by Operator (Place X)	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	GT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				GT Calculations					UV Dose					
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest GT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	
1		24.0	73,000											
2	X	24.0	73,000		1.4									
3	X	24.0	29,500		1.2								1.2	
4	X	24.0	20,600		1.4								1.1	
5	X	24.0	30,500		1.5								1.3	
6	X	24.0	27,700		1.2								1.1	
7		24.0	31,633											
8		24.0	31,633											
9	X	24.0	31,633		1.2								0.9	
10	X	24.0	37,300		1.4								1.1	
11	X	24.0	40,400		1.3								1.2	
12	X	24.0	48,000		1.7								1.5	
13	X	24.0	31,200		1.8								1.4	
14		24.0	30,267											
15		24.0	30,267											
16	X	24.0	30,267		1.2								1.0	
17	X	24.0	32,700		1.4								1.0	
18	X	24.0	25,900		1.9								1.7	
19	X	24.0	40,600		1.3								1.2	
20	X	24.0	27,900		1.3								1.1	
21		24.0	25,633											
22		24.0	25,633											
23	X	24.0	25,633		1.1								0.9	
24	X	24.0	23,000		1.1								0.8	
25	X	24.0	22,600		1.0								0.8	
26	X	24.0	29,200		0.9								0.7	
27	X	24.0	29,800		0.9								0.6	
28		24.0	30,700											
29		24.0	30,700											
30	X	24.0	30,700		1.3								1.2	
31	X	24.0	30,100		1.2								1.0	
Total			1,027,700											
Average			33,152											
Maximum			73,000											

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** August, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island	PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	151	Total Population Served at End of Month:	529
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg State: Florida Zip Code: 34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com		

**B. Water Treatment Plant Information**

Plant Name:	Picciola Island	Plant Telephone Number:	352-787-0980
Plant Address:	5133 Albert Road	City:	Leesburg State: Florida Zip Code: 34731
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Licensed Operator	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator	Will Fontaine	C	6813	Days 1st Shift
Other Operator	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine 9-7-07  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: August, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Started or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C), Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (CT) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24.0	28,400		1.4										1.1	
2	X	24.0	27,800		1.5										1.3	
3	X	24.0	22,300		1.4										1.1	
4		24.0	30,667													
5		24.0	30,667													
6	X	24.0	30,667		1.4										1.2	
7	X	24.0	34,660		1.3										1.1	
8	X	24.0	30,400		1.6										1.3	
9		24.0	40,550													
10	X	24.0	40,550		1.1										0.8	
11		24.0	37,333													
12		24.0	37,333													
13	X	24.0	37,333		1.2										0.8	
14	X	24.0	29,800		1.3										0.8	
15	X	24.0	26,300		1.3										1.1	
16	X	24.0	59,100		1.3											
17	X	24.0	39,300		1.4										1.1	
18		24.0	43,900													
19		24.0	43,900													
20	X	24.0	43,900		1.7										1.3	
21	X	24.0	43,900		1.2										1.0	
22	X	24.0	51,900		0.9										0.6	
23	X	24.0	57,100		0.9										0.7	
24	X	24.0	38,800		1.2										0.9	
25		24.0	30,367													
26		24.0	30,367													
27	X	24.0	30,367		1.2										1.0	
28	X	24.0	31,700		1.2										1.1	
29	X	24.0	30,600		1.5										0.8	
30	X	24.0	43,500		1.3										1.1	
31	X	24.0	41,700		1.5										1.3	
Total			1,145,160													
Average			36,941													
Maximum			59,100													

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** September, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island	PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	151	Total Population Served at End of Month:	529
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
Contact Person's Telephone Number:	(352) 787-0980	Zip Code:	34749
Contact Person's E-Mail Address:	beheath@aquaaamerica.com	Contact Person's Fax Number:	(352) 787-6333

**B. Water Treatment Plant Information**

Plant Name:	Picciola Island	Plant Telephone Number:	352-787-0980
Plant Address:	5133 Albert Road	City:	Leesburg
		State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	Zip Code:	34731
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Licensed Operators:	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

*Will Fontaine* 10-5-07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: September, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe): \_\_\_\_\_

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place 'X')	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>			
1		24.0	45,567												
2		24.0	45,567												
3	X	24.0	45,567		1.5								1.2		
4	X	24.0	33,700		1.6								1.4		
5	X	24.0	28,400		1.3								1.1		
6	X	24.0	60,160		1.4								1.1		
7	X	24.0	35,400		1.4								1.2		
8		24.0	42,233												
9		24.0	42,233												
10	X	24.0	42,233		1.4								1.3		
11	X	24.0	30,900		1.4								1.1		
12	X	24.0	25,700		1.4								1.2		
13	X	24.0	30,400		1.3								1.1		
14	X	24.0	27,500		1.6								1.1		
15		24.0	43,400										1.0		
16		24.0	43,400												
17	X	24.0	43,400		1.5								1.1		
18		24.0	36,000												
19	X	24.0	36,000		1.4								1.1		
20		24.0	32,000												
21	X	24.0	32,000		1.3								1.1		
22		24.0	30,233												
23		24.0	30,233												
24	X	24.0	30,233		1.3								1.1		
25	X	24.0	18,500		1.2								0.9		
26	X	24.0	27,100		1.2								0.9		
27	X	24.0	36,800		1.5								1.3		
28	X	24.0	25,100		1.5								1.4		
29		24.0	34,970												
30		24.0	34,970												
31		24.0													
Total:			1,069,900												
Average:			34,513												
Maximum:			60,160												

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



**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** October, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island	PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	154	Total Population Served at End of Month:	529
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
Contact Person's Telephone Number:	(352) 787-0980	State:	Florida
Contact Person's E-Mail Address:	beheath@aquaaamerica.com	Zip Code:	34749
		Contact Person's Fax Number:	(352) 787-6333

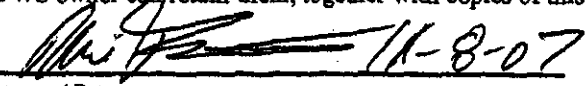
**B. Water Treatment Plant Information**

Plant Name:	Picciola Island	Plant Telephone Number:	352-787-0980
Plant Address:	5133 Albert Road	City:	Leesburg
		State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	Zip Code:	34731
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.


  
 Signature and Date 11-8-07

Will Fontaine  
 Printed or Typed Name
 

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: October, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable								Lowest Residual Disinfectant Concentration at Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L <sup>2</sup>	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L <sup>2</sup>	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L <sup>2</sup>	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>			Minimum UV Dose Required, mW-sec/cm <sup>2</sup>
1	X	24.0	34,970			1.4							1.2	
2	X	24.0	27,200			1.3							1.0	
3	X	24.0	26,400			1.1							0.9	
4	X	24.0	28,700			1.1							1.0	
5	X	24.0	27,900			1.1							0.8	
6		24.0	33,333											
7		24.0	33,333											
8	X	24.0	33,333			0.9							0.7	
9	X	24.0	25,500			0.9							0.8	
10	X	24.0	32,500			0.9							0.8	
11	X	24.0	38,700			0.9							0.7	
12	X	24.0	30,100			1.0							0.9	
13		24.0	39,433											
14		24.0	39,433											
15	X	24.0	39,433			0.9							0.8	
16	X	24.0	46,700			0.9							0.6	
17	X	24.0	37,200			0.8							0.6	
18	X	24.0	36,800			1.0							1.3	
19	X	24.0	39,100			1.3							1.2	
20		24.0	31,200											
21		24.0	31,200											
22	X	24.0	31,200			1.5							1.9	
23	X	24.0	42,800			1.6							1.9	
24	X	24.0	26,900			1.7							1.4	
25	X	24.0	29,200			1.6							1.4	
26	X	24.0	31,300			1.2							1.0	
27		24.0	35,067											
28		24.0	35,067											
29	X	24.0	35,067			1.5							1.3	
30	X	24.0	24,100			1.3							1.2	
31	X	24.0	27,500			1.4							1.2	
Total			1,030,670											
Average			33,247											
Maximum			46,700											

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** November, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island	PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	154	Total Population Served at End of Month:	529
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
Contact Person's Telephone Number:	(352) 787-0980	State:	Florida
Contact Person's E-Mail Address:	beheath@aquaaamerica.com	Zip Code:	34749
		Contact Person's Fax Number:	(352) 787-6333

**B. Water Treatment Plant Information**

Plant Name:	Picciola Island	Plant Telephone Number:	352-787-0980
Plant Address:	5133 Albert Road	City:	Leesburg
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	State:	Florida
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000	Zip Code:	34731
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Licensed Operator's Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator: Will Fontaine	C	6813	Days 1st Shift
Will Fontaine	C	6597	Days 1st Shift
John Worrell	C	10027	Days 1st Shift
Marty Neal			

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine 12-6-07  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: November, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Day/Plant Affected by Operator (Plant No.)	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable							Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>			Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>
	X	24.0	29,000		1.3							1.1	
	X	24.0	27,200		1.4							1.1	
		24.0	38,333										
		24.0	38,333										
	X	24.0	38,333		1.2							1.0	
	X	24.0	30,500		1.2							0.9	
	X	24.0	32,500		1.3							1.0	
	X	24.0	51,900		1.2							1.0	
	X	24.0	30,300		1.3							1.1	
		24.0	43,400										
		24.0	43,400										
	X	24.0	43,400		1.4							1.2	
	X	24.0	32,800		1.2							1.0	
	X	24.0	40,000		1.2							0.9	
	X	24.0	47,000		1.2							1.0	
	X	24.0	26,700		1.3							1.0	
		24.0	39,033										
		24.0	39,033										
	X	24.0	39,033		1.1							0.9	
	X	24.0	38,500		1.0							0.8	
	X	24.0	24,500		1.0							0.8	
		24.0	36,650										
	X	24.0	36,650		1.0							0.8	
		24.0	39,367										
		24.0	39,367										
	X	24.0	39,367		1.1							0.7	
		24.0	28,100										
	X	24.0	28,100		1.0							0.7	
		24.0	37,050										
	X	24.0	37,050		1.1							0.9	
		24.0											
			1,094,900										
			35,319										
			51,900										

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



Polymer Page 3 Due in December

See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** December, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island	PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	154	Total Population Served at End of Month:	529
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg State: Florida Zip Code: 34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com		

**B. Water Treatment Plant Information**

Plant Name:	Picciola Island	Plant Telephone Number:	352-787-0980
Plant Address:	5133 Albert Road	City:	Leesburg State: Florida Zip Code: 34731
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine 1-9-08  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: December, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place X)	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer, During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>			Minimum UV Dose Required, mW-sec/cm <sup>2</sup>
			24.0	36,100										
			24.0	36,100									0.5	
	X		24.0	36,100		0.8								
			24.0	29,500									1.0	
	X		24.0	29,500		1.1								
			24.0	34,600									1.0	
	X		24.0	34,600		1.2								
			24.0	38,433									1.0	
	X		24.0	38,433		1.1							1.1	
	X		24.0	38,500		1.3							1.2	
	X		24.0	33,400		1.3								
			24.0	39,000									1.1	
	X		24.0	39,000		1.4								
			24.0	34,000										
			24.0	34,000									1.1	
	X		24.0	34,000		1.3								
	X		24.0	26,900		1.3							1.1	
	X		24.0	29,200		1.3							1.1	
	X		24.0	28,000		1.5							1.2	
	X		24.0	46,500		1.4								
			24.0	28,200										
			24.0	28,200									1.2	
	X		24.0	28,200		1.5								
			24.0	33,200									1.0	
	X		24.0	33,200		1.2								
			24.0	37,050									1.0	
	X		24.0	37,050		1.3								
			24.0	34,167										
			24.0	34,167									1.2	
	X		24.0	34,167		1.4								
				1,061,900										
				34,255										
				46,500										

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

PWS ID: 3351009 Plant Name: Picciola Island

**IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: \* 2007**

A. Is any polymer containing the monomer acrylamide used at the water treatment plant?  No  Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose ppm =	Acrylamide Level, % <sup>1</sup> =
--------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant?  No  Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose ppm =	Epichlorohydrin Level, % <sup>1</sup> =
--------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant?  No  Yes, and the type of sequestrant, sequestrant dose, ect., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO <sub>4</sub> or mg/L of silicate as SiO <sub>2</sub> =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO <sub>2</sub> =

\* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

<sup>1</sup> Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

1430  
207 (6230)  
In D °C  
mg/L

**2006 MOR**



**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** January, 2006

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island			PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	145			Total Population Served at End of Month:	508
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Zip Code:	34749
Contact Person's E-Mail Address:	beheath@aquaaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Picciola Island			Plant Telephone Number:	352-787-0980	
Plant Address:	5133 Albert Road			City:	Leesburg	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V				Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Licensed Operators:	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine 2-6-06  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

Page 04312 MAY 22 8  
FPSC-COMMISSION CLERK

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: January, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations				UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>			Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	
1		24.0	56,000											1.2	
2	X	24.0	56,000		1.5									1.0	
3	X	24.0	38,300		1.3									1.0	
4	X	24.0	31,700		1.3									1.2	
5	X	24.0	29,800		1.5									1.0	
6	X	24.0	38,660		1.4										
7		24.0	40,333												
8		24.0	40,333												
9	X	24.0	40,333		1.4									1.0	
10	X	24.0	25,800		1.5									1.2	
11	X	24.0	45,000		1.5									1.2	
12	X	24.0	40,700		1.3									1.1	
13	X	24.0	36,900		1.4									1.1	
14		24.0	41,600												
15		24.0	41,600												
16	X	24.0	41,600		1.5									1.2	
17	X	24.0	38,500		1.6									1.2	
18	X	24.0	46,700		1.5									1.2	
19	X	24.0	33,100		1.5									1.2	
20	X	24.0	44,800		1.5									1.2	
21		24.0	47,633												
22		24.0	47,633												
23	X	24.0	47,633		1.4									1.1	
24	X	24.0	46,000		1.3									1.1	
25	X	24.0	36,800		1.5									1.2	
26	X	24.0	71,900		1.6									1.3	
27	X	24.0	63,700		1.6									1.3	
28		24.0	46,067												
29		24.0	46,067												
30	X	24.0	46,067		1.5									1.2	
31	X	24.0	30,400		1.5									1.2	
Total			1,337,660												
Average			43,150												
Maximum			71,900												

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** February, 2006

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island	PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	145	Total Population Served at End of Month:	508
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com		

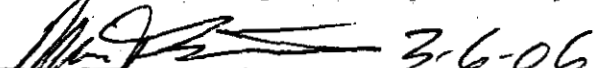
**B. Water Treatment Plant Information**

Plant Name:	Picciola Island	Plant Telephone Number:	352-787-0980
Plant Address:	5133 Albert Road	City:	Leesburg
		State:	Florida
		Zip Code:	32748
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Licensed Operator	Name	License Class	License Number	Days/Shifts Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operator(s):	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

  
 Signature and Date 3-6-06

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: February, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe): \_\_\_\_\_

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date	Time	Flow (MGD)	Chlorine Applied (lbs)	Calculations for Chlorine Dioxide, Chloramines, or Other Disinfectants, if Applicable										Total Chlorine Applied (lbs)	Residual (mg/L)	Type of Disinfectant	Notes		
				Chlorine Dioxide Applied (lbs)	Chloramines Applied (lbs)	Other Disinfectant Applied (lbs)	Chlorine Dioxide Residual (mg/L)	Chloramines Residual (mg/L)	Other Disinfectant Residual (mg/L)	Chlorine Dioxide Demand (mg/L)	Chloramines Demand (mg/L)	Other Disinfectant Demand (mg/L)	Chlorine Dioxide Conversion Factor					Chloramines Conversion Factor	Other Disinfectant Conversion Factor
1	X	24.0	42,400															1.1	
2	X	24.0	47,200															1.1	
3	X	24.0	36,300															1.1	
4		24.0	34,900																
5		24.0	34,900																
6	X	24.0	34,900															0.9	
7	X	24.0	33,900															0.9	
8	X	24.0	44,100															0.9	
9	X	24.0	29,500															1.1	
10	X	24.0	41,100															1.2	
11		24.0	38,733																
12		24.0	38,733																
13	X	24.0	38,733															1.3	
14	X	24.0	47,700															1.3	
15	X	24.0	38,400															1.2	
16	X	24.0	33,600															1.1	
17	X	24.0	46,960															1.1	
18		24.0	44,267																
19		24.0	44,267																
20	X	24.0	44,267															1.2	
21	X	24.0	55,300															1.2	
22	X	24.0	51,000															1.0	
23	X	24.0	45,800															1.0	
24	X	24.0	44,300															1.1	
25		24.0	38,733																
26		24.0	38,733																
27	X	24.0	38,733															0.9	
28	X	24.0	30,100															0.9	
29		24.0																	
30		24.0																	
31		24.0																	
Total			1,137,560																
Average			36,695																
Maximum			55,300																

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** March, 2006

**A. Public Water System (PWS) Information**

PWS Name: Picciola Island		PWS Identification Number: 3351009	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 145		Total Population Served at End of Month: 508	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaaamerica.com		Contact Person's Fax Number: (352) 787-6333	

**B. Water Treatment Plant Information**

Plant Name: Picciola Island		Plant Telephone Number: 352-787-0980	
Plant Address: 5133 Albert Road		City: Leesburg	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32748	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 198,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): D	

Licensed Operator	Name	License Class	License Number	Days/Shift(s) Worked
Lead/Chief Operator	Will Fontaine	C	6813	Days 1st Shift
Other Operators	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

*Will Fontaine* 4-6-06  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: March, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe): \_\_\_\_\_

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of Month	Disinfectant Applied	Flow (MGD)	Chlorine Applied (lb)	Chlorine Residual (mg/L)										Minimum Residual in Distribution System (mg/L)	Remarks or Abnormalities in Operation, Test or Maintenance Work Done, or Other Water System Components in Operation			
				1	2	3	4	5	6	7	8	9	10					
1	X	24.0	37,200				1.2										0.9	
2	X	24.0	39,600				1.2										0.9	
3	X	24.0	32,900				1.3										1.0	
4		24.0	39,633															
5		24.0	39,633															
6	X	24.0	39,633				1.2										0.9	
7	X	24.0	34,400				1.2										0.9	
8	X	24.0	39,000				1.3										1.0	
9	X	24.0	53,300				1.3										1.0	
10	X	24.0	38,860				1.3										0.9	
11		24.0	40,600															
12		24.0	40,600															
13	X	24.0	40,600				1.2										0.8	
14	X	24.0	31,000				1.3										0.9	
15	X	24.0	42,700				1.3										1.0	
16	X	24.0	39,300				1.5										1.1	
17	X	24.0	37,800				1.3										1.0	
18		24.0	42,300															
19		24.0	42,300															
20	X	24.0	42,300				1.3										1.0	
21	X	24.0	41,900				1.2										1.0	
22	X	24.0	41,300				1.3										1.0	
23	X	24.0	43,900				1.4										1.1	
24	X	24.0	34,100				1.3										1.0	
25		24.0	49,633															
26		24.0	49,633															
27	X	24.0	49,633				1.4										1.1	
28	X	24.0	37,200				1.4										1.1	
29	X	24.0	49,700				1.4										1.0	
30	X	24.0	59,600				1.3										1.0	
31	X	24.0	53,600				1.4										1.1	
Totals			1,303,860															
Average			42,060															
Maximum			59,600															

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** April, 2006

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island			PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	145			Total Population Served at End of Month:	508
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Zip Code:	34749
Contact Person's E-Mail Address:	beheath@aguaamerica.com			Contact Person's Fax Number:	(352) 787-6333

**B. Water Treatment Plant Information**

Plant Name:	Picciola Island			Plant Telephone Number:	352-787-0980	
Plant Address:	5133 Albert Road	City:	Leesburg	State:	Florida	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	D	

Licensed Operator	Name	License Class	License Number	Days (or Shifts) Worked
Lead/Chief Operator	Will Fontaine	C	6813	Days 1st Shift
Other Operators	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine      5-5-06  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PWS'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: April, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Month	Day of the Month	Hours of Operation	Net Quantity of Water Produced (gallons)	Calculations on Free Chlorine to Demonstrate Four-Log Virus Inactivation, if Applicable										Remarks or Abnormal Operating Conditions Report if Maintenance Work that Involves Water System Components or Operation		
				Residual Concentration at Customer Point (mg/L)	Disinfection Contact Time (minutes)	Required Residual (mg/L)	Flow Rate (MGD)	Volume of Water (MG)	Minimum Chlorine Requirement (lb/day)	Chlorine Dioxide Requirement (lb/day)	Minimum Chlorine Residual (mg/L)	Minimum Chlorine Residual (mg/L)	Minimum Chlorine Residual (mg/L)			
			24.0	56,733												
			24.0	56,733												
	X		24.0	56,733		1.0									0.7	
	X		24.0	39,100		1.4									1.0	
	X		24.0	63,700		1.4									1.1	
	X		24.0	53,300		1.4									1.1	
	X		24.0	40,600		1.4									1.0	
			24.0	46,500												
			24.0	46,500												
10	X		24.0	46,500		1.4									1.1	
11	X		24.0	28,200		1.3									1.0	
12	X		24.0	45,660		1.3									0.9	
13	X		24.0	36,600		1.2									0.9	
14	X		24.0	43,500		1.3									1.0	
15			24.0	52,800												
16			24.0	52,800												
17	X		24.0	52,800		1.2									0.9	
18	X		24.0	43,000		1.1									0.9	
19	X		24.0	32,500		1.2									0.9	
20	X		24.0	41,200		1.1									0.9	
21	X		24.0	34,900		1.2									0.8	
22			24.0	44,767												
23			24.0	44,767												
24	X		24.0	44,767		1.2									0.8	
25	X		24.0	41,600		1.2									0.9	
26	X		24.0	61,100		1.1									0.9	
27	X		24.0	31,400		1.1									0.8	
28	X		24.0	36,600		1.3									1.0	
29			24.0	44,466												
30			24.0	44,466												
31			24.0													
Total				1,364,292												
Average				44,009												
Maximum				63,700												

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





See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** May, 2006

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island	PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	145	Total Population Served at End of Month:	508
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	bheath@aquamerica.com		

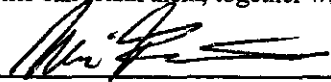
**B. Water Treatment Plant Information**

Plant Name:	Picciola Island	Plant Telephone Number:	352-787-0980
Plant Address:	5133 Albert Road	City:	Leesburg
		State:	Florida
		Zip Code:	34731
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Name	License Class	License Number	Days 1st Shift
Will Fontaine	C	6813	Days 1st Shift
John Wortell	C	6597	Days 1st Shift
Marty Neal	C	10027	Days 1st Shift

**II Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

  
 \_\_\_\_\_  
 Signature and Date

Will Fontaine  
 \_\_\_\_\_  
 Printed or Typed Name

C-6813  
 \_\_\_\_\_  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: May, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe): \_\_\_\_\_

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date	Time	Flow (MGD)	Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Ozone (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Total Chlorine (mg/L)	Total Chlorine Dioxide (mg/L)	Total Ozone (mg/L)	Total Combined Chlorine (mg/L)
X	24.0	44,467	1.3								1.0
X	24.0	56,060	1.3								1.0
X	24.0	50,000	1.2								0.8
X	24.0	67,000	1.2								0.8
X	24.0	51,000	1.2								0.9
	24.0	71,333									
	24.0	71,333									
X	24.0	71,333	1.4								1.1
X	24.0	55,300	1.4								1.1
X	24.0	46,800	1.5								1.3
X	24.0	45,860	1.5								1.2
X	24.0	27,300	1.6								1.2
	24.0	41,600									
	24.0	41,600									
X	24.0	41,600	1.6								1.2
X	24.0	48,100	1.6								1.3
X	24.0	35,700	1.5								1.1
X	24.0	41,500	1.4								1.1
X	24.0	62,200	1.4								1.1
	24.0	57,433									
	24.0	57,433									
X	24.0	57,433	1.4								1.0
X	24.0	51,100	1.3								1.0
X	24.0	41,800	1.5								1.2
X	24.0	68,600	1.5								1.3
X	24.0	61,700	1.4								1.1
	24.0	52,533									
	24.0	52,533									
X	24.0	52,533	1.3								1.0
X	24.0	76,200	1.3								1.1
X	24.0	67,800	1.2								0.9
		1,667,127									
		53,778									
		76,200									

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

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** June, 2006

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island	PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	145	Total Population Served at End of Month:	508
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com		


**B. Water Treatment Plant Information**

Plant Name:	Picciola Island	Plant Telephone Number:	352-787-0980
Plant Address:	5133 Albert Road	City:	Leesburg
		State:	Florida
		Zip Code:	34731
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: June, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>			
1	X	24.0	69,300		1.3									1.0	
2	X	24.0	40,600		1.5									1.2	
3		24.0	46,633												
4		24.0	46,633												
5	X	24.0	46,633		1.7									1.4	
6	X	24.0	47,800		1.8									1.4	
7	X	24.0	56,300		1.4									1.1	
8	X	24.0	51,360		1.5									1.1	
9	X	24.0	62,400		1.5									1.2	
10		24.0	56,667												
11		24.0	56,667												
12	X	24.0	56,667		1.5									1.2	
13	X	24.0	26,000		1.4									1.0	
14	X	24.0	28,000		1.4									1.1	
15	X	24.0	40,100		1.6									1.2	
16	X	24.0	35,700		1.5									1.2	
17		24.0	35,267												
18		24.0	35,267												
19	X	24.0	35,267		1.6									1.2	
20	X	24.0	29,100		1.5									1.2	
21	X	24.0	33,100		1.5									1.1	
22	X	24.0	48,400		1.4									1.1	
23	X	24.0	47,100		1.5									1.2	
24		24.0	36,933												
25		24.0	36,933												
26	X	24.0	36,933		1.3									1.0	
27	X	24.0	23,400		1.4									1.1	
28	X	24.0	29,500		1.4									1.1	
29	X	24.0	27,300		1.4									1.0	
30	X	24.0	43,380		0.9									0.6	
31		24.0													
<b>Total</b>			1,265,340												
<b>Average</b>			40,817												
<b>Maximum</b>			69,300												

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

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** July, 2006

**A. Public Water System (PWS) Information**

PWS Name: Picciola Island		PWS Identification Number: 3351009	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 145		Total Population Served at End of Month: 508	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida    Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Picciola Island		Plant Telephone Number: 352-787-0980	
Plant Address: 5133 Albert Road		City: Leesburg	State: Florida    Zip Code: 34731
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 198,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): D	
Licensed Operators	Name	License Class	License Number    Day(s) / Shift(s) Worked
Lead/Chief Operator	Will Fontaine	C	6813    Days 1st Shift
Other Operators	John Worrell	C	6597    Days 1st Shift
	Marty Neal	C	10027    Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
--------------------	--	--------------------------

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

**III. Daily Data for the Month/Year of:** July, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net quantity of water produced in gal	CT Calculations for UV Dose to Demstrate Four-Log Virus Inactivation, if Applicable										Emergen or Abnormal Operating Conditions, Repairs, Maintenance Work that Involves Taking Water System Components Out of Operation
				Lowest Residual Disinfectant Concentration (Before or at the Customer's Peak Flowing) mg/L	Disinfectant Contact Time (h) x (C) Measurement Point During Peak Flow (minutes)	Lowest CT Provided Before or at Customer's Peak Flowing (min/ft <sup>3</sup> )	Temp of Water (°C)	Temp of Water (°F)	Minimum CT Required (min/ft <sup>3</sup> )	Operating UV Dose (mW-sec/cm <sup>2</sup> )	Minimum UV Dose Required (mW-sec/cm <sup>2</sup> )	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1		24.0	32,767											
2		24.0	32,767											
3	X	24.0	34,207		1.4								1.1	
4	X	24.0	33,400		1.3								1.0	
5	X	24.0	46,300		1.5								1.2	
6	X	24.0	50,860		1.4								1.1	
7	X	24.0	58,100		1.2								0.9	
8		24.0	36,367											
9		24.0	36,367											
10	X	24.0	36,367		1.4								1.1	
11	X	24.0	33,400		1.4								1.1	
12	X	24.0	33,500		1.6								1.4	
13	X	24.0	31,700		1.7								1.4	
14	X	24.0	27,400		1.7								1.5	
15		24.0	43,367											
16		24.0	43,367											
17	X	24.0	43,367		1.4								1.2	
18	X	24.0	32,500		1.3								1.0	
19	X	24.0	53,400		1.2								1.0	
20	X	24.0	66,100		1.3								1.1	
21	X	24.0	51,500		1.4								1.1	
22		24.0	40,633											
23		24.0	40,633											
24	X	24.0	40,633		1.2								0.9	
25	X	24.0	34,200		1.2								0.9	
26	X	24.0	46,000		1.4								1.2	
27	X	24.0	40,800		1.3								1.0	
28	X	24.0	47,500		1.4								1.1	
29		24.0	50,733											
30		24.0	50,733											
31	X	24.0	50,733		1.2								0.8	
Total			1,299,700											
Average			41,926											
Maximum			66,100											

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

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** August, 2006

**A. Public Water System (PWS) Information**

PWS Name: Picciola Island		PWS Identification Number: 3351009	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 145		Total Population Served at End of Month: 508	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaaamerica.com		Contact Person's Fax Number: (352) 787-6333	

**B. Water Treatment Plant Information**

Plant Name: Picciola Island		Plant Telephone Number: 352-787-0980		
Plant Address: 5133 Albert Road		City: Leesburg	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 34731		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 198,000		Plant Class (per subsection 62-699.310(4), F.A.C.): D		
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): D		
Licensed Operator	Name	License Class	License Number	Day(s) Shift(s) Worked
Lead/Chief Operator	Will Fontaine	C	6813	Days 1st Shift
Other Operator	John Worrell	C	6597	Days 1st Shift
	Marty Neal	C	10027	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine 9-7-06  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: August, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe): \_\_\_\_\_

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date	Plant	Operator	Hours Plant in Operation	Net Quantity of Water Produced (gals)	Peak Flow Rate (gpm)	Calculations on UV Dose to Dissipate Four-Log Virus Inactivation, if Applicable*						Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
						Lowest Residual Disinfectant Concentration (C) Before or After Customer During Peak Flow (mg/L)	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow (minutes)	Lowest Residual Disinfectant Provided Before or After Customer During Peak Flow (mg/L)	Temp of Water (°C)	pH of Water if Applicable	Minimum CT Required (mg-min/L)		Lowest Operating UV Dose (mW-sec/cm <sup>2</sup> )	Minimum UV Dose Required (mW-sec/cm <sup>2</sup> )
	X		24.0	41,100		1.2							0.9	
	X		24.0	58,500		1.1							0.9	
	X		24.0	66,500		1.3							1.0	
	X		24.0	59,500		1.3							1.1	
			24.0	46,600										
			24.0	46,600										
	X		24.0	46,600		1.2							0.9	
	X		24.0	24,000		1.2							1.0	
	X		24.0	44,300		1.5							1.2	
	X		24.0	48,160		1.6							1.3	
	X		24.0	40,700		1.3							1.1	
			24.0	48,633										
			24.0	48,633										
	X		24.0	48,633		1.2							0.9	
	X		24.0	40,600		1.3							1.1	
	X		24.0	34,100		1.2							1.0	
	X		24.0	41,200		1.2							0.9	
	X		24.0	33,200		1.1							0.8	
			24.0	35,000										
			24.0	35,000										
	X		24.0	35,000		1.1							0.8	
	X		24.0	32,300		0.7							0.4	
	X		24.0	35,500		1.6							1.1	
	X		24.0	48,800		1.3							1.0	
	X		24.0	23,500		1.2							0.8	
			24.0	28,433										
			24.0	28,433										
	X		24.0	28,433		1.5							1.2	
	X		24.0	25,500		1.5							1.3	
	X		24.0	32,700		1.4							1.1	
	X		24.0	25,900		1.2							1.0	
				1,232,060										
				39,744										
				66,500										

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





See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** September, 2006

**A. Public Water System (PWS) Information**

PWS Name:	Picciola Island	PWS Identification Number:	3351009
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	145	Total Population Served at End of Month:	508
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	bheath@aquaamerica.com		

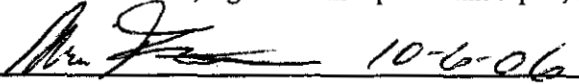
**B. Water Treatment Plant Information**

Plant Name:	Picciola Island	Plant Telephone Number:	352-787-0980
Plant Address:	5133 Albert Road	City:	Leesburg
		State:	Florida
		Zip Code:	34731
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	198,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	D

Operator Name	License Class	License Number	Day(s) Shift(s) Worked
Will Fontaine	C	6813	Days 1st Shift
John Worrell	C	6597	Days 1st Shift
Marty Neal	C	10027	Days 1st Shift

**II Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

 10-6-06  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: September, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date	Time	Flow (MGD)	Chlorine (mg/L)	Chlorine Residual (mg/L)				Total Chlorine (mg/L)	pH	Temperature (°F)	Total Hardness (mg/L)	Total Solids (mg/L)	Notes
				Free Chlorine	Combined Chlorine	Chlorine Dioxide	Ozone						
	X	24.0	25,500										1.3
		24.0	32,933										
		24.0	32,933										
	X	24.0	32,933										1.2
	X	24.0	30,800										0.7
	X	24.0	31,900										1.4
	X	24.0	31,800										1.3
	X	24.0	34,300										1.0
		24.0	32,533										
		24.0	32,533										
	X	24.0	32,533										1.2
	X	24.0	29,600										1.1
	X	24.0	29,200										1.3
	X	24.0	31,560										1.3
	X	24.0	21,600										1.4
		24.0	34,500										
		24.0	34,500										
	X	24.0	34,500										1.3
	X	24.0	29,300										1.3
	X	24.0	25,000										1.4
	X	24.0	25,100										1.2
	X	24.0	40,600										1.6
		24.0	45,800										
		24.0	45,800										
	X	24.0	45,800										1.2
	X	24.0	37,500										1.1
	X	24.0	32,700										1.2
	X	24.0	51,500										1.2
	X	24.0	42,600										1.1
		24.0	54,430										
		24.0	1,042,290										
			33,622										
			54,430										

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



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** October, 2006

**A. Public Water System (PWS) Information**

PWS Name: Piccola Island	PWS Identification Number: 3351009
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 145	Total Population Served at End of Month: 508
PWS Owner: Aqua Utilities Florida	
Contact Person: Brian Heath	Contact Person's Title: Area Manager
Contact Person's Mailing Address: PO Box 490310	City: Leesburg State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980	Contact Person's Fax Number: (352) 787-6333
Contact Person's E-Mail Address: beheath@aquaaamerica.com	

**B. Water Treatment Plant Information**

Plant Name: Piccola Island	Plant Telephone Number: 352-787-0980
Plant Address: 5139 Albert Road	City: Leesburg State: Florida Zip Code: 34731
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 198,000	
Plant Category (per subsection 62-699.310(4), F.A.C.): V	Plant Class (per subsection 62-699.310(4), F.A.C.): D

Name	License Class	License Number	Days 1st Shift
Will Fontaine	C	6813	
John Wortell	C	6597	
Marty Neal	C	10027	

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

 11-3-06  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number



# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** November, 2006

**A. Public Water System (PWS) Information**

PWS Name: Picciola Island		PWS Identification Number: 3351009	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 145		Total Population Served at End of Month: 508	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Picciola Island		Plant Telephone Number: 352-787-0980	
Plant Address: 5133 Albert Road		City: Leesburg	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 34731	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 198,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): D	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator	Will Fontaine	C	6813
Other Operators	John Worrell	C	6597
	Marty Neal	C	10027

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

12-8-06  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: November, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of Month	Day Plant Started or Visited by Operator (Place X)	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before, or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	CT Calculations				UV Dose					
							Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>					
1	X	24.0	33,600		1.2										1.0	
2	X	24.0	47,860		1.2										0.9	
3	X	24.0	34,100		1.1										0.9	
4		24.0	45,000													
5		24.0	45,000													
6	X	24.0	45,000		1.1										0.8	
7	X	24.0	33,500		1.2										0.8	
8	X	24.0	20,300		1.2										0.9	
9	X	24.0	36,000		1.3										0.8	
10	X	24.0	30,000		1.3										1.0	
11		24.0	37,967													
12		24.0	37,967													
13	X	24.0	37,967		1.1										0.8	
14	X	24.0	44,200		1.1										0.8	
15	X	24.0	41,600		1.0										0.7	
16	X	24.0	36,700		1.0										0.7	
17	X	24.0	26,400		1.1										0.7	
18		24.0	37,067													
19		24.0	37,067													
20	X	24.0	37,067		1.3										1.0	
21	X	24.0	34,400		1.3										1.0	
22	X	24.0	26,700		1.5										1.2	
23		24.0	37,500													
24	X	24.0	37,500		1.6										1.3	
25		24.0	50,933													
26		24.0	50,933													
27	X	24.0	50,933		1.4										1.1	
28	X	24.0	35,600		1.3										1.0	
29	X	24.0	30,100		1.3										1.0	
30	X	24.0	35,700		1.2										0.9	
31		24.0														
Total			1,134,660													
Average			36,602													
Maximum			50,933													

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

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



Polymer Page 3 Due in December

See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** December, 2006

**A. Public Water System (PWS) Information**

PWS Name: Picciola Island		PWS Identification Number: 3351009	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		Consecutive	
Number of Service Connections at End of Month: 145		Total Population Served at End of Month: 508	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Picciola Island		Plant Telephone Number: 352-787-0980	
Plant Address: 5133 Albert Road		City: Leesburg	State: Florida
		Zip Code: 34731	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 198,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): D	
Operator	Name	License Class	License Number
Lead/Chief Operator	Will Fontaine	C	6813
Other Operators	John Worrell	C	6597
	Marty Neal	C	10027

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

1-5-07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3351009 Plant Name: Picciola Island

III. Daily Data for the Month/Year of: December, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Month	Plant	Hours/Day	Quantity of Finished Water Produced (gals)	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Lowest Residual Concentration at Remote Point in Distribution System (mg/L)	Conditions, such as, Minimums, Maximums, etc. in the Drinking Water System, if Applicable
				CT Calculations					UV Dose						
				Peak Flow Rate (gpd)	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow (mg/L)	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow (minutes)	Lowest CT Provided Before or at First Customer During Peak Flow (mg/L-min)	Minimum CT Required (mg/L-min)	Minimum UV Dose (mW-sec/cm <sup>2</sup> )	Lowest UV Dose (mW-sec/cm <sup>2</sup> )	Minimum UV Dose Required (mW-sec/cm <sup>2</sup> )				
	X	24.0	31,000		1.2								0.9		
		24.0	32,000												
		24.0	32,000												
	X	24.0	32,000		1.2								0.9		
	X	24.0	38,300		1.2								0.9		
	X	24.0	34,100		1.3								1.0		
	X	24.0	32,300		1.3								1.1		
	X	24.0	32,760		1.2								1.0		
		24.0	36,000												
		24.0	36,000												
	X	24.0	36,000		1.2								0.8		
	X	24.0	26,500		1.2								0.9		
	X	24.0	39,800		1.3								1.0		
	X	24.0	32,600		1.2								0.9		
	X	24.0	24,500		1.3								0.9		
		24.0	37,300												
		24.0	37,300												
	X	24.0	37,300		1.2								0.9		
	X	24.0	26,600		1.2								0.9		
	X	24.0	35,760		1.4								1.0		
	X	24.0	30,900		1.3								1.0		
	X	24.0	33,300		1.3								1.0		
		24.0	34,200												
		24.0	34,200												
	X	24.0	34,200		1.4								1.2		
	X	24.0	32,600		1.3								1.0		
	X	24.0	31,000		1.3								1.0		
	X	24.0	33,500		1.2								1.0		
	X	24.0	29,900		1.2								0.9		
		24.0	32,970												
		24.0	32,970												
			1,029,860												
			33,221												
			39,800												

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



**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

PWS ID:	3351009	Plant Name:	Picciola Island
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**IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: \*** 2006

A. Is any polymer containing the monomer acrylamide used at the water treatment plant?  No  Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose ppm =	Acrylamide Level, % =
--------------------	-----------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant?  No  Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose ppm =	Epichlorohydrin Level, % =
--------------------	----------------------------

C. Is any iron or manganese sequestrant used at the water treatment plant?  No  Yes, and the type of sequestrant, sequestrant dose, ect., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO <sub>4</sub> or mg/L of silicate as SiO <sub>2</sub> =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO <sub>2</sub> =

\* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

† Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

**PERMIT**

PICCIOLA ISLAND



# St. Johns River Water Management District

Kirby B. Green III, Executive Director • David W. Fisk, Assistant Executive Director

4049 Reid Street • P.O. Box 1429 • Palatka, FL 32178-1429 • (386) 329-4500  
On the Internet at [www.sjrwmd.com](http://www.sjrwmd.com).

CERTIFIED NUMBER: 7004 0750 0003 3823 0257

August 12, 2004

Aqua Utilities of Florida  
6960 Professional Parkway East, Suite 400  
Sarasota, FL 34240

SUBJECT: Consumptive Use Permit #2609

The District has received a copy of the Bill of Sale naming Aqua Utilities Florida as the owner of the parcel of property formerly owned by Florida Water Services.

The above referenced permit is hereby transferred to Aqua Utilities Florida as the new permit holder, you are required to comply with all the conditions as noted in the permit. If you have any questions concerning the conditions of your permit, please contact Shannon Joyce, Hydrologist IV, 407-659-4848.

Thank you for your cooperation with this matter. If you have any questions or if the District can be of further assistance, please do not hesitate to contact us.

Sincerely,

Gloria Lewis, Director  
Division of Permit Data Services

Enclosures:

- Permit
- Conditions of Issuance
- Compliance Forms
- Well Tags

CC: District Permit File  
Lynn Minor, Data Management Supervisor

DOCUMENT NUMBER-DATE  
04312 MAY 22 08  
FPSC-COMMISSION CLERK

GOVERNING BOARD

- |                                       |  |                                      |  |
|---------------------------------------|--|--------------------------------------|--|
| Omerias D. Long, CHAIRMAN<br>APOPKA   | David G. Graham, VICE CHAIRMAN<br>JACKSONVILLE | R. Clay Albright, SECRETARY<br>OCALA | Duane Ottenstroer, TREASURER<br>JACKSONVILLE |
| W. Michael Branch<br>FERNANDINA BEACH | John G. Sowinski<br>ORLANDO                    | William Keri<br>MELBOURNE BEACH      | Ann T. Moore<br>BUNNELL                      |
|                                       |  |                                      | Susan N. Hughes<br>JACKSONVILLE              |

#### 40C-1.612 TRANSFER OF OWNERSHIP OF PERMIT

- (1) **Transfer of Permitted Facility.** Within (30) days of any sale, conveyance, or other transfer of a facility, system, or well permitted by the District, the existing permittee must notify the District, in writing, of such transfer, giving the name and address of the transferee and providing a copy of the instrument effectuating the transfer.
- (2) **Transfer of Interest in Real Property.** Within (30) days of any transfer of ownership or control of the real property at which any permitted facility, system, consumptive use, or activity is located the permittee must notify the District, in writing, of the transfer, giving the name and address of the new owner or person in effectuating the transfer.
- (3) **Transfer of Permit.** To transfer a permit, the permittee must provide the information required in subsections (1) and (2), together with a written statement from the proposed transferee that it will bound by all terms and conditions of the permit. Additionally, where applicable, the transferee must demonstrate that it is capable of constructing, operating and maintaining the permitted facility, system, consumptive use, well or activity. Once the required information has been provided, the District may transfer the permit to the transferee.

PERMIT NO. 2609

ORIGINAL PERMIT ISSUED: December 7, 1999  
TRANSFER PROCESS DATE: August 19, 2004

PROJECT NAME: Piccola

A PERMIT AUTHORIZING:

The District authorizes, as limited by the attached permit conditions, the use of 18.89 million gallons per year of ground water from the Floridan aquifer for household type uses.

**LOCATION:**

Site: Piccola  
Lake County

Section(s): 12                      Township(s): 19S                      Range(s): 24E

**ISSUED TO:**

Aqua Utilities Florida  
6960 Professional Parkway East, Suite 400  
Sarasota, FL 34240

Permittee agrees to hold and save the St. Johns River Water Management District and its successors harmless from any and all damages, claims, or liabilities which may arise from permit issuance. Said application, including all maps and specifications attached thereto, is by reference made a part hereof.


This permit does not convey to permittee any property rights nor any rights of privileges other than those specified herein, nor relieve the permittee from complying with any law, regulation or requirement affecting the rights of other bodies or agencies. All structures and works installed by permittee hereunder shall remain the property of the permittee.

This permit may be revoked, modified or transferred at any time pursuant to the appropriate provisions of Chapter 373, Florida Statutes and 40C-1, Florida Administrative Code.

**PERMIT IS CONDITIONED UPON:**

See conditions on attached "Exhibit A", dated December 7, 1999

**AUTHORIZED BY:** St. Johns River Water Management District  
Department of Resource Management

By:   
Dwight Jenkins  
Division Director

**"EXHIBIT A"**  
**CONDITIONS FOR ISSUANCE OF PERMIT NUMBER 2609**  
**AQUA UTILITIES FLORIDA**  
**DATED DECEMBER 7, 1999**

1. District Authorized staff, upon proper identification, will have permission to enter, inspect and observe permitted and related facilities in order to determine compliance with the approved plans, specifications and conditions of this permit.
2. Nothing in this permit should be construed to limit the authority of the St. Johns River Water Management District to declare a water shortage and issue orders pursuant to Section 373.175, Florida Statutes, or to formulate a plan for implementation during periods of water shortage, pursuant to Section 373.246, Florida Statutes. In the event a water shortage, is declared by the District Governing Board, the permittee must adhere to the water shortage restriction as specified by the District, even though the specified water shortage restrictions may be inconsistent with the terms and conditions of this permit.
3. Prior to the construction, modification, or abandonment of a well, the permittee must obtain a Water Well Construction Permit from the St. Johns River Water Management District, or the appropriate local government pursuant to Chapter 40C-3, Florida Administrative Code. Construction, modification, or abandonment of a well will require modification of the consumptive use permit when such construction, modification or abandonment is other than that specified and described on the consumptive use permit application form.
4. Leaking or inoperative well casings, valves, or controls must be repaired or replaced as required to eliminate the leak or make the system fully operational.
5. Legal uses of water existing at the time of the permit application may not be interfered with by the consumptive use. If unanticipated interference occurs, the District may revoke the permit in whole or in part to curtail or abate the interference unless the permittee mitigates for the interference. In those cases where other permit holders are identified by the District as also contributing to the interference, the permittee may choose to mitigate in a cooperative effort with these other permittees. The permittee must submit a mitigation plan to the District for approval prior to implementing such mitigation.
6. Off-site land uses existing at the time of permit application may not be significantly adversely impacted as a result of the consumptive use. If unanticipated significant adverse impacts occur, the District shall revoke the permit in whole or in part to curtail or abate the adverse impacts, unless the impacts can be mitigated by the permittee.
7. The District must be notified, in writing, within 30 days of any sale, conveyance, or other transfer of a well or facility from which the permitted consumptive use is made or within 30 days of any transfer of ownership or control of the real property at which the permitted consumptive use is located. All transfers of ownership or transfers of permits are subject to the provisions of section 40C-1.612, Florida Administrative Code.
8. A District-issued identification tag shall be prominently displayed at each withdrawal site by permanently affixing such tag to the pump, headgate, valve or other withdrawal facility as provided by Section 40C-2.401, Florida Administrative Code. Permittee shall notify the District in the event that a replacement tag is needed.
9. If the permittee does not serve a new projected demand located within the service area upon which the annual allocation was calculated, the annual allocation will be subject to modification.

10. Landscape irrigation is prohibited between the hours of 10:00 a.m. and 4:00 p.m., except as follows:
  - (a) Irrigation using a micro-irrigation system is allowed anytime.
  - (b) The use of reclaimed water for irrigation is allowed anytime, provided appropriate signs are placed on the property to inform the general public and District enforcement personnel of such use. Such signs must be in accordance with local restrictions.
  - (c) Irrigation of, or in preparation for planting, new landscape is allowed any time of day for one 30 day period provided irrigation is limited to the amount necessary for plant establishment.
  - (d) Watering in of chemicals, including insecticides, pesticides, fertilizers, fungicides, and herbicides when required by law, the manufacturer, or best management practices is allowed anytime within 24 hours of application.
  - (e) Irrigation systems may be operated anytime for maintenance and repair purposes not to exceed ten minutes per hour per zone.
11. This permit will expire on December 7, 2019.
12. Maximum annual withdrawal from the Floridan Aquifer for household type uses must not exceed:
  - 15.610 million gallons from 1999 to 2000
  - 15.790 million gallons from 2000 to 2001
  - 15.960 million gallons from 2001 to 2002
  - 16.130 million gallons from 2002 to 2003
  - 16.300 million gallons from 2003 to 2004
  - 16.470 million gallons from 2004 to 2005
  - 16.650 million gallons from 2005 to 2006
  - 16.820 million gallons from 2006 to 2007
  - 16.990 million gallons from 2007 to 2008
  - 17.160 million gallons from 2008 to 2009
  - 17.340 million gallons from 2009 to 2010
  - 17.510 million gallons from 2010 to 2011
  - 17.680 million gallons from 2011 to 2012
  - 17.850 million gallons from 2012 to 2013
  - 18.030 million gallons from 2013 to 2014
  - 18.200 million gallons from 2014 to 2015
  - 18.370 million gallons from 2015 to 2016
  - 18.540 million gallons from 2016 to 2017
  - 18.710 million gallons from 2017 to 2018
  - 18.890 million gallons from 2018 to 2019
13. Permittee must implement the conservation plan approved by the District in accordance with the schedule contained therein.
14. The lowest quality water source, such as reclaimed water and surface/storm water, must be used as irrigation water when deemed feasible pursuant to District rules and applicable state law.
15. Well Nos.1 and 2, as listed on the application, are equipped with individual, totalizing flowmeters. These meters must maintain 95% accuracy, be verifiable, and be installed according to the manufacturer's specifications.

16. Total withdrawal from Well No. 1 and 2, as listed on the application, must be recorded continuously, totaled monthly, and reported to the District at least every six months for the duration of this permit using District Form No. EN-50. The reporting dates each year will be as follows:

Reporting Period	Report Due Date
January - June	July 31
July - December	January 31

17. The permittee must have the flow meters calibrated once every 3 years within 30 days of the anniversary date of permit issuance, and recalibrated if the difference between the actual flow and the meter reading is greater than 5%. District Form No. EN-51 must be submitted to the District within 10 days of the inspection/ calibration.

18. All submittals made to demonstrate compliance with this permit must include the permit number 2609 plainly labeled.



**SAMPLES**

**DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION AND LABORATORY REPORTING FORMAT**

**HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.**  
 5600 U.S. 1 North, Fort Pierce FL 34946  
 Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-5384

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080  
 4155 St. Johns Parkway Suite 1300 Sanford, FL 32771 FDOH # E83509  
 307 Coolidge Ave. Lehigh Acres, FL 33936 FDOH # E85370  
 16331 Cortez Blvd. Brooksville, FL 3460 FDOH # E84418

HBEL Report Number: 2130128 Sub-Contract Lab ID: \_\_\_\_\_

Analysis Method Requested:  
 Coliform  Membrane Filtration PWS I.D. 3351009

System Name: 447 Ricciola Island (AUF-LAKE CO.)  
 System Address: 5133 ALBERT RD.

Lab Receipt Date and Time: 12/6/07 1215  
 Received for Laboratory By: PAUL  
 Analysis Date and Time: 12/6/07 1505  
 Sample Acceptance Criteria:  
 Sample Preservation  On Ice  Not On Ice 3.0°C  
 Disinfectant Check  Not Detected  >0.1 mg/l

City: LEESBURG System or Owner's Phone #: 352-787-0980 Fax #: 787-6333

Collector: [Signature] Collector's Phone #: SAC

Relinquished By: [Signature] Received By: [Signature] Relinquished By: [Signature]  
 Date/Time: 12/6/07 Date/Time: 12/6/07 Date/Time: 12/6/07 12:15

Type of Supply: (check only one)  
 Community Water System  Noncommunity Water System  Nontransient-Noncommunity Water System  Limited Use System  
 Private Well  Swimming Pool  Bottled Water  Other

Reason for Sampling: (check only one)  Routine Compliance  Repeat  Replacement  Main Clearance  Well Survey  Other

Sample Collection Date(s): 12/5/07

**LABORATORY CERTIFICATE OF ANALYSIS**

TO BE COMPLETED BY COLLECTOR OF SAMPLE						LABORATORY CERTIFICATE OF ANALYSIS				
Sample Number	SAMPLE POINT (Location or Specific Address)	Collection Time	Sample Type <sup>1</sup>	Disinfect Res'd mg/L	pH	Total Coliform Analysis Method: (MF) SM9222B (Coliform) SM9223B	Fecal (MF) SM9221E	E. coli (MF) EC+MUG (Coliform) SM9223B	Lab Sample Number	
Non Coliform	Total Coliform	Fecal or E. Coli	Data Qual. <sup>2</sup>							
W1	Wku 1	1:15	R	-	-	A			2130128001	
W2	Wku 2 (NOT IN SERVICE)								002	
R1	5033 ROBIN	12:55	D	1.0	-	A			0032	
R2	33548 PEECUT DR	1:05	D	1.0	-	A			21301280043	

Average of disinfectant residuals for routine and repeat samples. (Complete for community and nontransient noncommunity systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.) 1.0

Disinfectant Residual Analysis Method:  DPD Colorimetric  Other  
 Person performing analysis is:  
 certified operator (# CL597)  Employed by a certified lab  
 Supervised by a certified operator (# \_\_\_\_\_)  Employed by DEP or DOH

Key: P - Present A - Absent C - Confluent Growth  
 TNTC - Too Numerous to Count TA - Turbid  
 L.C.A. - Absence of gas or acid  
 Report authorized by: [Signature] Analyst: PAUL  
 Date: 12/6/07 Technical Director or Designee  
 Unless otherwise noted, all test results contained within this report meet all applicable Method, Laboratory and NELAC guidelines. Questions regarding this report should be directed to the report Signatory at the phone number above.

Name and Mailing Address of Person/Firm to Receive Report  
**Aqua Utilities Florida, Inc.**  
 1100 Thomas Avenue  
 Leesburg, FL 34748  
ATTN: PATRICK FARRIS



Page 1 of 1

Satisfactory  Repeat Samples Required  
 Incomplete Collection Information  Replacement Samples Required  
 Date Reviewed by DEP/DOH: \_\_\_\_\_  
 DEP/DOH Reviewing Official: \_\_\_\_\_

<sup>1</sup> DEP Sample Types: D-Distribution (Routine Compliance); C-Repeat or Check; R-Raw; N-Entry to Distribution; P-Plant Tap; S-Special (clearance, etc.) <sup>2</sup> Defined in Florida Administrative Code Rule 62-16D  
 Top Form - ORIGINAL FORM # 1875 - PRINTING BY HEARN Middle Form - LABORATORY Post Form - CLIENT

DOCUMENT NUMBER - DATE 04312 MAY 22 07  
 FPSC - COMMISSION CLERK

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

500 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

Date issued: February 27, 2007

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

Client: Aqua Utilities Florida, Inc.  
Workorder ID: 6417Picciola Isl NO2/NO3 [2127962]  
Received: 2/20/07 13:00

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:  
E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,



Cindy Cromer  
Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 2/27/07



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 467-2400, Ext. 285 Fax: (772) 467-1584

**Quality Control Summary**

Client: Aqua Utilities Florida, Inc.  
Workorder ID: 6417Picciola Isl NO2/NO3  
Received: 2/20/07 13:00

[2127962]

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

**HBEL Sample**

**Method Narratives (If Applicable)**

<u>Number</u>	<u>Sample ID</u>	<u>Analytical Method</u>	<u>Description</u>
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**Quality Control Summary**

<u>Method</u>	<u>HBEL Batch</u>	<u>Analyte</u>
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<u>Analytical Issue</u>
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5800 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4165 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 2/27/07



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-5884

**CERTIFICATE OF ANALYSIS**

[2127962]

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6417Picciola Isl NO2/NO3

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID:		<b>2127962001</b>		Sampled: 02/20/07 9:10		Received: 02/20/07 13:00				
Sample ID:		<b>Point of Entry</b>		Matrix: Water		Results reported on Wet Weight Basis				
Nitrate as N		1.1	mg/L	0.0030	EPA 300.0	IC7128		02/21/07 14:00	JL	E96080
Nitrite as N		0.0022 U	mg/L	0.0022	EPA 300.0	IC7128		02/21/07 14:00	JL	E96080

Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080  
Printed: 2/27/07

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509



307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

500 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

Date issued: October 10, 2006

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

---

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Picciola 6417 THM/HAA5 Grab [2126879]  
Received: 9/21/06 13:00

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Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:  
E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,

  
Cindy Cromer  
Technical Director or Designee

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FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 10/10/06



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

7600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

**Quality Control Summary**

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Picciola 6417 THM/HAA5 Grab  
Received: 9/21/06 13:00

[2126879]

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

<b>HBEL Sample</b>				<b>Method Narratives (if Applicable)</b>			
<u>Number</u>	<u>Sample ID</u>	<u>Analytical Method</u>					<u>Description</u>

**Quality Control Summary**

<u>Method</u>	<u>HBEL Batch</u>	<u>Analyte</u>	<u>Analytical Issue</u>
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5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080  
Printed: 10/10/06

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509



307 Coolidge Avenue  
Lahigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 225 Fax: (772) 467-5884

**CERTIFICATE OF ANALYSIS**

[2126879]

Client: Aqua Utilities Florida, Inc.

Workorder ID: Picciola 6417 THM/HAA5 Grab

Parameter	Qualifier	Result <sup>1</sup>	Units	Reporting Limit	Method	Laboratory Prep Batch	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID: <b>2126879001</b>						Sampled: 09/21/06 8:05			
Sample ID: <b>33605 Picciola Dr MRT</b>						Received: 09/21/06 13:00			
						Matrix: Water			
						Results reported on Wet Weight Basis			
Bromodichloromethane		1.8	ug/L	0.25	EPA 524.2	VOC2702	10/2/06 23:07	WR	E96080
Bromoform	U	0.41	ug/L	0.41	EPA 524.2	VOC2702	10/2/06 23:07	WR	E96080
Chloroform		1.2	ug/L	0.25	EPA 524.2	VOC2702	10/2/06 23:07	WR	E96080
Dibromochloromethane		1.7	ug/L	0.30	EPA 524.2	VOC2702	10/2/06 23:07	WR	E96080
Total THMs		4.9	ug/L	0.50	EPA 524.2	VOC2702	10/2/06 23:07	WR	E96080

<sup>1</sup>Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418



Printed: 10/10/06



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

Date issued: June 26, 2006

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6417 Picciola Isl Triannual DW

[2125812]

Received: 5/24/06 13:30

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:

E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,

  
Cindy Cromer  
Technical Director or Designee

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FDOH # E96080

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FDOH # E83509



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Lehigh Acres, FL 33936

FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601

FDOH # E84418

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-1584

**Quality Control Summary**

Client: Aqua Utilities Florida, Inc.  
Workorder ID: 6417 Picciola Isl Triannual DW  
Received: 5/24/06 13:30

[2125812]

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

HBEL Sample		Method Narratives (If Applicable)	
Number	Sample ID	Analytical Method	Description
2125812001	POE Grab	EPA 525.2	No MS/MSD analyzed in batch. Precision and Accuracy determined with LCS/LCSD
		EPA 531.1	No MS/MSD analyzed in batch. Precision and Accuracy determined with LCS/LCSD
		EPA 531.1	No MS/MSD analyzed in batch. Precision and Accuracy determined with LCS/LCSD

**Quality Control Summary**

Method	HBEL Batch	Analyte	Analytical Issue
<u>EPA 300.0</u>			
	IC6806		
2125812001	Nitrate as N		Accuracy - Outside acceptance limits in the MS.
2125812001	Nitrate as N		Accuracy - Outside acceptance limits in the MSD.
2125812001	Nitrite as N		Accuracy - Outside acceptance limits in the MS.
2125812001	Nitrite as N		Accuracy - Outside acceptance limits in the MSD.
<u>EPA 505</u>			
	PEST4743		
2125812001	Decachlorobiphenyl		Surrogate - Outside acceptance Limits.

The above due to matrix effects. Accuracy/Precision demonstrated with other QC samples.

5600 US 1 North  
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FDOH # E96080

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Sanford, FL 32771  
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FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 6/26/06



# HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.

5600 U.S. 1 North, Fort Pierce, FL 34946  
 Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-1584

## CERTIFICATE OF ANALYSIS

[2125812]

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6417 Picciola Isl Triannual DW

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID:		2125812001		Sampled: 05/24/06 10:15		Received: 05/24/06 13:30				
Sample ID:		POE Grab		Matrix: Water		Results reported on Wet Weight Basis				
Odor		1.0	T.O.N.	1.0	EPA 140.1	WCDE14651		05/24/06 16:30	PA	E83509
pH [6.5-8.5]	Q	8.03	SU	0.200	EPA 150.1	WCGE25657		05/26/06 16:53	GG	E96080
Aluminum		0.0030 U	mg/L	0.0030	EPA 200.7	META7971		05/26/06 15:17	SP	E96080
Barium		0.0071	mg/L	0.0018	EPA 200.7	META7971		05/26/06 15:17	SP	E96080
Beryllium		0.00010 U	mg/L	0.00010	EPA 200.7	META7971		05/26/06 15:17	SP	E96080
Cadmium		0.00070 U	mg/L	0.00070	EPA 200.7	META7971		05/26/06 15:17	SP	E96080
Chromium		0.0018 U	mg/L	0.0018	EPA 200.7	META7971		05/26/06 15:17	SP	E96080
Copper		0.0014 U	mg/L	0.0014	EPA 200.7	META7971		05/26/06 15:17	SP	E96080
Iron		0.025 U	mg/L	0.025	EPA 200.7	META7971		05/26/06 15:17	SP	E96080
Manganese		0.0037 U	mg/L	0.0037	EPA 200.7	META7971		05/26/06 15:17	SP	E96080
Nickel		0.0020 U	mg/L	0.0020	EPA 200.7	META7971		05/26/06 15:17	SP	E96080
Silver		0.0010 U	mg/L	0.0010	EPA 200.7	META7971		05/26/06 15:17	SP	E96080
Sodium		6.8	mg/L	0.50	EPA 200.7	META7971		05/26/06 15:17	SP	E96080
Zinc		0.010 U	mg/L	0.010	EPA 200.7	META7971		05/26/06 15:17	SP	E96080
Lead		0.00061 U	mg/L	0.00061	EPA 200.9	META7972		05/26/06 11:54	SP	E96080
Selenium		0.0022 U	mg/L	0.0022	EPA 200.9	META7976		06/2/06 17:28	SP	E96080
Thallium		0.0010 U	mg/L	0.0010	EPA 200.9	META7973		06/2/06 15:15	SP	E96080
Mercury		0.000060 U	mg/L	0.000060	EPA 245.1	META7988	06/15/06 11:00	06/16/06 15:58	DM	E96080
Chloride		13	mg/L	5.0	EPA 300.0	IC6809		05/30/06 22:37	JL	E96080
Fluoride		0.094	mg/L	0.011	EPA 300.0	IC6806		05/25/06 15:22	JL	E96080
Nitrate as N		1.1	mg/L	0.0030	EPA 300.0	IC6806		05/25/06 15:22	JL	E96080
Nitrite as N		0.0022 U	mg/L	0.0022	EPA 300.0	IC6806		05/25/06 15:22	JL	E96080
Sulfate		5.8	mg/L	1.4	EPA 300.0	IC6809		05/30/06 22:37	JL	E96080
1,2-Dibromo-3-chloropropane		0.0020 U	ug/L	0.0020	EPA 504.1	PEST4745	06/7/06 16:20	06/7/06 19:13	CAC	E96080
1,2-Dibromoethane		0.0047 U	ug/L	0.0047	EPA 504.1	PEST4745	06/7/06 16:20	06/7/06 19:13	CAC	E96080
Chlordane		0.13 U	ug/L	0.13	EPA 505	PEST4743	05/31/06 12:26	05/31/06 23:54	JL	E96080
Endrin		0.099 U	ug/L	0.099	EPA 505	PEST4743	05/31/06 12:26	05/31/06 23:54	JL	E96080
gamma-BHC (Lindane)		0.019 U	ug/L	0.019	EPA 505	PEST4743	05/31/06 12:26	05/31/06 23:54	JL	E96080
Heptachlor		0.035 U	ug/L	0.035	EPA 505	PEST4743	05/31/06 12:26	05/31/06 23:54	JL	E96080
Heptachlor epoxide		0.027 U	ug/L	0.027	EPA 505	PEST4743	05/31/06 12:26	05/31/06 23:54	JL	E96080
Melthoxychlor		0.043 U	ug/L	0.043	EPA 505	PEST4743	05/31/06 12:26	05/31/06 23:54	JL	E96080
PCB		0.13 U	ug/L	0.13	EPA 505	PEST4743	05/31/06 12:26	05/31/06 23:54	JL	E96080
Toxaphene		0.59 U	ug/L	0.59	EPA 505	PEST4743	05/31/06 12:26	05/31/06 23:54	JL	E96080
2,4,5-TP		0.19 U	ug/L	0.19	EPA 515.1	PEST4741	05/30/06 7:26	06/6/06 23:26	CAC	E96080
2,4-D		0.22 U	ug/L	0.22	EPA 515.1	PEST4741	05/30/06 7:26	06/6/06 23:26	CAC	E96080
Dalapon		2.3 U	ug/L	2.3	EPA 515.1	PEST4741	05/30/06 7:26	06/6/06 23:26	CAC	E96080
Dinoseb		0.23 U	ug/L	0.23	EPA 515.1	PEST4741	05/30/06 7:26	06/6/06 23:26	CAC	E96080
Pentachlorophenol		0.39 U	ug/L	0.39	EPA 515.1	PEST4741	05/30/06 7:26	06/6/06 23:26	CAC	E96080
Picloram		0.23 U	ug/L	0.23	EPA 515.1	PEST4741	05/30/06 7:26	06/6/06 23:26	CAC	E96080
1,1,1-Trichloroethane		0.21 U	ug/L	0.21	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
1,1,2-Trichloroethane		0.44 U	ug/L	0.44	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080

5600 US 1 North  
 Fort Pierce, FL 34946  
 FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
 Sanford, FL 32771  
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Page 3 of 6

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-1584

**CERTIFICATE OF ANALYSIS**

[2125812]

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6417 Picciola Isl Triannual DW

Parameter	Qualifier	Result <sup>1</sup>	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
1,1-Dichloroethene		0.23 U	ug/L	0.23	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
1,2,4-Trichlorobenzene		0.41 U	ug/L	0.41	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
1,2-Dichlorobenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
1,2-Dichloroethane		0.29 U	ug/L	0.29	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
1,2-Dichloropropane		0.40 U	ug/L	0.40	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
1,4-Dichlorobenzene		0.23 U	ug/L	0.23	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
Benzene		0.20 U	ug/L	0.20	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
Carbon tetrachloride		0.24 U	ug/L	0.24	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
Chlorobenzene		0.30 U	ug/L	0.30	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
cis-1,2-Dichloroethene		0.21 U	ug/L	0.21	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
Ethylbenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
Methylene chloride		0.23 U	ug/L	0.23	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
Styrene		0.21 U	ug/L	0.21	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
Tetrachloroethene		0.24 U	ug/L	0.24	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
Toluene		0.22 U	ug/L	0.22	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
Total Xylenes		0.46 U	ug/L	0.46	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
trans-1,2-Dichloroethene		0.35 U	ug/L	0.35	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
Trichloroethene		0.36 U	ug/L	0.36	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
Vinyl chloride		0.32 U	ug/L	0.32	EPA 524.2	VOC2643		06/6/06 20:28	WR	E96080
Alachlor		0.69 U	ug/L	0.69	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 22:00	WR	E96080
Atrazine		0.55 U	ug/L	0.55	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 22:00	WR	E96080
Benzo(a)pyrene		0.079 U	ug/L	0.079	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 22:00	WR	E96080
bis(2-ethylhexyl)phthalate		0.96 U	ug/L	0.96	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 22:00	WR	E96080
Di(2-ethylhexyl)adipate		0.77 U	ug/L	0.77	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 22:00	WR	E96080
Hexachlorobenzene		0.35 U	ug/L	0.35	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 22:00	WR	E96080
Hexachlorocyclopentadiene		0.27 U	ug/L	0.27	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 22:00	WR	E96080
Simazine		0.71 U	ug/L	0.71	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 22:00	WR	E96080
Carbofuran		0.50 U	ug/L	0.50	EPA 531.1	SAL1013		06/20/06 19:45	SAL	E84129
Oxamyl		0.50 U	ug/L	0.50	EPA 531.1	SAL1013		06/20/06 19:45	SAL	E84129
Glyphosate		26 U	ug/L	26	EPA 547	HPLC2303		05/25/06 15:18	JJM	E96080
Endothal		2.8 U	ug/L	2.8	EPA 548.1	SVOC2415	05/30/06 7:26	06/13/06 18:43	WR	E96080
Diquat		4.8 U	ug/L	4.8	EPA 549.2	HPLC2306	05/30/06 8:01	06/8/06 9:12	JJM	E96080
Antimony		0.0010 U	mg/L	0.0010	SM 3113 B	SAL1014		06/6/06 14:29	SAL	E84129
Arsenic		0.0010 U	mg/L	0.0010	SM 3113 B	SAL1014		06/6/06 11:26	SAL	E84129
Color		4.0	CU	1.8	SM2120 B	WCGE25640		05/25/06 14:15	TCL	E96080
Total Dissolved Solids		180	mg/L	16	SM2540 C	WCGE25661		05/28/06 12:45	SP	E96080
Cyanide		0.0047 U	mg/L	0.0047	SM4500CN E	WCGE25699	05/29/06 9:30	05/29/06 12:50	GG	E96080
Surfactants as LAS, Mol.wt.340		0.022 U	mg/L	0.022	SM5540 C	WCGE25648	05/25/06 13:15	05/25/06 16:22	GG	E96080

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FDOH # E96080

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FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418



Printed: 6/26/06

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

**CERTIFICATE OF ANALYSIS**

[2125812]

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6417 Picciola Isl Triannual DW

Parameter	Qualifier	Result <sup>1</sup>	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
<b>Laboratory ID: 2125812002</b>						<b>Sampled: Received: 05/24/06 13:30</b>				
<b>Sample ID: Trip Blanks</b>						<b>Matrix: Water Results reported on Wet Weight Basis</b>				
1,1,1-Trichloroethane		0.21 U	ug/L	0.21	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
1,1,2-Trichloroethane		0.44 U	ug/L	0.44	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
1,1-Dichloroethene		0.23 U	ug/L	0.23	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
1,2,4-Trichlorobenzene		0.41 U	ug/L	0.41	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
1,2-Dichlorobenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
1,2-Dichloroethane		0.29 U	ug/L	0.29	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
1,2-Dichloropropane		0.40 U	ug/L	0.40	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
1,4-Dichlorobenzene		0.23 U	ug/L	0.23	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
Benzene		0.20 U	ug/L	0.20	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
Carbon tetrachloride		0.24 U	ug/L	0.24	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
Chlorobenzene		0.30 U	ug/L	0.30	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
cis-1,2-Dichloroethene		0.21 U	ug/L	0.21	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
Ethylbenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
Methylene chloride		0.23 U	ug/L	0.23	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
Styrene		0.21 U	ug/L	0.21	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
Tetrachloroethene		0.24 U	ug/L	0.24	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
Toluene		0.22 U	ug/L	0.22	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
Total Xylenes		0.46 U	ug/L	0.46	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
trans-1,2-Dichloroethene		0.35 U	ug/L	0.35	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
Trichloroethene		0.36 U	ug/L	0.36	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080
Vinyl chloride		0.32 U	ug/L	0.32	EPA 524.2	VOC2643		06/6/06 21:02	WR	E96080

<sup>1</sup>Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.

Q Sample held beyond the accepted holding time.

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FDOH # E83509

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Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 6/26/06



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

Date issued: March 17, 2006

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

Client: Aqua Utilities Florida, Inc.  
Workorder ID: 6417 Picciola Isl NO2/NO3  
Received: 3/09/06 13:30

[2125018]

Dear Brian Heath;

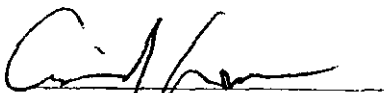
Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2002 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:

E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,



Cindy Cromer  
Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

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Lehigh Acres, FL 3393  
FDOH # E85370

2514 Osawaw Boulevard  
Spring Hill, FL 3460  
FDOH # E84418

Printed: 3/17/06



**HARBOR BRANCH  
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Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

**Quality Control Summary**

**Client:** Aqua Utilities Florida, Inc.  
**Workorder ID:** 6417 Picciola Isl NO2/NO3  
**Received:** 3/09/06 13:30

**[2125018]**

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

<u>HBEL Sample</u>		<b>Method Narratives (If Applicable)</b>	
<u>Number</u>	<u>Sample ID</u>	<u>Analytical Method</u>	<u>Description</u>

**Quality Control Summary**

<u>Method</u>	<u>HBEL Batch</u>	<u>Analyte</u>	<u>Analytical Issue</u>
---------------	-------------------	----------------	-------------------------

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FDOH # E84418

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**CERTIFICATE OF ANALYSIS**

[2125018]

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6417 Picciola Isl NO2/NO3

Parameter	Qualifier	Result <sup>1</sup>	Units	Reporting Limit	Method	Laboratory Prep Batch	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID: 2125018001					Sampled: 03/09/06 9:35				
Sample ID: P.O.E. Grab					Received: 03/09/06 13:30				
					Matrix: Water				
					Results reported on Wet Weight Basis				
Nitrate as N		1.0	mg/L	0.0030	EPA 300.0	IC6715	03/10/06 19:52	RS	E96080
Nitrite as N		0.0022 U	mg/L	0.0022	EPA 300.0	IC6715	03/10/06 19:52	RS	E96080

<sup>1</sup>Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
Applicable Florida Department of Environmental Protection Qualifiers defined below Statement of Estimated Uncertainty available upon request.

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FDOH # E85370

2514 Osawaw Boulevard  
Spring Hill, FL 3460  
FDOH # E84418

Printed: 3/17/06





CORRESPONDENCE



# Florida Department of Environmental Protection

Central District  
3319 Maguire Boulevard, Suite 232  
Orlando, Florida 32803-3767

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

VIA EMAIL  
[JMLIHVARCIK@AQUAAMERICA.COM]

June 29, 2007

Jack Lihvarcik, President  
Aqua Utilities Florida, Inc.  
1100 Thomas Avenue  
Leesburg, FL 34748

OCD-PW-SS-07-0817

<u>Lake County – PW</u>	<u>PWS ID Number</u>
Friendly Center Subdivision	3350426
East Lake Harris Estates	3350322
Stone Mountain Estates	3351282
Palm Mobile Home Estates	3350981
Piney Woods Subdivision (2 WTPs)	3351021
Hobby Hill Subdivision	3350544
Picciola Island Subdivision	3351009
Carlton Village	3350152

Dear Mr. Lihvarcik:

This confirms a visit to the subject community public water systems on April 18, 2007, by Danielle Owens to conduct sanitary survey inspections. Copies of the sanitary survey inspection reports are enclosed for your reference and records.

Deficiencies found during the sanitary surveys and in Department records are listed in the enclosed reports. These deficiencies shall be corrected in order to return to compliance with *Florida Administrative Code* (F.A.C.) Rules 62-550, 62-555, 62-560 and 62-602.

Please correct the indicated deficiencies, and notify the Department in writing that the deficiencies have been corrected, **no later than August 6, 2007**. (You may use the attached response form to indicate the corrective actions taken.)

If you have any questions, please contact Danielle Owens by email at [Danielle.D.Owens@dep.state.fl.us](mailto:Danielle.D.Owens@dep.state.fl.us) or by phone at (407) 894-7555, extension 2216.

Sincerely,

Kim Dodson, Environmental Manager  
Drinking Water Compliance and Enforcement

KMD/ddo  
Enclosures

cc: Patrick Farris, Aqua Utilities Florida, Inc. [PAFarris@aquaaamerica.com]  
Danielle Owens, FDEP Drinking Water Compliance

DOCUMENT NUMBER-DATE

04312 MAY 22 08

FPSC-COMMISSION CLERK



**GROUND WATER SOURCE**

Well Number (FLUWID No.)	1 (AAC3233)	2 (AAC3233)		
Year Drilled	1950	1959		
Depth Drilled	175'	164'		
Drilling Method	Unknown	Unknown		
Type of Grout	Unknown	Unknown		
Static Water Level	Unknown	Unknown		
Pumping Water Level	Unknown	Unknown		
Design Well Yield	Unknown	Unknown		
Test Yield	Unknown	Unknown		
Actual Yield (if different than rated capacity)	Unknown	Unknown		
Strainer	Unknown	Unknown		
Length (outside casing)	Unknown	Unknown		
Diameter (outside casing)	6"	6"		
Material (outside casing)	Black steel	Black steel		
Well Contamination History	None	None		
Is inundation of well possible?	No	No		
6' X 6' X 4" Concrete Pad	Yes	Yes		
SET BACKS	Septic Tank	200'	130'	
	Reuse Water	N/A	N/A	
	WW Plumbing	>100'	>100'	
	Other Sanitary Hazard	None observed	None observed	
PUMP	Type	Vertical turbine	Submersible	
	Manufacturer Name	Sta-Rite	Goulds	
	Model Number	Unknown	225H10-3	
	Rated Capacity (gpm)	150	175	
	Motor Horsepower	7.5	10	
Well casing 12" above grade?	Yes	No		
Well Casing Sanitary Seal	Ok	Ok		
Raw Water Sampling Tap	Yes	Yes		
Above Ground Check Valve	Yes	Yes		
Fence/Housing	Fence	Housing		
Well Vent Protection	N/A	N/A		

**COMMENTS** The Department will continue to accept the septic tank set back distance and the well casing upper terminus of well #2 unless the well is shown to be microbially or chemically contaminated.

**CHLORINATION (Disinfection)**

Type:  Gas  Hypo  
 Make Chem-tech Capacity      \* gpd  
 Chlorine Feed Rate #1 & #2 50% stroke  
 Avg. Amount of Cl<sub>2</sub> gas used N/A  
 Chlorine Residuals: Plant 0.94 Remote 0.76  
 Remote tap location 33436 Picciola Drive  
 DPD Test Kit:  On-site  With operator  
 None  Not Used Daily  
 Injection Points Prior to hydropneumatic tank  
 Booster Pump Info N/A  
 Comments Two hypochlorinator pumps: #1 - 30 gpd, #2 - 15 gpd

**STORAGE FACILITIES**

(G) Ground (H) Hydropneumatic (E) Elevated  
 (B) Bladder (C) Clearwell

Tank Type/Number	H/I		
Capacity (gal)	5,000		
Material	Steel		
Gravity Drain	Yes		
By-pass Piping	Yes		
Pressure Gauge	Yes		
Sight Glass or Level Indicator	Yes		
Fittings for Sight Glass	Yes		
Protected Openings	Yes		
PRV/ARV	PRV		
On/Off Pressure	40/60		
Access Padlocked	Yes		
Height to Bottom of Elevated Tank	N/A		
Height to Max. Water Level	N/A		

Comments Provide documentation of last cleaning and inspection of finished water storage tanks.

Chlorine Gas Use Requirements	YES	NO	Comments
	Dual System	<input type="checkbox"/>	
Auto-switchover	<input type="checkbox"/>	<input type="checkbox"/>	
Alarms:			
Loss of Cl <sub>2</sub> capability	<input type="checkbox"/>	<input type="checkbox"/>	
Loss of Cl <sub>2</sub> residual	<input type="checkbox"/>	<input type="checkbox"/>	
Cl <sub>2</sub> leak detection	<input type="checkbox"/>	<input type="checkbox"/>	
Scale	<input type="checkbox"/>	<input type="checkbox"/>	
Chained Cylinders	<input type="checkbox"/>	<input type="checkbox"/>	
Reserve Supply	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate Air-pak	<input type="checkbox"/>	<input type="checkbox"/>	
Sign of Leaks	<input type="checkbox"/>	<input type="checkbox"/>	
Fresh Ammonia	<input type="checkbox"/>	<input type="checkbox"/>	
Ventilation	<input type="checkbox"/>	<input type="checkbox"/>	
Room Lighting	<input type="checkbox"/>	<input type="checkbox"/>	
Warning Signs	<input type="checkbox"/>	<input type="checkbox"/>	
Repair Kits	<input type="checkbox"/>	<input type="checkbox"/>	
Fitted Wrench	<input type="checkbox"/>	<input type="checkbox"/>	
Housing/Protection	<input type="checkbox"/>	<input type="checkbox"/>	

**HIGH SERVICE PUMPS**

Pump Number			
Type			
Make			
Model			
Capacity (gpm)			
Motor HP			
Date Installed			
Maintenance			

Comments \_\_\_\_\_

**AERATION (Gases, Fe, & Mn Removal)**

Type      Capacity       
 Aerator Condition       
 Bloodworm Presence       
 Visible Algae Growth       
 Protective Screen Condition       
 Comments

## **DEFICIENCIES:**

1. **Failure to adequately establish and implement a cross-connection control program.** Implementation of the program was not started until April 2007. Currently, commercial customers are being surveyed, and residential customers should be surveyed by December 31, 2007.

Community water systems, and all public water systems that have service areas also served by reclaimed water systems regulated under Part III of Chapter 62-610, F.A.C., shall establish and implement a routine cross-connection control program to detect and control cross-connections and prevent backflow of contaminants into the water system. This program shall include a written plan that is developed using recommended practices of the American Water Works Association set forth in *Recommended Practice for Backflow Prevention and Cross-Connection Control*, AWWA Manual M14, as incorporated into Rule 62-555.330, F.A.C. [Rule 62-555.360(2), F.A.C.]

Upon discovery of a prohibited cross-connection, public water systems shall either eliminate the cross-connection by installation of an appropriate backflow prevention device acceptable to the Department or shall discontinue service until the contaminant source is eliminated. [Rule 62-555.360(3), F.A.C.]

2. **Failure to keep records documenting that isolation valves are being exercised.**

Suppliers of water shall keep records documenting that their isolation valves are being exercised in accordance with subsection 62-555.350(2), F.A.C. [Rule 62-555.350(12)(c), F.A.C.]

3. **Failure to keep records documenting that dead-end water mains are being flushed.**

Suppliers of water shall keep records documenting that their water mains conveying finished drinking water are being flushed in accordance with subsection 62-555.350(2), F.A.C. [Rule 62-555.350(12)(c), F.A.C.]

## **COMMENTS/REMINDERS:**

- **Lead and copper tap sampling must be conducted during the June-September 2008 monitoring period.**
- **Based on information provided to the Department by email on April 19, 2007, the population served and number of service connections for this system has been changed. These changes may affect this systems monitoring requirements.**

**For chemical monitoring requirements, you are advised to call Marie Carrasquillo at (407) 894-7555, extension 2242, or Paul Morrison at (407) 893-3988.**

All results must be submitted to DEP within the first 10 days following the end of the required monitoring period or the first 10 days following the month in which the sample results were received, whichever time is the shortest. A Florida Department of Health (DOH) certified laboratory must analyze all laboratory samples.

- **Provide documentation of last cleaning and inspection for finished water storage tanks.**

Accumulated sludge and bio-growths shall be cleaned routinely (i.e., at least annually) from all treatment facilities that are in contact with raw, partially treated, or finished drinking water and that are not specifically designed to collect sludge or support a bio-growth; and blistering, chipped, or cracked coatings and linings on treatment or storage facilities in contact with raw, partially treated, or finished drinking water shall be rehabilitated or repaired. [Rule 62-555.350(2), F.A.C.]

Finished-drinking-water storage tanks, including conventional hydropneumatic tanks with an access manhole but excluding bladder- or diaphragm-type hydropneumatic tanks without an access manhole, shall be checked at least annually to ensure that hatches are closed and screens are in place; shall be cleaned at least once every five years to remove biogrowths, calcium or iron/manganese deposits, and sludge from inside the tanks; and shall be inspected for structural and coating integrity at least once every five years by personnel under the responsible charge of a professional engineer licensed in Florida. [Rule 62-555.350(2), F.A.C.]

Ensure proper disinfection and bacteriological evaluation of public water system components in accordance with 62-555.340, F.A.C. Also, ensure proper disposal of heavily chlorinated water from the tank disinfection process.

**COMMENTS/REMINDERS (continued):**

- Provide information for all items marked "unknown."

Inspector *Barbara D. Owens* Title Environmental Specialist I Date 06/21/07

Approved by *Kevin D. Dixon* Title Environmental Manager Date 6/29/07



Aqua Utilities Florida, Inc.  
1100 Thomas Avenue  
Leesburg, FL 34748

T: 352.787.0980  
F: 352.787.6333  
www.aquautilitiesflorida.com

August 10, 2007

Danielle Owens  
Environmental Specialist  
FDEP Central District  
3319 Maguire Blvd., Suite 232  
Orlando, FL 32803-3767

**RE: Reply to Lake County Sanitary Surveys**

Dear Ms. Owens:

Thank you for your inspection on April 18, 2007. The purpose of the correspondence is to provide a written response as requested in your letter.

**For All Systems:**

1. *Failure to adequately establish and implement a cross-connection control program.*

**Response:**

Kim Dodson came to our office on June 28, 2007, and completed a very thorough evaluation of Aqua's Cross Connection Control Policy and our records. Although there is room for improvement, overall she seemed pleased with the progress since your inspection. Aqua will continue to develop this policy and implement it as necessary.

2. *Failure to keep records documenting that isolation valves are being exercised.*

**Response:**

Aqua is looking at software for tracking this statewide which will make our records more organized. Our staff will work on becoming more diligent in making records of the work that they do.

3. *Failure to keep records documenting that dead-end water mains are being flushed.*

**Response:**

Records of flushing are kept on the monthly log sheets are kept at the plant and then at the end of each month, these sheets are brought back to the Leesburg office to be entered on the MORs. These sheets include flushing, main breaks, and fire usage. The month of April



sheet was at each plant during your inspection on the clipboard kept near the operator's logbook. A copy of April 2007's sheets for each facility are attached for your review.

**Friendly Center PWS 3350426:**

1. *Failure to describe emergency or abnormal operating conditions and all maintenance or repair work that involves taking out of operation public water system components.*

**Response:**

Friendly Center is interconnected with East Lake Harris. There were no emergency or abnormal events during the time frame specified in the inspection. There are times when East Lake Harris treatment plant provides the water for both systems. There are also times when Friendly Center pumps more and the East Lake Harris flows are down.

**Hobby Hill Subdivision PWS 3350544:**

1. *Failure to maintain public water systems components. The hydropneumatic tank is showing signs of corrosion.*

**Response:**

The hydropneumatic tank is scheduled to be cleaned and painted. Aqua is in the process of hiring a contractor to inspect all tanks statewide for structural integrity. Copies of these inspections will be forwarded to DEP upon completion.

**Piney Woods Subdivision – 2 WTPs PWS 3351021**

1. *Failure to maintain a separate operation and maintenance log for each water treatment plant. There is only one operation and maintenance logbook for both plants.*

**Response:**

Separate log books for each plant will be maintained from now on.

2. *Failure to provide an operation and maintenance manual for each water treatment plant. There is only one operation and maintenance manual for both plants.*

**Response:**

Separate O+M manuals will be created and maintained for each plant.

If you have any questions, please contact me at (352) 435-4029 or by e-mail at [PAFarris@aquaamerica.com](mailto:PAFarris@aquaamerica.com). Thank you.

Sincerely,

*Patrick Farris*

Patrick A. Farris  
Environmental Compliance Specialist  
Aqua Utilities Florida, Inc.

Enclosure: April 2007 Flushing Records

cc: Will Fontaine, via e-mail  
Brain Heath, via e-mail  
Michael O'Reilly, via e-mail



















**2007 MOR**

**PINEY WOODS**

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** January, 2007

**A. Public Water System (PWS) Information**

PWS Name: <u>Piney Woods</u>	PWS Identification Number: <u>3351021</u>
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: <u>175</u>	Total Population Served at End of Month: <u>613</u>
PWS Owner: <u>Aqua Utilities Florida</u>	
Contact Person: <u>Brian Heath</u>	Contact Person's Title: <u>Area Manager</u>
Contact Person's Mailing Address: <u>PO Box 490310</u>	City: <u>Leesburg</u> State: <u>Florida</u> Zip Code: <u>34749</u>
Contact Person's Telephone Number: <u>(352) 787-0980</u>	Contact Person's Fax Number: <u>(352) 787-6333</u>
Contact Person's E-Mail Address: <u>bheath@aquaaamerica.com</u>	

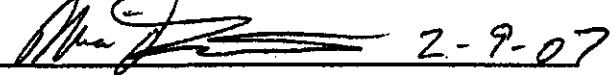
**B. Water Treatment Plant Information**

Plant Name: <u>Piney Woods/Spring Lake Manor</u>	Plant Telephone Number: <u>352-787-0980</u>
Plant Address: <u>2038 Live Oak Drive</u>	City: <u>Fruitland Park</u> State: <u>Florida</u> Zip Code: <u>34731</u>
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>216,000</u>	
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>IV</u>	Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	<u>Will Fontaine</u>	<u>C</u>	<u>6813</u>	<u>Days 1st Shift</u>
Other Operator	<u>Marty Neal</u>	<u>C</u>	<u>10027</u>	<u>Days 1st Shift</u>
	<u>John Worrell</u>	<u>C</u>	<u>6597</u>	<u>Days 1st Shift</u>

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

 2-9-07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

DOCUMENT NUMBER-DATE  
04312 MAY 22 8  
 FPSC-COMMISSION CLERK

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

**III. Daily Data for the Month/Year of: January, 2007**

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place 'X')	Hours plant in Operation	Net Quantity of Finished Water Produced gal	CT Calculations or UV Dose to Demostat Four-Log Virus Inactivation if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	44,000		1.1									0.7	
2	X	24.0	55,000		0.9									0.5	
3	X	24.0	42,000		1.1									0.8	
4	X	24.0	47,000		1.1									0.8	
5	X	24.0	33,000		0.8									0.4	
6	X	24.0	29,000		0.8										
7		24.0	57,500												
8	X	24.0	57,500		1.0									0.5	
9	X	24.0	32,000		1.0									0.7	
10	X	24.0	49,000		1.3									0.8	
11	X	24.0	44,000		1.4									1.0	
12	X	24.0	48,000		1.2									0.8	
13	X	24.0	48,000		1.2										
14		24.0	45,000												
15	X	24.0	45,000		0.9									0.5	
16	X	24.0	39,000		0.9									0.4	
17	X	24.0	44,000		0.9									0.5	
18	X	24.0	45,000		1.0									0.6	
19	X	24.0	49,000		1.0									0.6	
20	X	24.0	10,000		1.1										
21		24.0	61,500												
22	X	24.0	61,500		1.7									1.1	
23	X	24.0	42,000		1.3									1.0	
24	X	24.0	40,000		1.2									0.8	
25	X	24.0	46,000		1.2									0.7	
26	X	24.0	43,000		1.3									0.8	
27	X	24.0	37,000		1.3										
28		24.0	48,500												
29	X	24.0	48,500		1.2									0.9	
30	X	24.0	56,000		1.2									0.8	
31	X	24.0	42,000		1.2									0.9	
Total			1,389,000												
Average			44,806												
Maximum			61,500												

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: January, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place 'X')	Hours plant in Operation	Net Quantity of Finished Water Produced gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0			0.9									0.7	
2	X	24.0			0.6									0.5	
3	X	24.0			0.9									0.8	
4	X	24.0			0.8									0.8	
5	X	24.0	6,300		0.5									0.4	
6	X	24.0			0.5										
7		24.0													
8	X	24.0			0.6									0.5	
9	X	24.0	200		0.8									0.7	
10	X	24.0			1.0									0.8	
11	X	24.0			1.2									1.0	
12	X	24.0			0.9									0.8	
13	X	24.0			0.9										
14		24.0	11,150												
15	X	24.0	11,150		0.7									0.5	
16	X	24.0			0.7									0.4	
17	X	24.0	2,000		0.6									0.5	
18	X	24.0			0.8									0.6	
19	X	24.0			0.7									0.6	
20	X	24.0	20,500		0.7										
21		24.0													
22	X	24.0			1.5									1.1	
23	X	24.0	500		1.1									1.0	
24	X	24.0			0.9									0.8	
25	X	24.0			1.0									0.7	
26	X	24.0			1.1									0.8	
27	X	24.0			1.1										
28		24.0	50												
29	X	24.0	50		1.0									0.9	
30	X	24.0			1.0									0.8	
31	X	24.0			1.1									0.9	
Total			51,900												
Average			1,674												
Maximum			20,500												

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of: <span style="float: right;">January 2007</span>											
Community Water System (CWS) Name: <b>Piney Woods</b>											
Public Water System (PWS) Identification Number: <b>3351021</b>											
Day of Month	Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	Total
	Piney Woods Well 1	Spring Lake Manor Well 2									
	Permitted Maximum Day Operating Capacity of Each Plant, gallons per day										Total
	432,000	201,600									633,600
	Net Quantity of Finished Water Produced by Each Plant, gallons										Total
1	44,000	0									44,000
2	55,000	0									55,000
3	42,000	0									42,000
4	47,000	0									47,000
5	33,000	6,300									39,300
6	29,000	0									29,000
7	57,500	0									57,500
8	57,500	0									57,500
9	32,000	200									32,200
10	49,000	0									49,000
11	44,000	0									44,000
12	48,000	0									48,000
13	48,000	0									48,000
14	45,000	11,150									56,150
15	45,000	11,150									56,150
16	39,000	0									39,000
17	44,000	2,000									46,000
18	45,000	0									45,000
19	49,000	0									49,000
20	10,000	20,500									30,500
21	61,500	0									61,500
22	61,500	0									61,500
23	42,000	500									42,500
24	40,000	0									40,000
25	46,000	0									46,000
26	43,000	0									43,000
27	37,000	0									37,000
28	48,500	50									48,550
29	48,500	50									48,550
30	56,000	0									56,000
31	42,000	0									42,000
<b>Total</b>											1,440,900
<b>Avg</b>											46,481
<b>Max</b>											61,500

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** February, 2007

**A. Public Water System (PWS) Information**


PWS Name:	Piney Woods / Spring Lake Manor			PWS Identification Number:	3351021
PWS Type:	<input checked="" type="checkbox"/> Community	<input checked="" type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	175			Total Population Served at End of Month:	613
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
				Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Piney Woods/Spring Lake Manor			Plant Telephone Number:	352-787-0980	
Plant Address:	2013 Spring Lake Rd / 2038 Live Oak Dr			City:	Fruitland Park	
		State:	Florida	Zip Code:	34731	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>		
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift		
Other Operators:	Marty Neal	C	10027	Days 1st Shift		
	John Worrell	C	6597	Days 1st Shift		

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

 3-8-07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number



# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: February, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	50,000		1.0									0.7	
2	X	24.0	32,000		0.9									0.6	
3	X	24.0	45,000		0.9										
4		24.0	49,500												
5	X	24.0	49,500		1.0									0.6	
6	X	24.0	38,000		1.0									0.7	
7	X	24.0	52,000		1.1									0.7	
8	X	24.0	56,000		0.9									0.6	
9	X	24.0	48,000		1.0									0.6	
10	X	24.0	44,000		1.0										
11		24.0	51,000												
12	X	24.0	51,000		1.2									0.7	
13	X	24.0	52,000		1.3									0.9	
14	X	24.0	43,000		1.2									0.8	
15	X	24.0	55,000		1.3									0.8	
16	X	24.0	45,000		1.3									0.9	
17	X	24.0	34,000		1.3										
18		24.0	55,500												
19	X	24.0	55,500		1.3									0.9	
20	X	24.0	47,000		1.3									0.9	
21	X	24.0	58,000		1.3									0.9	
22	X	24.0	35,000		1.2									0.9	
23	X	24.0	76,000		1.4									0.9	
24	X	24.0	55,000		1.3										
25		24.0	53,500												
26	X	24.0	53,500		1.3									0.9	
27	X	24.0	64,000		1.3									0.9	
28	X	24.0	56,000		1.3									1.0	
29		24.0													
30		24.0													
31		24.0													
Total			1,404,000												
Average			45,290												
Maximum			76,000												

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: February, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place 'X')	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0			0.8									0.7	
2	X	24.0			0.8									0.6	
3	X	24.0			0.8										
4		24.0													
5	X	24.0			0.8									0.6	
6	X	24.0			0.8									0.7	
7	X	24.0			1.0									0.7	
8	X	24.0			0.7									0.6	
9	X	24.0			0.7									0.6	
10	X	24.0			0.7										
11		24.0	200												
12	X	24.0	200		1.0									0.7	
13	X	24.0			1.0									0.9	
14	X	24.0			1.0									0.8	
15	X	24.0			1.0									0.8	
16	X	24.0			1.2									0.9	
17	X	24.0			1.1										
18		24.0													
19	X	24.0			1.1									0.9	
20	X	24.0			1.2									0.9	
21	X	24.0			1.1									0.9	
22	X	24.0			1.1									0.9	
23	X	24.0			1.2									0.9	
24	X	24.0													
25		24.0													
26	X	24.0			1.1									0.9	
27	X	24.0			1.1									0.9	
28	X	24.0			1.2									1.0	
29		24.0													
30		24.0													
31		24.0													
Totals			400												
Average			13												
Maximum			200												

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : February 2007											
Community Water System (CWS) Name: Piney Woods											
Public Water System (PWS) Identification Number: 3351021											
Day of Month	Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	Total
	Piney Woods Well 1	Spring Lake Manor Well 2									
	Permitted Maximum Day Operating Capacity of Each Plant, gallons per day										Total
	432,000	201,600									633,600
	Net Quantity of Finished Water Produced by Each Plant, gallons										Total
1	50,000	0									50,000
2	32,000	0									32,000
3	45,000	0									45,000
4	49,500	0									49,500
5	49,500	0									49,500
6	38,000	0									38,000
7	52,000	0									52,000
8	56,000	0									56,000
9	48,000	0									48,000
10	44,000	0									44,000
11	51,000	200									51,200
12	51,000	200									51,200
13	52,000	0									52,000
14	43,000	0									43,000
15	55,000	0									55,000
16	45,000	0									45,000
17	34,000	0									34,000
18	55,500	0									55,500
19	55,500	0									55,500
20	47,000	0									47,000
21	58,000	0									58,000
22	35,000	0									35,000
23	76,000	0									76,000
24	55,000	0									55,000
25	53,500	0									53,500
26	53,500	0									53,500
27	64,000	0									64,000
28	56,000	0									56,000
29	0	0									0
30	0	0									0
31	0	0									0
<b>Total</b>											1,404,400
<b>Avg</b>											45,303
<b>Max</b>											76,000

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** March, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Piney Woods / Spring Lake Manor			PWS Identification Number:	3351021
PWS Type:	<input checked="" type="checkbox"/> Community	<input checked="" type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	175			Total Population Served at End of Month:	613
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Piney Woods/Spring Lake Manor			Plant Telephone Number:	352-787-0980	
Plant Address:	2013 Spring Lake Rd / 2038 Live Oak Dr			City:	Fruitland Park	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift		
Other Operators	Marty Neal	C	10027	Days 1st Shift		
	John Worrell	C	6597	Days 1st Shift		

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine 4-9-07  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: March, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation.	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	75,000		1.3									1.0	
2	X	24.0	55,000		1.1									0.8	
3		24.0	51,500												
4	X	24.0	51,500		1.3										
5	X	24.0	63,000		1.2									0.8	
6	X	24.0	59,000		1.3									0.9	
7	X	24.0	33,000		1.4									0.9	
8	X	24.0	76,000		1.7									1.2	
9	X	24.0	52,000		1.5									1.2	
10		24.0	66,000												
11	X	24.0	66,000		1.5										
12	X	24.0	70,000		1.2									0.7	
13	X	24.0	54,000		1.2									0.9	
14	X	24.0	43,000		1.3									1.0	
15	X	24.0	74,000		1.2									0.9	
16	X	24.0	69,000		1.2									0.9	
17	X	24.0	41,000		1.3										
18		24.0	72,500												
19	X	24.0	72,500		1.1									0.7	
20	X	24.0	58,000		1.3									0.8	
21	X	24.0	47,000		1.2									0.9	
22	X	24.0	61,000		1.2									0.9	
23	X	24.0	78,000		1.2									0.8	
24	X	24.0	70,000		1.2										
25		24.0	90,000												
26	X	24.0	90,000		1.3									0.9	
27	X	24.0	65,000		1.3									0.9	
28	X	24.0	72,000		1.2									0.8	
29	X	24.0	77,000		1.2									0.8	
30	X	24.0	68,000		1.1									0.8	
31	X	24.0	50,000		1.3										
Total			1,970,000												
Average			63,548												
Maximum			90,000												

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: March, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations				UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>			Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	
1	X	24.0					1.1							1.0	
2	X	24.0					1.0							0.8	
3		24.0													
4	X	24.0					1.2								
5	X	24.0					1.0							0.8	
6	X	24.0					1.0							0.9	
7	X	24.0					1.2							0.9	
8	X	24.0					1.4							1.2	
9	X	24.0					1.3							1.2	
10		24.0													
11	X	24.0					1.3								
12	X	24.0					0.9							0.7	
13	X	24.0					1.0							0.9	
14	X	24.0					1.2							1.0	
15	X	24.0					1.1							0.9	
16	X	24.0	400				1.0							0.9	
17	X	24.0					1.1								
18		24.0													
19	X	24.0					0.9							0.7	
20	X	24.0					0.9							0.8	
21	X	24.0					1.0							0.9	
22	X	24.0					1.1							0.9	
23	X	24.0					1.1							0.8	
24	X	24.0					1.1								
25		24.0													
26	X	24.0					1.2							0.9	
27	X	24.0					1.0							0.9	
28	X	24.0					1.0							0.8	
29	X	24.0					1.1							0.8	
30	X	24.0					0.9							0.8	
31	X	24.0					1.2								
Total			400												
Average			13												
Maximum			400												

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of :											March 2007
Community Water System (CWS) Name: Piney Woods											
Public Water System (PWS) Identification Number: 3351021											
	Plant 1 Name:	Plant 2 Name:	Plant 3 Name:	Plant 4 Name:	Plant 5 Name:	Plant 6 Name:	Plant 7 Name:	Plant 8 Name:	Plant 9 Name:	Plant 10 Name:	
	Piney Woods Well 1	Spring Lake Manor Well 2									
Day of Month	Permitted Maximum Day Operating Capacity of Each Plant, gallons per day										Total
	432,000	201,600									633,600
	Net Quantity of Finished Water Produced by Each Plant, gallons										Total
1	75,000	0									75,000
2	55,000	0									55,000
3	51,500	0									51,500
4	51,500	0									51,500
5	63,000	0									63,000
6	59,000	0									59,000
7	33,000	0									33,000
8	76,000	0									76,000
9	52,000	0									52,000
10	66,000	0									66,000
11	66,000	0									66,000
12	70,000	0									70,000
13	54,000	0									54,000
14	43,000	0									43,000
15	74,000	0									74,000
16	69,000	400									69,400
17	41,000	0									41,000
18	72,500	0									72,500
19	72,500	0									72,500
20	58,000	0									58,000
21	47,000	0									47,000
22	61,000	0									61,000
23	78,000	0									78,000
24	70,000	0									70,000
25	90,000	0									90,000
26	90,000	0									90,000
27	65,000	0									65,000
28	72,000	0									72,000
29	77,000	0									77,000
30	68,000	0									68,000
31	50,000	0									50,000
Total											1,970,400
Avg											63,561
Max											90,000





# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: April, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum Required UV Dose, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
4/1	X	24.0	84,500												0.7
4/2	X	24.0	52,000			1.1									0.7
4/3	X	24.0	90,000			1.1									0.5
4/4	X	24.0	87,000			1.2									0.7
4/5	X	24.0	56,000			1.1									0.8
4/6	X	24.0	84,000			1.2									
4/7		24.0	66,000												
4/8	X	24.0	66,000			1.1									0.8
4/9	X	24.0	49,000			1.2									0.9
4/10	X	24.0	55,000			1.0									0.6
4/11	X	24.0	53,000			1.1									0.8
4/12	X	24.0	54,000			1.3									1.0
4/13	X	24.0	45,000			1.4									
4/14		24.0	63,000												
4/15	X	24.0	63,000			1.8									
4/16	X	24.0	47,000			1.5									1.3
4/17	X	24.0	52,000			1.5									1.2
4/18	X	24.0	72,000			1.4									1.2
4/19	X	24.0	42,000			1.4									1.0
4/20	X	24.0	70,000			1.4									
4/21		24.0	78,500												
4/22	X	24.0	78,500			1.5									1.1
4/23	X	24.0	65,000			1.5									1.1
4/24	X	24.0	75,000			1.4									0.9
4/25	X	24.0	80,000			1.4									1.0
4/26	X	24.0	74,000			1.4									1.0
4/27	X	24.0	50,000			1.4									
4/28		24.0	102,500												
4/29	X	24.0	102,500			1.3									0.9
4/30		24.0													
			2,041,000												
			65,839												
			102,500												

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: April, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
					CT Calculations					UV Dose						
					Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm	Minimum UV Dose Required, mW-sec/cm	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1		24.0	0													0.7
2	X	24.0	0		0.9											0.7
3	X	24.0	0		0.8											0.5
4	X	24.0	0		0.7											0.7
5	X	24.0	400		1.0											0.8
6	X	24.0	0		1.0											
7	X	24.0	0		1.0											
8		24.0	0													0.8
9	X	24.0	0		0.9											0.9
10	X	24.0	0		1.0											0.6
11	X	24.0	200		0.8											0.8
12	X	24.0	0		0.9											1.0
13	X	24.0	0		1.0											
14	X	24.0	0		1.2											
15		24.0	0													
16	X	24.0	0		1.5											1.3
17	X	24.0	0		1.4											1.2
18	X	24.0	0		1.3											1.2
19	X	24.0	0		1.2											1.0
20	X	24.0	0		1.3											
21	X	24.0	0		1.3											
22		24.0	0													1.1
23	X	24.0	0		1.3											1.1
24	X	24.0	0		1.2											0.9
25	X	24.0	0		1.1											1.0
26	X	24.0	0		1.1											1.0
27	X	24.0	0		1.3											
28	X	24.0	0		1.3											
29		24.0	0													0.9
30	X	24.0	0		1.1											
31		24.0	0													
Total			600													
MAINT			19													
MAINT			400													

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : <span style="float: right;">April 2007</span>										
Community Water System (CWS) Name: <b>Piney Woods</b>										
Public Water System (PWS) Identification Number: <b>3351021</b>										
Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	
Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day-Operating Capacity of Each Plant, gallons per day										Total
432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant, gallons										Total
84,500	0									84,500
84,500	0									84,500
52,000	0									52,000
90,000	0									90,000
87,000	400									87,400
56,000	0									56,000
84,000	0									84,000
66,000	0									66,000
66,000	0									66,000
49,000	0									49,000
55,000	200									55,200
53,000	0									53,000
54,000	0									54,000
45,000	0									45,000
63,000	0									63,000
63,000	0									63,000
47,000	0									47,000
52,000	0									52,000
72,000	0									72,000
42,000	0									42,000
70,000	0									70,000
78,500	0									78,500
78,500	0									78,500
65,000	0									65,000
75,000	0									75,000
80,000	0									80,000
74,000	0									74,000
50,000	0									50,000
102,500	0									102,500
102,500	0									102,500
0	0									0
<b>Total</b>										2,041,600
<b>Avg</b>										65,858
<b>Max</b>										102,500

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** May, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Piney Woods / Spring Lake Manor			PWS Identification Number:	3351021
PWS Type:	<input checked="" type="checkbox"/> Community	<input checked="" type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	180			Total Population Served at End of Month:	630
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Zip Code:	34749
Contact Person's E-Mail Address:	beheath@aquaamerica.com				
				Contact Person's Fax Number:	(352) 787-6333

**B. Water Treatment Plant Information**

Plant Name:	Piney Woods/Spring Lake Manor			Plant Telephone Number:	352-787-0980	
Plant Address:	2013 Spring Lake Rd / 2038 Live Oak Dr			City:	Fruitland Park	
		State:	Florida	Zip Code:	34731	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift		
Other Operators:	Marty Neal	C	10027	Days 1st Shift		
	John Worrell	C	6597	Days 1st Shift		

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine 6-8-07  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: May, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>		
1	X	24.0	72,000		1.3							1.1	
2	X	24.0	89,000		1.3							1.0	
3	X	24.0	85,000		1.3							0.9	
4	X	24.0	89,000		1.8							1.3	
5	X	24.0	81,000		1.5								
6		24.0	84,500										
7	X	24.0	84,500		1.3							1.0	
8	X	24.0	59,000		1.3							1.0	
9	X	24.0	71,000		1.2							0.9	
10	X	24.0	108,000		1.2							0.9	
11	X	24.0	70,000		1.3							0.9	
12	X	24.0	102,000		1.3								
13		24.0	65,500										
14	X	24.0	65,500		1.2							0.9	
15	X	24.0	43,000		1.1							0.8	
16	X	24.0	74,000		1.1							0.8	
17	X	24.0	81,000		1.1							0.8	
18	X	24.0	56,000		1.1							0.7	
19		24.0	81,000										
20	X	24.0	81,000		1.1								
21	X	24.0	85,000		1.0							0.7	
22	X	24.0	71,000		1.2							0.8	
23	X	24.0	82,000		1.9							1.5	
24	X	24.0	72,000		1.9							1.6	
25	X	24.0	76,000		1.4							1.1	
26	X	24.0	49,000		1.4								
27		24.0	72,500										
28	X	24.0	72,500		1.4							1.0	
29	X	24.0	105,000		1.4							1.2	
30	X	24.0	111,000		1.4							1.0	
31	X	24.0	147,000		1.3							1.0	
Total			2,485,000										
Average			80,161										
Maximum			147,000										

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: May, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>		Minimum UV Dose Required, mW-sec/cm <sup>2</sup>
1	X	24.0			1.2							1.1	
2	X	24.0	400		1.1							1.0	
3	X	24.0			1.1							0.9	
4	X	24.0			1.6							1.3	
5	X	24.0			1.3								
6		24.0											
7	X	24.0			1.2							1.0	
8	X	24.0			1.1							1.0	
9	X	24.0			1.1							0.9	
10	X	24.0			1.1							0.9	
11	X	24.0			1.0							0.9	
12	X	24.0			1.2								
13		24.0											
14	X	24.0			1.1							0.9	
15	X	24.0			0.9							0.8	
16	X	24.0			1.0							0.8	
17	X	24.0			0.9							0.8	
18	X	24.0			0.9							0.7	
19		24.0											
20	X	24.0			0.9								
21	X	24.0			0.8							0.7	
22	X	24.0			0.9							0.8	
23	X	24.0			1.8							1.5	
24	X	24.0			1.8							1.6	
25	X	24.0			1.3							1.1	
26	X	24.0			1.2								
27		24.0											
28	X	24.0			1.3							1.0	
29	X	24.0			1.3							1.2	
30	X	24.0			1.1							1.0	
31	X	24.0			1.0							1.0	
Total			400										
Average			13										
Maximum			400										

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of: <span style="float: right;">May 2007</span>											
Community Water System (CWS) Name: <b>Piney Woods</b>											
Public Water System (PWS) Identification Number: <b>3351021</b>											
Day of Month	Plant 1 Name:	Plant 2 Name:	Plant 3 Name:	Plant 4 Name:	Plant 5 Name:	Plant 6 Name:	Plant 7 Name:	Plant 8 Name:	Plant 9 Name:	Plant 10 Name:	Total
	Piney Woods Well 1	Spring Lake Manor Well 2									
	Permitted Maximum Day Operating Capacity of Each Plant, gallons per day										Total
	432,000	201,600									633,600
	Net Quantity of Finished Water Produced by Each Plant, gallons										Total
1	72,000	0									72,000
2	89,000	400									89,400
3	85,000	0									85,000
4	89,000	0									89,000
5	81,000	0									81,000
6	84,500	0									84,500
7	84,500	0									84,500
8	59,000	0									59,000
9	71,000	0									71,000
10	108,000	0									108,000
11	70,000	0									70,000
12	102,000	0									102,000
13	65,500	0									65,500
14	65,500	0									65,500
15	43,000	0									43,000
16	74,000	0									74,000
17	81,000	0									81,000
18	56,000	0									56,000
19	81,000	0									81,000
20	81,000	0									81,000
21	85,000	0									85,000
22	71,000	0									71,000
23	82,000	0									82,000
24	72,000	0									72,000
25	76,000	0									76,000
26	49,000	0									49,000
27	72,500	0									72,500
28	72,500	0									72,500
29	105,000	0									105,000
30	111,000	0									111,000
31	147,000	0									147,000
<b>Total</b>											2,485,400
<b>Avg.</b>											80,174
<b>Max.</b>											147,000

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** June, 2007

**A. Public Water System (PWS) Information**

PWS Name:	Piney Woods / Spring Lake Manor			PWS Identification Number:	3351021
PWS Type:	<input checked="" type="checkbox"/> Community	<input checked="" type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	180			Total Population Served at End of Month:	630
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Piney Woods/Spring Lake Manor			Plant Telephone Number:	352-787-0980	
Plant Address:	2013 Spring Lake Rd / 2038 Live Oak Dr			City:	Fruitland Park	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>		
<b>Lead/Chief Operator</b>	Will Fontaine	C	6813	Days 1st Shift		
<b>Other Operators</b>	Marty Neal	C	10027	Days 1st Shift		
	John Worrell	C	6597	Days 1st Shift		

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine 7-6-07 Will Fontaine C-6813  
 Signature and Date Printed or Typed Name License Number



# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: June, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C, Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24.0	68,000			1.2									0.9	
2	X	24.0	59,000			1.2										
3		24.0	67,500													
4	X	24.0	67,500			1.0									0.6	
5	X	24.0	67,000			1.3									1.0	
6	X	24.0	91,000			2.1									1.1	
7	X	24.0	80,000			1.5									1.2	
8	X	24.0	57,000			1.2									0.9	
9	X	24.0	61,000			1.4										
10		24.0	82,000													
11	X	24.0	82,000			1.1									0.8	
12	X	24.0	45,000			1.0									0.6	
13	X	24.0	68,000			2.0									1.6	
14	X	24.0	62,000			1.7									1.3	
15	X	24.0	59,000			1.7									1.4	
16		24.0	95,000													
17	X	24.0	95,000			1.7										
18	X	24.0	79,000			1.7									1.4	
19	X	24.0	75,000			1.3									1.0	
20	X	24.0	53,000			1.5									1.2	
21	X	24.0	59,000			1.4									1.1	
22	X	24.0	55,000			1.3									1.0	
23	X	24.0	37,000			1.3										
24		24.0	62,500													
25	X	24.0	62,500			1.2									0.9	
26	X	24.0	51,000			1.1									0.7	
27	X	24.0	61,000			1.1									0.8	
28	X	24.0	75,000			1.1									0.8	
29	X	24.0	48,000			1.2									0.9	
30		24.0														
31		24.0														
Total			1,924,000													
Average			62,065													
Maximum			95,000													

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: June, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm	Minimum UV Dose Required, mW-sec/cm	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24.0	0		1.0										0.9	
2	X	24.0	0		1.0											
3		24.0	0													
4	X	24.0	0		0.8										0.6	
5	X	24.0	0		1.1										1.0	
6	X	24.0	0		1.8										1.1	
7	X	24.0	0		1.3										1.2	
8	X	24.0	0		1.0										0.9	
9	X	24.0	0		1.3											
10		24.0	0													
11	X	24.0	0		0.9										0.8	
12	X	24.0	0		0.8										0.6	
13	X	24.0	0		1.8										1.6	
14	X	24.0	0		1.5										1.3	
15	X	24.0	200		1.5										1.4	
16		24.0	0													
17	X	24.0	0		1.5										1.4	
18	X	24.0	0		1.5										1.0	
19	X	24.0	0		1.0										1.2	
20	X	24.0	0		1.3										1.1	
21	X	24.0	0		1.3										1.0	
22	X	24.0	0		0.9											
23	X	24.0	0		1.1											
24		24.0	0													
25	X	24.0	0		0.9										0.9	
26	X	24.0	0		0.9										0.7	
27	X	24.0	0		0.9										0.8	
28	X	24.0	0		0.9										0.8	
29	X	24.0	0		0.9										0.9	
30		24.0	0													
31		24.0	0													
Total			200													
Average			6													
Maximum			200													

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : <span style="float: right;">June 2007</span>											
Community Water System (CWS) Name: <span style="float: right;">Piney Woods</span>											
Public Water System (PWS) Identification Number: <span style="float: right;">3351021</span>											
	Plant 1 Name:	Plant 2 Name:	Plant 3 Name:	Plant 4 Name:	Plant 5 Name:	Plant 6 Name:	Plant 7 Name:	Plant 8 Name:	Plant 9 Name:	Plant 10 Name:	
	Piney Woods Well 1	Spring Lake Manor Well 2									
Day of Month	Permitted Maximum Day-Operating Capacity of Each Plant, gallons per day										Total
	432,000	201,600									633,600
	Net Quantity of Finished Water Produced by Each Plant, gallons										Total
	68,000	0									68,000
2	59,000	0									59,000
3	67,500	0									67,500
4	67,500	0									67,500
5	67,000	0									67,000
6	91,000	0									91,000
7	80,000	0									80,000
8	57,000	0									57,000
9	61,000	0									61,000
10	82,000	0									82,000
11	82,000	0									82,000
12	45,000	0									45,000
13	68,000	0									68,000
14	62,000	0									62,000
15	59,000	200									59,200
16	95,000	0									95,000
17	95,000	0									95,000
18	79,000	0									79,000
19	75,000	0									75,000
20	53,000	0									53,000
21	59,000	0									59,000
22	55,000	0									55,000
23	37,000	0									37,000
24	62,500	0									62,500
25	62,500	0									62,500
26	51,000	0									51,000
27	61,000	0									61,000
28	75,000	0									75,000
29	48,000	0									48,000
30	0	0									0
31	0	0									0
<b>Total</b>											1,924,200
<b>Avg.</b>											62,071
<b>Max.</b>											95,000

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** July, 2007

**A. Public Water System (PWS) Information**

PWS Name: <u>Piney Woods / Spring Lake Manor</u>		PWS Identification Number: <u>3351021</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input checked="" type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: <u>180</u>		Total Population Served at End of Month: <u>630</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Brian Heath</u>		Contact Person's Title: <u>Area Manager</u>	
Contact Person's Mailing Address: <u>PO Box 490310</u>		City: <u>Leesburg</u>	State: <u>Florida</u> Zip Code: <u>34749</u>
Contact Person's Telephone Number: <u>(352) 787-0980</u>		Contact Person's Fax Number: <u>(352) 787-6333</u>	
Contact Person's E-Mail Address: <u>beheath@aquaaamerica.com</u>			

**B. Water Treatment Plant Information**

Plant Name: <u>Piney Woods/Spring Lake Manor</u>		Plant Telephone Number: <u>352-787-0980</u>	
Plant Address: <u>2013 Spring Lake Rd / 2038 Live Oak Dr</u>		City: <u>Fruitland Park</u>	State: <u>Florida</u> Zip Code: <u>34731</u>
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>216,000</u>			
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>IV</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator	<u>Will Fontaine</u>	<u>C</u>	<u>6813 / Days 1st Shift</u>
Other Operators	<u>Marty Neal</u>	<u>C</u>	<u>10027 / Days 1st Shift</u>
	<u>John Worrell</u>	<u>C</u>	<u>6597 / Days 1st Shift</u>

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

8-8-07  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: July, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions (Repair, Maintenance Work that Involves Taking Water System Components Out of Operation)	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	62,000		1.3										
2	X	24.0	38,000		0.9									0.6	
3	X	24.0	36,000		0.9									0.5	
4	X	24.0	32,000		1.2									0.6	
5	X	24.0	41,000		1.3									0.9	
6	X	24.0	44,000		1.3									0.8	
7	X	24.0	31,000		1.3										
8		24.0	51,500												
9	X	24.0	51,500		1.2									0.9	
10	X	24.0	45,000		2.2									1.3	
11	X	24.0	43,000		2.0									1.6	
12	X	24.0	74,000		1.2									0.9	
13	X	24.0	50,000		0.9									0.5	
14		24.0	47,000												
15	X	24.0	47,000		1.4										
16	X	24.0	44,000		1.2									0.8	
17	X	24.0	48,000		1.0									0.8	
18	X	24.0	37,000		1.3									1.1	
19	X	24.0	50,000		1.6									1.3	
20	X	24.0	53,000		1.2									0.9	
21	X	24.0	26,000		1.3										
22		24.0	38,000												
23	X	24.0	38,000		1.0									0.7	
24	X	24.0	29,000		1.0									0.5	
25	X	24.0	41,000		1.7									0.7	
26	X	24.0	42,000		1.6									0.9	
27	X	24.0	40,000		1.6									1.4	
28		24.0	42,000												
29	X	24.0	42,000		1.3										
30	X	24.0	48,000		0.9									0.6	
31	X	24.0	38,000		1.0									0.6	
Total			1,349,000												
Average			43,516												
Maximum			74,000												

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: July, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C if Applicable	pH of Water if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	0		1.2										
2	X	24.0	0		0.8									0.6	
3	X	24.0	0		0.8									0.5	
4	X	24.0	0		0.8									0.6	
5	X	24.0	0		1.0									0.9	
6	X	24.0	0		1.1									0.8	
7	X	24.0	0		1.0										
8	X	24.0	0		1.0									0.9	
9	X	24.0	0		1.5									1.3	
10	X	24.0	0		1.8									1.6	
11	X	24.0	0		1.2									0.9	
12	X	24.0	0		0.7									0.5	
13	X	24.0	0		1.2										
14	X	24.0	0		1.0									0.8	
15	X	24.0	0		0.8									0.8	
16	X	24.0	0		0.7									1.1	
17	X	24.0	0		1.2									1.3	
18	X	24.0	0		1.0									0.9	
19	X	24.0	0		1.0										
20	X	24.0	200		1.0									0.9	
21	X	24.0	0		1.0										
22	X	24.0	0		0.7									0.7	
23	X	24.0	0		0.7									0.5	
24	X	24.0	0		0.9									0.7	
25	X	24.0	0		1.5									0.9	
26	X	24.0	0		1.1									1.4	
27	X	24.0	0		1.0										
28	X	24.0	0		0.8									0.6	
29	X	24.0	0		0.8									0.6	
30	X	24.0	0		0.8									0.6	
31	X	24.0	0		0.8									0.6	
Total			200												
Average			6												
Maximum			200												

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : <span style="float: right;">July 2007</span>										
Community Water System (CWS) Name: <b>Piney Woods</b>										
Public Water System (PWS) Identification Number: <b>3351021</b>										
Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	
Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day Operating Capacity of Each Plant, gallons per day										Total
432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant, gallons										Total
62,000	0									62,000
38,000	0									38,000
36,000	0									36,000
32,000	0									32,000
41,000	0									41,000
44,000	0									44,000
31,000	0									31,000
51,500	0									51,500
51,500	0									51,500
45,000	0									45,000
43,000	0									43,000
74,000	0									74,000
50,000	0									50,000
47,000	0									47,000
47,000	0									47,000
44,000	0									44,000
48,000	0									48,000
37,000	0									37,000
50,000	0									50,000
53,000	200									53,200
26,000	0									26,000
38,000	0									38,000
38,000	0									38,000
29,000	0									29,000
41,000	0									41,000
42,000	0									42,000
40,000	0									40,000
42,000	0									42,000
42,000	0									42,000
48,000	0									48,000
38,000	0									38,000
<b>Total</b>										<b>1,349,200</b>
<b>Avg</b>										<b>43,523</b>
<b>Max</b>										<b>74,000</b>

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** August, 2007

**A. Public Water System (PWS) Information**

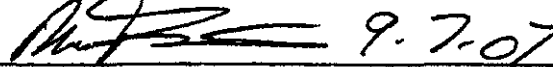
PWS Name:	Piney Woods / Spring Lake Manor			PWS Identification Number:	3351021
PWS Type:	<input checked="" type="checkbox"/> Community	<input checked="" type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	180			Total Population Served at End of Month:	630
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Zip Code:	34749
Contact Person's E-Mail Address:	beheath@aquaaamerica.com			Contact Person's Fax Number:	(352) 787-6333

**B. Water Treatment Plant Information**

Plant Name:	Piney Woods/Spring Lake Manor			Plant Telephone Number:	352-787-0980	
Plant Address:	2013 Spring Lake Rd / 2038 Live Oak Dr			City:	Fruitland Park	
		State:	Florida	Zip Code:	34731	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>		
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift		
Other Operator:	Marty Neal	C	10027	Days 1st Shift		
	John Worrell	C	6597	Days 1st Shift		

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

 9.7.07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number



# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021		Plant Name: Piney Woods													
III. Daily Data for the Month/Year of: August, 2007															
Means of Achieving Four-Log Virus Inactivation/Removal: <input checked="" type="checkbox"/> Free Chlorine <input type="checkbox"/> Chlorine Dioxide <input type="checkbox"/> Ozone <input type="checkbox"/> Combined Chlorine (Chloramines)															
<input type="checkbox"/> Ultraviolet Radiation <input type="checkbox"/> Other (Describe):															
Type of Disinfectant Residual Maintained in Distribution System: <input checked="" type="checkbox"/> Free Chlorine <input type="checkbox"/> Combined Chlorine (Chloramines) <input type="checkbox"/> Chlorine Dioxide															
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer, During Peak Flow, mg/L.	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer, During Peak Flow, mg min/L.	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg min/L.	Lowest Operating UV Dose, mW sec/cm	Minimum UV Dose Required, mW sec/cm	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L.		
1	X	24.0	37,000		1.2									0.7	
2	X	24.0	34,000		1.5									0.9	
3	X	24.0	35,000		1.4									1.2	
4	X	24.0	22,000		1.4										
5		24.0	52,000												
6	X	24.0	52,000		1.0									0.6	
7	X	24.0	44,000		1.2									0.7	
8	X	24.0	50,000		1.3									0.7	
9	X	24.0	43,000		1.3									1.0	
10	X	24.0	46,000		1.0									0.6	
11	X	24.0	40,000		1.2										
12		24.0	56,000												
13	X	24.0	56,000		1.3									0.6	
14	X	24.0	46,000		1.8									0.7	
15	X	24.0	60,000		2.1									1.0	
16	X	24.0	58,000		2.2									1.1	
17	X	24.0	51,000		1.6									1.3	
18	X	24.0	38,000		1.5										
19		24.0	69,500												
20	X	24.0	69,500		1.3									1.0	
21	X	24.0	77,000		1.3									0.7	
22	X	24.0	68,000		2.1									1.5	
23	X	24.0	57,000		1.8									1.2	
24	X	24.0	70,000		2.0									1.0	
25	X	24.0	32,000		1.4										
26		24.0	46,000												
27	X	24.0	46,000		0.9									0.6	
28	X	24.0	32,000		0.9									0.5	
29		24.0	47,000												
30	X	24.0	47,000		1.2									0.5	
31	X	24.0	40,000		1.3									0.7	
Total			1,521,000												
Average			49,065												
Maximum			77,000												

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: August, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place X)	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C), Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (CT) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm	Minimum UV Dose Required, mW-sec/cm			
1	X	24.0	0		0.8									0.7	
2	X	24.0	0		1.1									0.9	
3	X	24.0	0		1.2									1.2	
4	X	24.0	0		1.1										
5		24.0	0												
6	X	24.0	0		0.8									0.6	
7	X	24.0	0		0.9									0.7	
8	X	24.0	0		1.0									0.7	
9	X	24.0	0		1.1									1.0	
10	X	24.0	200		0.7									0.6	
11	X	24.0	0		1.0										
12		24.0	0												
13	X	24.0	0		0.8									0.6	
14	X	24.0	0		1.3									0.7	
15	X	24.0	0		1.8									1.0	
16	X	24.0	0		2.2									1.1	
17	X	24.0	0		1.5									1.3	
18	X	24.0	0		1.2										
19		24.0	0												
20	X	24.0	0		1.2									1.0	
21	X	24.0	0		1.1									0.7	
22	X	24.0	0		1.7									1.5	
23	X	24.0	0		1.7									1.2	
24	X	24.0	0		1.8									1.0	
25	X	24.0	0		1.3										
26		24.0	0												
27	X	24.0	0		0.8									0.6	
28	X	24.0	0		0.7									0.5	
29		24.0	0												
30	X	24.0	0		0.8									0.5	
31	X	24.0	0		0.9									0.7	
Total			200												
Average			6												
Maximum			200												

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of :											
Community Water System (CWS) Name: Piney Woods										August 2007	
Public Water System (PWS) Identification Number: 3351021											
Day of Month	Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	Total
	Piney Woods Well 1	Spring Lake Manor Well 2									
	Permitted Maximum Day Operating Capacity of Each Plant, gallons per day										Total
	432,000	201,600									633,600
	Net Quantity of Finished Water Produced by Each Plant, gallons										Total
1	37,000	0									37,000
2	34,000	0									34,000
3	35,000	0									35,000
4	22,000	0									22,000
5	52,000	0									52,000
6	52,000	0									52,000
7	44,000	0									44,000
8	50,000	0									50,000
9	43,000	0									43,000
10	46,000	200									46,200
11	40,000	0									40,000
12	56,000	0									56,000
13	56,000	0									56,000
14	46,000	0									46,000
15	60,000	0									60,000
16	58,000	0									58,000
17	51,000	0									51,000
18	38,000	0									38,000
19	69,500	0									69,500
20	69,500	0									69,500
21	77,000	0									77,000
22	68,000	0									68,000
23	57,000	0									57,000
24	70,000	0									70,000
25	32,000	0									32,000
26	46,000	0									46,000
27	46,000	0									46,000
28	32,000	0									32,000
29	47,000	0									47,000
30	47,000	0									47,000
31	40,000	0									40,000
Total											1,521,200
Avg.											49,071
Max.											77,000



# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: September, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm	Minimum UV Dose Required, mW-sec/cm			
1	X	24.0	43,000		1.3										
2	X	24.0	59,000		1.2									0.7	
3	X	24.0	71,000		1.3									0.8	
4	X	24.0	78,000		1.3									0.7	
5	X	24.0	57,000		1.2									0.5	
6	X	24.0	66,000		1.2									0.6	
7	X	24.0	55,000		1.3									0.6	
8	X	24.0	64,000		1.3										
9		24.0	61,000												
10	X	24.0	61,000		1.0									0.5	
11	X	24.0	37,000		1.1									0.7	
12	X	24.0	61,000		1.9									1.1	
13	X	24.0	43,000		2.1									1.4	
14	X	24.0	32,000		1.9									1.5	
15	X	24.0	33,000		1.3										
16		24.0	70,000												
17	X	24.0	70,000		1.3									1.0	
18	X	24.0	41,000		1.3									1.0	
19	X	24.0	40,000		1.1									0.8	
20	X	24.0	46,000		0.8									0.5	
21	X	24.0	40,000		1.5									0.8	
22	X	24.0	37,000		1.5										
23		24.0	39,000												
24	X	24.0	39,000		1.0									0.5	
25	X	24.0	43,000		0.9									0.5	
26	X	24.0	46,000		0.9									0.5	
27	X	24.0	34,000		1.2									0.6	
28	X	24.0	44,000		1.3									0.6	
29	X	24.0	29,000		1.3										
30		24.0	50,500												
31		24.0													

Total	1,489,500
Average	48,048
Maximum	78,000

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: September, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	0		1.1										
2	X	24.0	0		1.0									0.7	
3	X	24.0	0		1.1									0.8	
4	X	24.0	0		1.1									0.7	
5	X	24.0	0		1.0									0.5	
6	X	24.0	0		0.9									0.6	
7	X	24.0	0		1.1									0.6	
8	X	24.0	0		1.2										
9		24.0	0												
10	X	24.0	0		0.8									0.5	
11	X	24.0	0		0.8									0.7	
12	X	24.0	100		1.3									1.1	
13	X	24.0	0		1.7									1.4	
14	X	24.0	0		1.8									1.5	
15	X	24.0	0		1.0										
16		24.0	0												
17	X	24.0	0		1.0									1.0	
18	X	24.0	0		1.0									1.0	
19	X	24.0	0		0.9									0.8	
20	X	24.0	0											0.5	
21	X	24.0	0		0.9									0.8	
22	X	24.0	0		1.3										
23		24.0	0												
24	X	24.0	0		0.8									0.5	
25	X	24.0	0		0.7									0.5	
26	X	24.0	0		0.6									0.5	
27	X	24.0	0		0.8									0.6	
28	X	24.0	0		1.0									0.6	
29	X	24.0	0		1.0										
30		24.0	0												
31		24.0	0												
Total:			100												
Average:			3												
Maximum:			100												

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : <span style="float: right;">September 2007</span>										
Community Water System (CWS) Name: <b>Piney Woods</b>										
Public Water System (PWS) Identification Number: <b>3351021</b>										
Plant 1 Name:	Plant 2 Name:	Plant 3 Name:	Plant 4 Name:	Plant 5 Name:	Plant 6 Name:	Plant 7 Name:	Plant 8 Name:	Plant 9 Name:	Plant 10 Name:	Total
Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day Operating Capacity of Each Plant, gallons per day										Total
432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant, gallons										Total
1	43,000	0								43,000
2	59,000	0								59,000
3	71,000	0								71,000
4	78,000	0								78,000
5	57,000	0								57,000
6	66,000	0								66,000
7	55,000	0								55,000
8	64,000	0								64,000
9	61,000	0								61,000
10	61,000	0								61,000
11	37,000	0								37,000
12	61,000	100								61,100
13	43,000	0								43,000
14	32,000	0								32,000
15	33,000	0								33,000
16	70,000	0								70,000
17	70,000	0								70,000
18	41,000	0								41,000
19	40,000	0								40,000
20	46,000	0								46,000
21	40,000	0								40,000
22	37,000	0								37,000
23	39,000	0								39,000
24	39,000	0								39,000
25	43,000	0								43,000
26	46,000	0								46,000
27	34,000	0								34,000
28	44,000	0								44,000
29	29,000	0								29,000
30	50,500	0								50,500
31	0	0								0
<b>Total</b>										<b>1,489,600</b>
<b>Avg.</b>										<b>48,052</b>
<b>Max.</b>										<b>78,000</b>

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** October, 2007

**A. Public Water System (PWS) Information**

PWS Name:	<u>Piney Woods / Spring Lake Manor</u>	PWS Identification Number:	<u>3351021</u>
PWS Type:	<input checked="" type="checkbox"/> Community <input checked="" type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	<u>180</u>	Total Population Served at End of Month:	<u>630</u>
PWS Owner:	<u>Aqua Utilities Florida</u>		
Contact Person:	<u>Brian Heath</u>	Contact Person's Title:	<u>Area Manager</u>
Contact Person's Mailing Address:	<u>PO Box 490310</u>	City:	<u>Leesburg</u> State: <u>Florida</u> Zip Code: <u>34749</u>
Contact Person's Telephone Number:	<u>(352) 787-0980</u>	Contact Person's Fax Number:	<u>(352) 787-6333</u>
Contact Person's E-Mail Address:	<u>beheath@aquaamerica.com</u>		

**B. Water Treatment Plant Information**

Plant Name:	<u>Piney Woods/Spring Lake Manor</u>	Plant Telephone Number:	<u>352-787-0980</u>
Plant Address:	<u>2013 Spring Lake Rd / 2038 Live Oak Dr.</u>	City:	<u>Fruitland Park</u> State: <u>Florida</u> Zip Code: <u>34731</u>
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	<u>216,000</u>		
Plant Category (per subsection 62-699.310(4), F.A.C.):	<u>IV</u>	Plant Class (per subsection 62-699.310(4), F.A.C.):	<u>C</u>

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	<u>Will Fontaine</u>	<u>C</u>	<u>6813</u>	<u>Days 1st Shift</u>
Other Operators	<u>Marty Neal</u>	<u>C</u>	<u>10027</u>	<u>Days 1st Shift</u>
	<u>John Worrell</u>	<u>C</u>	<u>6597</u>	<u>Days 1st Shift</u>

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine 11-8-07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number



# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: October, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant In Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	50,500		1.1									0.7	
2	X	24.0	40,000		1.2									0.6	
3	X	24.0	28,000		1.1									0.6	
4	X	24.0	37,000		1.0									0.7	
5		24.0	36,000												
6	X	24.0	36,000		0.9									0.6	
7	X	24.0	30,000		1.1									0.8	
8	X	24.0	52,000		1.2									0.5	
9	X	24.0	30,000		0.9									0.5	
10	X	24.0	42,000		1.4									0.5	
11	X	24.0	48,000		1.3									0.8	
12	X	24.0	34,000		1.5									0.7	
13		24.0	28,000												
14	X	24.0	28,000		1.3										
15	X	24.0	42,000		1.1									0.7	
16	X	24.0	41,000		1.1									0.6	
17	X	24.0	41,000		1.0									0.6	
18	X	24.0	62,000		1.3									0.7	
19	X	24.0	35,000		1.3									0.7	
20	X	24.0	47,000		1.3										
21		24.0	40,000												
22	X	24.0	40,000		1.1									0.6	
23	X	24.0	30,000		1.0									0.6	
24	X	24.0	47,000		1.2									0.7	
25	X	24.0	36,000		1.3									0.9	
26	X	24.0	35,000		1.1									0.8	
27	X	24.0	24,000		1.3										
28		24.0	37,500												
29	X	24.0	37,500		1.2									0.8	
30	X	24.0	34,000		1.1									0.8	
31	X	24.0	42,000		1.1									0.7	
<b>Total</b>			1,190,500												
<b>Average</b>			38,403												
<b>Maximum</b>			62,000												

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: October, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions/Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0			1.0										0.7
2	X	24.0			0.9										0.6
3	X	24.0			0.9										0.6
4	X	24.0			0.8										0.7
5		24.0													
6	X	24.0			0.7										0.6
7	X	24.0			1.0										0.8
8	X	24.0			1.0										0.5
9	X	24.0			0.8										0.5
10	X	24.0			0.7										0.5
11	X	24.0			1.0										0.8
12	X	24.0	300		1.2										0.7
13		24.0	17,550												
14	X	24.0	17,550		0.7										
15	X	24.0			0.7										0.7
16	X	24.0			0.8										0.6
17	X	24.0			0.7										0.6
18	X	24.0			1.0										0.7
19	X	24.0			0.8										0.7
20	X	24.0			0.9										
21		24.0													
22	X	24.0			0.9										0.6
23	X	24.0			0.7										0.6
24	X	24.0			1.0										0.7
25	X	24.0			1.1										0.9
26	X	24.0			1.0										0.8
27	X	24.0			1.0										
28		24.0													
29	X	24.0			0.9										0.8
30	X	24.0			1.0										0.8
31	X	24.0			0.9										0.7
Total:			35,400												
Average:			1,142												
Maximum:			17,550												

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of :										October 2007
Community Water System (CWS) Name: Piney Woods										
Public Water System (PWS) Identification Number: 3351021										
Plant 1 Name:	Plant 2 Name:	Plant 3 Name:	Plant 4 Name:	Plant 5 Name:	Plant 6 Name:	Plant 7 Name:	Plant 8 Name:	Plant 9 Name:	Plant 10 Name:	
Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day Operating Capacity of Each Plant, gallons per day:										Total:
432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant, gallons:										Total:
1	101,000	0								101,000
2	40,000	0								40,000
3	28,000	0								28,000
4	37,000	0								37,000
5	36,000	0								36,000
6	36,000	0								36,000
7	30,000	0								30,000
8	52,000	0								52,000
9	30,000	0								30,000
10	42,000	0								42,000
11	48,000	0								48,000
12	34,000	300								34,300
13	28,000	17,550								45,550
14	28,000	17,550								45,550
15	42,000	0								42,000
16	41,000	0								41,000
17	41,000	0								41,000
18	62,000	0								62,000
19	35,000	0								35,000
20	47,000	0								47,000
21	40,000	0								40,000
22	40,000	0								40,000
23	30,000	0								30,000
24	47,000	0								47,000
25	36,000	0								36,000
26	35,000	0								35,000
27	24,000	0								24,000
28	37,500	0								37,500
29	37,500	0								37,500
30	34,000	0								34,000
31	42,000	0								42,000
<b>Total:</b>										1,276,400
<b>Avg:</b>										41,174
<b>Max:</b>										101,000

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** November, 2007

**A. Public Water System (PWS) Information**

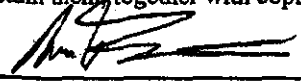
PWS Name:	Piney Woods / Spring Lake Manor		PWS Identification Number:	3351021
PWS Type:	<input checked="" type="checkbox"/> Community	<input checked="" type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive
Number of Service Connections at End of Month:	180		Total Population Served at End of Month:	630
PWS Owner:	Aqua Utilities Florida			
Contact Person:	Brian Heath		Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State: Florida Zip Code: 34749
Contact Person's Telephone Number:	(352) 787-0980		Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquamerica.com			

**B. Water Treatment Plant Information**

Plant Name:	Piney Woods/Spring Lake Manor		Plant Telephone Number:	352-787-0980
Plant Address:	2013 Spring Lake Rd / 2038 Live Oak Dr		City:	Fruitland Park State: Florida Zip Code: 34731
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV		Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operator	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator	Will Fontaine	C	6813	Days 1st Shift
Other Operators	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

 12-6-07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: November, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Month	Day	Plant Operator Visited	Hours plant in operation	Net Quantity of Water Produced (gal)	CT Calculations of UV Dose to Demstrate Four-Log Virus Inactivation, if applicable										Notes	
					CT Calculations					UV Dose						
					Peak Flow Rate (gpd)	Lowest Residual Disinfectant Concentration (9) Before or at Customer During Peak Flow (mg/L)	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow (minutes)	Lowest CT Provided Before or at First Customer During Peak Flow (mg-min/L)	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required (mg-min/L)	Lowest Operating UV Dose (mW-sec/cm <sup>2</sup> )	Minimum UV Dose Required (mW-sec/cm <sup>2</sup> )	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System (mg/L)		
	X		24.0	44,000		1.1									0.7	
	X		24.0	26,000		1.0									0.7	
	X		24.0	38,000		1.1										
			24.0	41,500												
	X		24.0	41,500		1.1									0.6	
	X		24.0	54,000		1.0									0.7	
	X		24.0	42,000		0.9									0.7	
	X		24.0	41,000		0.9									0.6	
	X		24.0	39,000		1.3									0.8	
	X		24.0	30,000		1.6										
			24.0	41,500												
	X		24.0	41,500		1.2									0.9	
	X		24.0	57,000		1.1									0.8	
	X		24.0	31,000		1.2									0.7	
	X		24.0	49,000		1.1									0.9	
	X		24.0	53,000		1.2									0.9	
	X		24.0	39,000		1.4										
			24.0	48,500												
	X		24.0	48,500		1.3									0.9	
	X		24.0	30,000		1.2									1.0	
	X		24.0	41,000		1.1									0.6	
	X		24.0	57,000		1.2									0.6	
	X		24.0	36,000		1.3									1.0	
			24.0	41,000												
	X		24.0	41,000		1.3										
	X		24.0	52,000		1.3									1.0	
	X		24.0	27,000		1.2									1.0	
	X		24.0	39,000		1.2									0.8	
	X		24.0	50,000		1.4									1.0	
	X		24.0	46,000		1.3									1.0	
			24.0													
				1,266,000												
				40,839												
				57,000												

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

II. Daily Data for the Month/Year of: November, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Started or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Disinfectant Added (gals)	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System (mg/L)	Emergence of Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (mg/L) Before or at first Customer During Peak Flow	Disinfectant Contact Time (CT at C <sub>min</sub> Measurement) (minutes)	Lowest CT Provided Before or at first Customer During Peak Flow (mg-min/L)	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required (mg-min/L)	Minimum UV Dose Required (mW-sec/cm <sup>2</sup> )	Lowest Operating UV Dose (mW-sec/cm <sup>2</sup> )	Minimum UV Dose Required (mW-sec/cm <sup>2</sup> )				
																Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (mg/L) Before or at first Customer During Peak Flow
	X	24.0	0		0.9											0.7	
	X	24.0	0		0.8											0.7	
	X	24.0	0		0.9												
		24.0	0														
	X	24.0	0		0.8											0.6	
	X	24.0	0		0.8											0.7	
	X	24.0	0		0.8											0.7	
	X	24.0	0		0.8											0.6	
	X	24.0	0		1.1											0.8	
	X	24.0	0		1.3												
		24.0	0														
	X	24.0	0		1.1											0.9	
	X	24.0	0		0.9											0.8	
	X	24.0	0		0.9											0.7	
	X	24.0	0		1.0											0.9	
	X	24.0	0		1.0											0.9	
	X	24.0	0		1.3												
		24.0	0														
	X	24.0	0		1.1											0.9	
	X	24.0	0		1.1											1.0	
	X	24.0	200		0.8											0.6	
	X	24.0	0		0.8											0.6	
	X	24.0	0		1.0											1.0	
		24.0	0														
	X	24.0	0		1.0											1.0	
	X	24.0	0		1.1											1.0	
	X	24.0	0		1.1											1.0	
	X	24.0	0		1.0											0.8	
	X	24.0	0		1.1											1.0	
	X	24.0	0		1.1											1.0	
		24.0															
			200														
			6														
			200														

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of :										November 2007
Community Water System (CWS) Name: Piney Woods										
Public Water System (PWS) Identification Number: 3351021										
Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	Total
Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day Operating Capacity of Each Plant, gallons per day										Total
432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant, gallons										Total
44,000	0									44,000
26,000	0									26,000
38,000	0									38,000
41,500	0									41,500
41,500	0									41,500
54,000	0									54,000
42,000	0									42,000
41,000	0									41,000
39,000	0									39,000
30,000	0									30,000
41,500	0									41,500
41,500	0									41,500
57,000	0									57,000
31,000	0									31,000
49,000	0									49,000
53,000	0									53,000
39,000	0									39,000
48,500	0									48,500
48,500	0									48,500
30,000	0									30,000
41,000	200									41,200
57,000	0									57,000
36,000	0									36,000
41,000	0									41,000
41,000	0									41,000
52,000	0									52,000
27,000	0									27,000
39,000	0									39,000
50,000	0									50,000
46,000	0									46,000
0	0									0
<b>Total</b>										1,266,200
<b>Avg</b>										40,845
<b>Max</b>										57,000

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



Polymer Page 3 Due in December

See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** December, 2007

**A. Public Water System (PWS) Information**

PWS Name: <span style="border-bottom: 1px solid black;">Piney Woods / Spring Lake Manor</span>		PWS Identification Number: <span style="border-bottom: 1px solid black;">3351021</span>	
PWS Type: <input checked="" type="checkbox"/> Community <input checked="" type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: <span style="border-bottom: 1px solid black;">180</span>		Total Population Served at End of Month: <span style="border-bottom: 1px solid black;">630</span>	
PWS Owner: <span style="border-bottom: 1px solid black;">Aqua Utilities Florida</span>			
Contact Person: <span style="border-bottom: 1px solid black;">Brian Heath</span>		Contact Person's Title: <span style="border-bottom: 1px solid black;">Area Manager</span>	
Contact Person's Mailing Address: <span style="border-bottom: 1px solid black;">PO Box 490310</span>		City: <span style="border-bottom: 1px solid black;">Leesburg</span>	State: <span style="border-bottom: 1px solid black;">Florida</span> Zip Code: <span style="border-bottom: 1px solid black;">34749</span>
Contact Person's Telephone Number: <span style="border-bottom: 1px solid black;">(352) 787-0980</span>		Contact Person's Fax Number: <span style="border-bottom: 1px solid black;">(352) 787-6333</span>	
Contact Person's E-Mail Address: <span style="border-bottom: 1px solid black;">beheath@aquaamerica.com</span>			

**B. Water Treatment Plant Information**

Plant Name: <span style="border-bottom: 1px solid black;">Piney Woods/Spring Lake Manor</span>		Plant Telephone Number: <span style="border-bottom: 1px solid black;">352-787-0980</span>		
Plant Address: <span style="border-bottom: 1px solid black;">2013 Spring Lake Rd / 2038 Live Oak Dr</span>		City: <span style="border-bottom: 1px solid black;">Fruitland Park</span>	State: <span style="border-bottom: 1px solid black;">Florida</span> Zip Code: <span style="border-bottom: 1px solid black;">34731</span>	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <span style="border-bottom: 1px solid black;">216,000</span>				
Plant Category (per subsection 62-699.310(4), F.A.C.): <span style="border-bottom: 1px solid black;">IV</span>		Plant Class (per subsection 62-699.310(4), F.A.C.): <span style="border-bottom: 1px solid black;">C</span>		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	<span style="border-bottom: 1px solid black;">Will Fontaine</span>	<span style="border-bottom: 1px solid black;">C</span>	<span style="border-bottom: 1px solid black;">6813</span>	<span style="border-bottom: 1px solid black;">Days 1st Shift</span>
Other Operators:	<span style="border-bottom: 1px solid black;">Marty Neal</span>	<span style="border-bottom: 1px solid black;">C</span>	<span style="border-bottom: 1px solid black;">10027</span>	<span style="border-bottom: 1px solid black;">Days 1st Shift</span>
	<span style="border-bottom: 1px solid black;">John Worrell</span>	<span style="border-bottom: 1px solid black;">C</span>	<span style="border-bottom: 1px solid black;">6597</span>	<span style="border-bottom: 1px solid black;">Days 1st Shift</span>

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

1-9-08  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number



# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: December, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of Month	Days Plant Started or Shifted by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
12/01	X	24.0	38,000		1.3										
12/02		24.0	53,000												
12/03	X	24.0	53,000		1.4								1.0		
12/04	X	24.0	39,000		1.3								0.9		
12/05	X	24.0	41,000		1.3								1.0		
12/06	X	24.0	41,000		1.2								0.9		
12/07	X	24.0	43,000		1.2								0.7		
12/08	X	24.0	28,000		1.2										
12/09		24.0	49,500												
12/10	X	24.0	49,500		1.2								0.7		
12/11	X	24.0	40,000		1.1								0.8		
12/12	X	24.0	29,000		1.1								0.8		
12/13	X	24.0	51,000		1.6								1.0		
12/14	X	24.0	51,000		1.7								1.0		
12/15	X	24.0	45,000		1.8										
12/16		24.0	37,000												
12/17	X	24.0	37,000		1.5								1.0		
12/18	X	24.0	33,000		1.4								1.1		
12/19		24.0	36,000												
12/20	X	24.0	36,000		1.4								1.0		
12/21	X	24.0	34,000		1.4								1.1		
12/22	X	24.0	34,000		1.3										
12/23	X	24.0	38,000		1.5								1.0		
12/24	X	24.0	51,000		1.3								1.0		
12/25	X	24.0	40,000		1.4								1.0		
12/26	X	24.0	43,000		1.3								0.8		
12/27	X	24.0	59,000		1.4								1.0		
12/28	X	24.0	37,000		1.4								1.0		
12/29	X	24.0	24,000		1.4										
12/30		24.0	49,500												
12/31	X	24.0	49,500		1.3								0.8		
12/Total			1,289,000												
12/Total			41,581												
12/Minimum			59,000												

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: December, 2007

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced (gal)	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm	Minimum UV Dose Required, mW-sec/cm	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	0		1.1										
2	X	24.0	0												
3	X	24.0	200		1.0									1.0	
4	X	24.0	0		1.0									0.9	
5	X	24.0	0		1.0									1.0	
6	X	24.0	0		1.0									0.9	
7	X	24.0	0		1.0									0.7	
8	X	24.0	0		0.8									0.7	
9	X	24.0	0		1.0									0.8	
10	X	24.0	0		0.9									0.8	
11	X	24.0	0		1.1									1.0	
12	X	24.0	0		1.1									1.0	
13	X	24.0	0		1.6										
14	X	24.0	0		1.0									1.0	
15	X	24.0	0		1.2									1.1	
16	X	24.0	0		1.2									1.0	
17	X	24.0	0		1.2									1.1	
18	X	24.0	0		1.1									1.1	
19	X	24.0	0		1.1									1.0	
20	X	24.0	0		1.2									1.0	
21	X	24.0	0		1.1									1.0	
22	X	24.0	0		1.1									1.0	
23	X	24.0	0		1.1									1.0	
24	X	24.0	0		1.1									1.0	
25	X	24.0	0		1.1									0.8	
26	X	24.0	0		1.3									1.0	
27	X	24.0	0		1.2									1.0	
28	X	24.0	0		1.2										
29	X	24.0	0		1.2										
30	X	24.0	0		1.0									0.8	
31	X	24.0	200												
1			6												
2			200												

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : <span style="float: right;">December 2007</span>										
Community Water System (CWS) Name: <b>Piney Woods</b>										
Public Water System (PWS) Identification Number: <b>3351021</b>										
Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	Total
Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day Operating Capacity of Each Plant, gallons per day										Total
432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant, gallons										Total
38,000	0									38,000
53,000	0									53,000
53,000	0									53,000
39,000	200									39,200
41,000	0									41,000
41,000	0									41,000
43,000	0									43,000
28,000	0									28,000
49,500	0									49,500
49,500	0									49,500
40,000	0									40,000
29,000	0									29,000
51,000	0									51,000
51,000	0									51,000
45,000	0									45,000
37,000	0									37,000
37,000	0									37,000
33,000	0									33,000
36,000	0									36,000
36,000	0									36,000
34,000	0									34,000
34,000	0									34,000
38,000	0									38,000
51,000	0									51,000
40,000	0									40,000
43,000	0									43,000
59,000	0									59,000
37,000	0									37,000
24,000	0									24,000
49,500	0									49,500
49,500	0									49,500
<b>Total</b>										1,289,200
<b>Avg</b>										41,587
<b>Max</b>										59,000

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

PWS ID:	3351021	Plant Name:	Piney Woods/Spring Lake Manor
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<b>IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: *</b>	<b>2007</b>
---	-------------

A. Is any polymer containing the monomer acrylamide used at the water treatment plant?       No       Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose ppm =	Acrylamide Level, % <sup>1</sup> =
--------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant?       No       Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose ppm =	Epichlorohydrin Level, % <sup>1</sup> =
--------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant?       No       Yes, and the type of sequestrant, sequestrant dose, ect., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO <sub>4</sub> or mg/L of silicate as SiO <sub>2</sub> =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO <sub>2</sub> =

\* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

<sup>1</sup> Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

**2006 MOR**

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** January, 2006

**A. Public Water System (PWS) Information**

PWS Name: <u>Piney Woods</u>		PWS Identification Number: <u>3351021</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: <u>175</u>		Total Population Served at End of Month: <u>613</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Brian Heath</u>		Contact Person's Title: <u>Area Manager</u>	
Contact Person's Mailing Address: <u>PO Box 490310</u>		City: <u>Leesburg</u>	State: <u>Florida</u> Zip Code: <u>34749</u>
Contact Person's Telephone Number: <u>(352) 787-0980</u>		Contact Person's Fax Number: <u>(352) 787-6333</u>	
Contact Person's E-Mail Address: <u>beheath@aquaaamerica.com</u>			

**B. Water Treatment Plant Information**

Plant Name: <u>Piney Woods/Spring Lake Manor</u>		Plant Telephone Number: <u>352-787-0980</u>	
Plant Address: <u>2038 Live Oak Drive</u>		City: <u>Fruitland Park</u>	State: <u>Florida</u> Zip Code: <u>32731</u>
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>216,000</u>			
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>IV</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	<u>Will Fontaine</u>	<u>C</u>	<u>6813 / Days 1st Shift</u>
Other Operators:	<u>Marty Neal</u>	<u>C</u>	<u>10027 / Days 1st Shift</u>
	<u>John Worrell</u>	<u>C</u>	<u>6597 / Days 1st Shift</u>

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them together with copies of this report, at a convenient location for at least ten years.

Signature and Date
 

 DOCUMENT NUMBER-DATE  
04312 MAY 22 06

Will Fontaine  
 Printed or Typed Name
 

C-6813  
 License Number

**MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: January, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1			24.0	45,500												
2	X		24.0	45,500		1.4										1.0
3	X		24.0	50,000		1.3										0.9
4	X		24.0	17,000		1.3										0.8
5	X		24.0	42,000		1.3										0.9
6	X		24.0	43,000		1.2										0.8
7	X		24.0	34,000		1.2										
8			24.0	44,500												
9	X		24.0	44,500		1.2										0.8
10	X		24.0	30,000		1.1										0.8
11	X		24.0	48,000		1.2										0.8
12	X		24.0	52,000		1.2										0.9
13	X		24.0	36,000		1.2										0.9
14	X		24.0	27,000		1.3										
15			24.0	41,500												
16	X		24.0	41,500		1.2										0.8
17	X		24.0	43,000		1.2										0.8
18	X		24.0	46,000		1.4										0.9
19	X		24.0	42,000		1.5										1.0
20	X		24.0	27,000		1.4										1.0
21			24.0	53,000												
22	X		24.0	53,000		1.4										
23	X		24.0	44,000		1.6										1.1
24	X		24.0	42,000		1.5										1.1
25	X		24.0	32,000		1.6										1.1
26	X		24.0	44,000		1.8										1.3
27	X		24.0	36,000		1.8										1.3
28	X		24.0	36,000		1.7										
29			24.0	56,500												
30	X		24.0	56,500		1.8										1.4
31	X		24.0	37,000		1.6										1.3
<b>Total</b>				1,290,000												
<b>Average</b>				41,613												
<b>Maximum</b>				56,500												

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: January, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV <sub>v</sub> Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>			
1		24.0													
2	X	24.0			1.3									1.0	
3	X	24.0			1.1									0.9	
4	X	24.0	9,000		0.8									0.8	
5	X	24.0			1.0									0.9	
6	X	24.0	800		1.0									0.8	
7	X	24.0			1.0										
8		24.0													
9	X	24.0			0.9									0.8	
10	X	24.0			1.0									0.8	
11	X	24.0			1.0									0.8	
12	X	24.0			1.1									0.9	
13	X	24.0			1.0									0.9	
14	X	24.0			1.1										
15		24.0													
16	X	24.0			1.0									0.8	
17	X	24.0			1.0									0.8	
18	X	24.0			1.1									0.9	
19	X	24.0			1.3									1.0	
20	X	24.0			1.2									1.0	
21		24.0													
22	X	24.0			1.2										
23	X	24.0			1.4									1.1	
24	X	24.0			1.3									1.1	
25	X	24.0			1.4									1.1	
26	X	24.0			1.6									1.3	
27	X	24.0			1.6									1.3	
28	X	24.0			1.6										
29		24.0													
30	X	24.0			1.7									1.4	
31	X	24.0			1.5									1.3	
Total:			9,800												
Average:			316												
Maximum:			9,000												

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





**MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS**

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : January 2006											
Community Water System (CWS) Name: Piney Woods											
Public Water System (PWS) Identification Number: 3351021											
Day of Month	Plant 1 Name:	Plant 2 Name:	Plant 3 Name:	Plant 4 Name:	Plant 5 Name:	Plant 6 Name:	Plant 7 Name:	Plant 8 Name:	Plant 9 Name:	Plant 10 Name:	Total
	Piney Woods Well 1	Spring Lake Manor Well 2									
	Permitted Maximum Day Operating Capacity of Each Plant, gallons per day										Total
	432,000	201,600									633,600
	Net Quantity of Finished Water Produced by Each Plant, gallons										Total
1	45,500	0									45,500
2	45,500	0									45,500
3	50,000	0									50,000
4	17,000	9,000									26,000
5	42,000	0									42,000
6	43,000	800									43,800
7	34,000	0									34,000
8	44,500	0									44,500
9	44,500	0									44,500
10	30,000	0									30,000
11	48,000	0									48,000
12	52,000	0									52,000
13	36,000	0									36,000
14	27,000	0									27,000
15	41,500	0									41,500
16	41,500	0									41,500
17	43,000	0									43,000
18	46,000	0									46,000
19	42,000	0									42,000
20	27,000	0									27,000
21	53,000	0									53,000
22	53,000	0									53,000
23	44,000	0									44,000
24	42,000	0									42,000
25	32,000	0									32,000
26	44,000	0									44,000
27	36,000	0									36,000
28	36,000	0									36,000
29	56,500	0									56,500
30	56,500	0									56,500
31	37,000	0									37,000
Total											1,299,800
Avg.											41,929
Max.											56,500

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** February, 2006

**A. Public Water System (PWS) Information**

PWS Name: <u>Piney Woods</u>		PWS Identification Number: <u>3351021</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: <u>175</u>		Total Population Served at End of Month: <u>613</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Brian Heath</u>		Contact Person's Title: <u>Area Manager</u>	
Contact Person's Mailing Address: <u>PO Box 490310</u>		City: <u>Leesburg</u>	State: <u>Florida</u> Zip Code: <u>34749</u>
Contact Person's Telephone Number: <u>(352) 787-0980</u>		Contact Person's Fax Number: <u>(352) 787-6333</u>	
Contact Person's E-Mail Address: <u>beheath@aquamerica.com</u>			

**B. Water Treatment Plant Information**

Plant Name: <u>Piney Woods/Spring Lake Manor</u>		Plant Telephone Number: <u>352-787-0980</u>		
Plant Address: <u>2038 Live Oak Drive</u>		City: <u>Fruitland Park</u>	State: <u>Florida</u> Zip Code: <u>32731</u>	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>216,000</u>				
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>IV</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>		
Licensee Operator	Name	License Class	License Number	Day(s) Shift(s) Worked
Lead/Chief Operator	<u>Will Fontaine</u>	<u>C</u>	<u>6813</u>	<u>Days 1st Shift</u>
Other Operators	<u>Marty Neal</u>	<u>C</u>	<u>10027</u>	<u>Days 1st Shift</u>
	<u>John Worrell</u>	<u>C</u>	<u>6597</u>	<u>Days 1st Shift</u>

**II Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Will Fontaine 3-6-06  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: February, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Is the Plant Operating?	Flow Rate (MGD)	Flow Rate (GPD)	All Calculations or Test Data to Demonstrate Four-Log Virus Inactivation, if Applicable										Disinfectant Residual Concentration (mg/L) in the Distribution System	Notes on Abnormal Operating Conditions, Repairs, Maintenance Work that Involves the Water System Components or Operations	
				Flow Rate (MGD)	Flow Rate (GPD)	Disinfectant Concentration (mg/L)	Disinfectant Contact Time (min)	Disinfectant Dose (mg/L)	Disinfectant Residual (mg/L)	Disinfectant Residual (mg/L)	Disinfectant Residual (mg/L)	Disinfectant Residual (mg/L)	Disinfectant Residual (mg/L)			Disinfectant Residual (mg/L)
1	X	24.0	40,000			1.6									1.2	
2	X	24.0	43,000			1.3									1.1	
3	X	24.0	46,000			1.4									1.0	
4		24.0	40,000													
5	X	24.0	40,000			1.4										
6	X	24.0	49,000			1.4									1.1	
7	X	24.0	44,000			1.4									1.0	
8	X	24.0	35,000			1.4									1.0	
9	X	24.0	50,000			1.3									0.9	
10	X	24.0	45,000			1.3									0.9	
11	X	24.0	35,000			1.4										
12		24.0	46,000													
13	X	24.0	46,000			1.3									0.9	
14	X	24.0	53,000			1.2									0.8	
15	X	24.0	40,000			1.2									0.8	
16	X	24.0	40,000			1.2									0.8	
17	X	24.0	45,000			1.2									0.9	
18	X	24.0	47,000			1.2										
19		24.0	48,500													
20	X	24.0	48,500			1.3									1.0	
21	X	24.0	41,000			1.3									1.0	
22	X	24.0	52,000			1.0									0.8	
23	X	24.0	53,000			1.4									0.9	
24	X	24.0	42,000			1.4									1.0	
25	X	24.0	31,000			1.5										
26		24.0	54,000													
27	X	24.0	54,000			1.3									1.0	
28	X	24.0	41,000			1.2									0.9	
29		24.0														
30		24.0														
31		24.0														
Total			1,249,000													
Average			40,290													
Maximum			54,000													

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

**MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: February, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Disinfectant Applied	Flow (MGD)	Flow (MGD) at Point of Application	Residual (mg/L)	CT Calculations of UV Doses to Demonstrate Four-Log Virus Inactivation, if Applicable										Daily Residual (mg/L) at End of Distribution System	Type of Distribution System	
					Disinfectant Concentration (mg/L)	Flow (MGD)	Flow (MGD)	Flow (MGD)	Flow (MGD)	Flow (MGD)	Flow (MGD)	Flow (MGD)	Flow (MGD)	Flow (MGD)			Flow (MGD)
1	X	24.0			1.4											1.2	
2	X	24.0			1.1											1.1	
3	X	24.0			1.2											1.0	
4	X	24.0			1.2												
5	X	24.0			1.3											1.1	
6	X	24.0	200		1.2											1.0	
7	X	24.0	300		1.3											1.0	
8	X	24.0			1.1											0.9	
9	X	24.0			1.1											0.9	
10	X	24.0			1.3												
11	X	24.0			1.2											0.9	
12	X	24.0			1.0											0.8	
13	X	24.0			0.9											0.8	
14	X	24.0			1.1											0.8	
15	X	24.0			1.1											0.9	
16	X	24.0			1.1												
17	X	24.0	450		1.2											1.0	
18	X	24.0	450		1.2											1.0	
19	X	24.0			1.1											0.8	
20	X	24.0			1.2											0.9	
21	X	24.0			1.2											1.0	
22	X	24.0			1.3												
23	X	24.0			1.2											1.0	
24	X	24.0			1.0											0.9	
25	X	24.0			1.2											1.0	
26	X	24.0			1.0											0.9	
27	X	24.0			1.2											1.0	
28	X	24.0			1.0											0.9	
29	X	24.0			1.2											1.0	
30	X	24.0			1.0											0.9	
31	X	24.0			1.2											1.0	
32	X	24.0			1.0											0.9	
33	X	24.0			1.2											1.0	
34	X	24.0			1.0											0.9	
35	X	24.0			1.2											1.0	
36	X	24.0			1.0											0.9	
37	X	24.0			1.2											1.0	
38	X	24.0			1.0											0.9	
39	X	24.0			1.2											1.0	
40	X	24.0			1.0											0.9	
41	X	24.0			1.2											1.0	
42	X	24.0			1.0											0.9	
43	X	24.0			1.2											1.0	
44	X	24.0			1.0											0.9	
45	X	24.0			1.2											1.0	
46	X	24.0			1.0											0.9	
47	X	24.0			1.2											1.0	
48	X	24.0			1.0											0.9	
49	X	24.0			1.2											1.0	
50	X	24.0			1.0											0.9	
51	X	24.0			1.2											1.0	
52	X	24.0			1.0											0.9	
53	X	24.0			1.2											1.0	
54	X	24.0			1.0											0.9	
55	X	24.0			1.2											1.0	
56	X	24.0			1.0											0.9	
57	X	24.0			1.2											1.0	
58	X	24.0			1.0											0.9	
59	X	24.0			1.2											1.0	
60	X	24.0			1.0											0.9	
61	X	24.0			1.2											1.0	
62	X	24.0			1.0											0.9	
63	X	24.0			1.2											1.0	
64	X	24.0			1.0											0.9	
65	X	24.0			1.2											1.0	
66	X	24.0			1.0											0.9	
67	X	24.0			1.2											1.0	
68	X	24.0			1.0											0.9	
69	X	24.0			1.2											1.0	
70	X	24.0			1.0											0.9	
71	X	24.0			1.2											1.0	
72	X	24.0			1.0											0.9	
73	X	24.0			1.2											1.0	
74	X	24.0			1.0											0.9	
75	X	24.0			1.2											1.0	
76	X	24.0			1.0											0.9	
77	X	24.0			1.2											1.0	
78	X	24.0			1.0											0.9	
79	X	24.0			1.2											1.0	
80	X	24.0			1.0											0.9	
81	X	24.0			1.2											1.0	
82	X	24.0			1.0											0.9	
83	X	24.0			1.2											1.0	
84	X	24.0			1.0											0.9	
85	X	24.0			1.2											1.0	
86	X	24.0			1.0											0.9	
87	X	24.0			1.2											1.0	
88	X	24.0			1.0											0.9	
89	X	24.0			1.2											1.0	
90	X	24.0			1.0											0.9	
91	X	24.0			1.2											1.0	
92	X	24.0			1.0											0.9	
93	X	24.0			1.2											1.0	
94	X	24.0			1.0											0.9	
95	X	24.0			1.2											1.0	
96	X	24.0			1.0											0.9	
97	X	24.0			1.2											1.0	
98	X	24.0			1.0											0.9	
99	X	24.0			1.2											1.0	
100	X	24.0			1.0											0.9	
101	X	24.0			1.2											1.0	
102	X	24.0			1.0											0.9	
103	X	24.0			1.2											1.0	
104	X	24.0			1.0											0.9	
105	X	24.0			1.2											1.0	
106	X	24.0			1.0											0.9	
107	X	24.0			1.2											1.0	
108	X	24.0			1.0											0.9	
109	X	24.0			1.2											1.0	
110	X	24.0			1.0											0.9	
111	X	24.0			1.2											1.0	
112	X	24.0			1.0											0.9	
113	X	24.0			1.2											1.0	
114	X	24.0			1.0											0.9	
115	X	24.0			1.2											1.0	
116	X	24.0			1.0											0.9	
117	X	24.0			1.2											1.0	
118	X	24.0			1.0											0.9	
119	X	24.0			1.2											1.0	
120	X	24.0			1.0											0.9	
121	X	24.0			1.2											1.0	
122	X	24.0			1.0											0.9	
123	X	24.0			1.2											1.0	
124	X	24.0			1.0											0.9	
125	X	24.0															



# MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : <span style="float: right;">March 2006</span>											
Community Water System (CWS) Name: <span style="float: right;">Piney Woods</span>											
Public Water System (PWS) Identification Number: <span style="float: right;">3351021</span>											
Day of Month	Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	Total
	Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day Operating Capacity of Each Plant (gallons per day)											
	432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant (gallons)											
	41,000	0									41,000
	48,000	0									48,000
	51,000	0									51,000
	48,500	0									48,500
	48,500	0									48,500
	41,000	0									41,000
	63,000	0									63,000
	42,000	0									42,000
	50,000	0									50,000
	61,000	200									61,200
	62,000	0									62,000
	72,500	0									72,500
	72,500	0									72,500
	34,000	0									34,000
	71,000	0									71,000
	50,000	0									50,000
	54,000	0									54,000
	45,000	0									45,000
	72,500	0									72,500
	72,500	0									72,500
	49,000	0									49,000
	61,000	0									61,000
	61,000	0									61,000
	45,000	0									45,000
	54,500	0									54,500
	54,500	0									54,500
	69,000	0									69,000
	29,000	0									29,000
	34,000	0									34,000
	56,000	0									56,000
	65,000	0									65,000
<b>Total</b>											<b>1,678,200</b>
<b>Avg.</b>											<b>54,135</b>
<b>Max.</b>											<b>72,500</b>



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : February 2006											
Community Water System (CWS) Name: Piney Woods											
Public Water System (PWS) Identification Number: 3351021											
Day of Month	Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	Total
	Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day Operating Capacity of Each Plant, gallons per day											
	432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant, gallons											
1	40,000	0									40,000
2	43,000	0									43,000
3	46,000	0									46,000
4	40,000	0									40,000
5	40,000	0									40,000
6	49,000	0									49,000
7	44,000	200									44,200
8	35,000	300									35,300
9	50,000	0									50,000
10	45,000	0									45,000
11	35,000	0									35,000
12	46,000	0									46,000
13	46,000	0									46,000
14	53,000	0									53,000
15	40,000	0									40,000
16	40,000	0									40,000
17	45,000	0									45,000
18	47,000	0									47,000
19	48,500	450									48,950
20	48,500	450									48,950
21	41,000	0									41,000
22	52,000	0									52,000
23	53,000	0									53,000
24	42,000	0									42,000
25	31,000	0									31,000
26	54,000	0									54,000
27	54,000	0									54,000
28	41,000	0									41,000
29	0	0									0
30	0	0									0
31	0	0									0
<b>TOTAL</b>											1,250,400
<b>Avg</b>											40,335
<b>Max</b>											54,000

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** March, 2006

**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 175		Total Population Served at End of Month: 613	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida
		Zip Code: 32731	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Operator's Name	License Class	License Number	Day(s) Shift Worked
Lead/Chief Operator: Will Fontaine	C	6813	Days 1st Shift
Other Operator: Marty Neal	C	10027	Days 1st Shift
Other Operator: John Worrell	C	6597	Days 1st Shift

**II Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

4-6-06 Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: March, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date of Month	Plant	Flow (MGD)	Chlorine Dose (mg/L)	Chlorine Calculations to Determine Compliance with Virus Inactivation, if Applicable										Minimum Required Residual (mg/L)	Average of 24-Hour Residual (mg/L)	Emergency or Abnormal Operation Condition, Repair, Maintenance, Marking, or Other Operation
				Flow (MGD)	Chlorine Dose (mg/L)	Chlorine Demand (mg/L)	Chlorine Residual (mg/L)	Chlorine Demand (mg/L)	Chlorine Residual (mg/L)	Chlorine Demand (mg/L)	Chlorine Residual (mg/L)	Chlorine Demand (mg/L)	Chlorine Residual (mg/L)			
3/1	X	24.0	41,000												0.8	
3/2	X	24.0	48,000												0.7	
3/3	X	24.0	51,000												0.9	
3/4		24.0	48,500													
3/5	X	24.0	48,500													
3/6	X	24.0	41,000												1.1	
3/7	X	24.0	63,000												1.0	
3/8	X	24.0	42,000												1.2	
3/9	X	24.0	50,000												1.1	
3/10	X	24.0	61,000												1.1	
3/11	X	24.0	62,000													
3/12		24.0	72,500													
3/13	X	24.0	72,500												1.0	
3/14	X	24.0	34,000												1.1	
3/15	X	24.0	71,000												1.1	
3/16	X	24.0	50,000												1.3	
3/17	X	24.0	54,000												1.1	
3/18	X	24.0	45,000													
3/19		24.0	72,500													
3/20	X	24.0	72,500												1.1	
3/21	X	24.0	49,000												1.0	
3/22	X	24.0	61,000												1.2	
3/23	X	24.0	61,000												1.2	
3/24	X	24.0	45,000												1.1	
3/25		24.0	54,500													
3/26	X	24.0	54,500													
3/27	X	24.0	69,000												1.0	
3/28	X	24.0	29,000												1.0	
3/29	X	24.0	34,000												0.6	
3/30	X	24.0	56,000												0.9	
3/31	X	24.0	65,000												1.0	
04/01			1,678,000													
04/02			54,129													
04/03			72,500													

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



# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manot

III. Daily Data for the Month/Year of: March, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of Month	Time of Day	Flow (MGD)	Chlorine Dose (mg/L)	Chlorine Residual (mg/L)	Calculations of Log Reduction of Domestic Four-Log Virus Inactivation, if Applicable								Average Final Disinfectant Residual (mg/L) in Distribution System	Reference to Manual, etc. when not using Water System	
					Log 10 Initial Concentration	Log 10 Final Concentration	Log 10 Reduction	Log 10 Inactivation	Log 10 Removal	Log 10 Destruction	Log 10 Inactivation	Log 10 Removal			Log 10 Destruction
	X	24.0					0.9							0.8	
	X	24.0					1.0							0.7	
	X	24.0					1.1							0.9	
		24.0													
	X	24.0					1.1								
	X	24.0					1.4							1.1	
	X	24.0					1.3							1.0	
	X	24.0					1.4							1.2	
	X	24.0					1.3							1.1	
	X	24.0	200				1.3							1.1	
	X	24.0					1.3								
		24.0													
	X	24.0					1.3							1.0	
	X	24.0					1.4							1.1	
	X	24.0					1.3							1.1	
	X	24.0					1.4							1.3	
	X	24.0					1.3							1.1	
	X	24.0					1.2								
		24.0													
	X	24.0					1.2							1.1	
	X	24.0					1.2							1.0	
	X	24.0					1.2							1.2	
	X	24.0					1.1							1.2	
	X	24.0					1.2							1.1	
		24.0													
	X	24.0					1.4								
	X	24.0					1.2							1.0	
	X	24.0					1.1							1.0	
	X	24.0					1.0							0.6	
	X	24.0					1.0							0.9	
	X	24.0					1.2							1.0	
		200													
		6													
		200													

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

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** April, 2006

**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 175		Total Population Served at End of Month: 613	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida
		Zip Code: 34731	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			

Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Operator	Name	License Class	License Number	Day(s) Shift(s) Worked
Lead/Chief Operator	Will Fontaine	C	6813	Days 1st Shift
Other Operators	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

5/5/06  
 \_\_\_\_\_  
 Signature and Date

Will Fontaine  
 \_\_\_\_\_  
 Printed or Typed Name

C-6813  
 \_\_\_\_\_  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: April, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date of Month	Day of the Month	Hour of the Day	Flow (MGD)	Flow (MGD)	Calculations and Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Remarks			
					Peak Flow Rate (MGD)	Lowest Residual Concentration (mg/L)	Disinfectant Concentration (mg/L)	Residual Concentration (mg/L)	Disinfectant Concentration (mg/L)	Residual Concentration (mg/L)	Disinfectant Concentration (mg/L)	Residual Concentration (mg/L)	Disinfectant Concentration (mg/L)	Residual Concentration (mg/L)		Disinfectant Concentration (mg/L)	Residual Concentration (mg/L)	
			24.0	61,000														
X			24.0	61,000		1.3												
X			24.0	64,000		1.5												
X			24.0	68,000		1.5												
X			24.0	67,000		1.4												
X			24.0	61,000		1.5												
X			24.0	75,000		1.6												
X			24.0	73,000		1.5												
			24.0	61,500														
X			24.0	61,500		1.3												
X			24.0	82,000		1.4												
X			24.0	42,000		1.3												
X			24.0	61,000		1.4												
X			24.0	82,000		1.4												
X			24.0	77,000		1.4												
			24.0	68,000														
X			24.0	68,000		1.4												
X			24.0	80,000		1.6												
X			24.0	86,000		1.6												
X			24.0	64,000		1.5												
X			24.0	47,000		1.5												
X			24.0	44,000		1.6												
			24.0	58,500														
X			24.0	58,500		1.4												
X			24.0	96,000		1.4												
X			24.0	80,000		1.3												
X			24.0	68,000		1.4												
X			24.0	81,000		1.3												
X			24.0	64,000		1.4												
			24.0	70,000														
			24.0															
Peak				1,930,000														
Minimum				62,258														
Maximum				96,000														

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: April, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe): \_\_\_\_\_

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date of Month	Days Plant Started on this Date	Hours Plant Operated	Residuals in Distribution System	Calculations on Free Chlorine Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Concentration of Disinfectant Residual in Distribution System, mg/L	Range of Chlorine Demand of this Water System Component
				Peak Flow, gpm	Flow, gpm	Disinfectant Concentration, mg/L	Flow, gpm	Flow, gpm	Flow, gpm	Flow, gpm	Flow, gpm	Flow, gpm	Flow, gpm		
7	X	24.0													
8	X	24.0													
9	X	24.0													
10	X	24.0													
11	X	24.0													
12	X	24.0	45,200												
13	X	24.0	250												
14	X	24.0	250												
15	X	24.0													
16	X	24.0													
17	X	24.0													
18	X	24.0													
19	X	24.0	700												
20	X	24.0													
21	X	24.0													
22	X	24.0													
23	X	24.0													
24	X	24.0													
25	X	24.0													
26	X	24.0													
27	X	24.0													
28	X	24.0													
29	X	24.0													
30	X	24.0													
31	X	24.0													
April			46,400												
Year			1,497												
Maximum			45,200												

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



# MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : <span style="float: right;">April 2006</span>											
Community Water System (CWS) Name: <span style="float: right;">Piney Woods</span>											
Public Water System (PWS) Identification Number: <span style="float: right;">3351021</span>											
Day of Month	Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	Total
	Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day Operating Capacity of Each Plant (gallons per day)										Total	
	432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant (gallons)										Total	
1	61,000	0									61,000
2	61,000	0									61,000
3	84,000	0									84,000
4	68,000	0									68,000
5	67,000	0									67,000
6	61,000	0									61,000
7	75,000	0									75,000
8	3,000	45,200									48,200
9	61,500	250									61,750
10	61,500	250									61,750
11	82,000	0									82,000
12	42,000	0									42,000
13	61,000	0									61,000
14	82,000	700									82,700
15	77,000	0									77,000
16	68,000	0									68,000
17	68,000	0									68,000
18	80,000	0									80,000
19	36,000	0									36,000
20	64,000	0									64,000
21	47,000	0									47,000
22	44,000	0									44,000
23	58,500	0									58,500
24	58,500	0									58,500
25	96,000	0									96,000
26	80,000	0									80,000
27	68,000	0									68,000
28	81,000	0									81,000
29	64,000	0									64,000
30	70,000	0									70,000
31	0	0									0
<b>Total</b>											1,976,400
<b>Avg</b>											63,755
<b>Max</b>											96,000

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** May, 2006

**A. Public Water System (PWS) Information**

PWS Name: <u>Piney Woods</u>		PWS Identification Number: <u>3351021</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: <u>175</u>		Total Population Served at End of Month: <u>613</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Brian Heath</u>		Contact Person's Title: <u>Area Manager</u>	
Contact Person's Mailing Address: <u>PO Box 490314</u>		City: <u>Leesburg</u>	State: <u>Florida</u>
		Zip Code: <u>34749</u>	
Contact Person's Telephone Number: <u>(352) 787-0980</u>		Contact Person's Fax Number: <u>(352) 787-6333</u>	
Contact Person's E-Mail Address: <u>bheath@aquamerica.com</u>			

**B. Water Treatment Plant Information**

Plant Name: <u>Piney Woods/Spring Lake Manen</u>		Plant Telephone Number: <u>352-787-0980</u>	
Plant Address: <u>2038 Live Oak Drive</u>		City: <u>Fruitland Park</u>	State: <u>Florida</u>
		Zip Code: <u>34731</u>	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>216,000</u>			
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>IV</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>	
Operator Name	License No.	License No.	Days 1st Shift
<u>Will Fontaine</u>	<u>C</u>	<u>6813</u>	<u>Days 1st Shift</u>
<u>Marty Neal</u>	<u>C</u>	<u>10027</u>	<u>Days 1st Shift</u>
<u>John Worrell</u>	<u>C</u>	<u>6597</u>	<u>Days 1st Shift</u>

**II Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

6-5-06  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: May, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Station	Flow (MGD)	Flow (GPD)	Free Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Ozone (mg/L)	Combined Chlorine (mg/L)	UV Radiation	Other (Describe)	Free Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Ozone (mg/L)	Combined Chlorine (mg/L)	UV Radiation	Other (Describe)
X	24.0	70,000	1.4											1.0
X	24.0	70,000	1.7											1.3
X	24.0	78,000	2.0											1.6
X	24.0	102,000	1.6											1.2
X	24.0	93,000	1.8											1.5
X	24.0	89,000	1.7											
X	24.0	80,000												
X	24.0	80,000	1.0											0.8
X	24.0	89,000	1.6											1.0
X	24.0	48,000	1.7											1.0
X	24.0	58,000	1.8											1.4
X	24.0	41,000	1.6											1.2
X	24.0	47,000	1.6											
X	24.0	60,500												
X	24.0	60,500	1.7											1.3
X	24.0	55,000	1.7											1.3
X	24.0	51,000	1.5											1.2
X	24.0	68,000	1.5											1.1
X	24.0	62,000	1.5											1.1
X	24.0	87,500												
X	24.0	87,500	1.6											1.2
X	24.0	72,000	1.6											1.3
X	24.0	63,000	1.7											1.2
X	24.0	77,000	1.7											1.3
X	24.0	88,000	1.7											1.2
X	24.0	51,000	1.7											
X	24.0	75,500												
X	24.0	75,500	1.7											1.3
X	24.0	70,000	1.9											1.4
X	24.0	68,000	1.3											1.0
		2,184,000												
		70,452												
		102,000												

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: May, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day	Time	Flow (MGD)	Free Chlorine (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Free Chlorine (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Free Chlorine (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Free Chlorine (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Free Chlorine (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Free Chlorine (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Free Chlorine (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Free Chlorine (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Free Chlorine (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Free Chlorine (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Free Chlorine (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)				
X	24:0		1.3																																			1.0	
X	24:0		1.4																																			1.3	
X	24:0		1.8																																			1.6	
X	24:0	3,000	1.3																																			1.2	
X	24:0		1.5																																			1.5	
X	24:0		1.5																																				
X	24:0		1.3																																			0.8	
X	24:0		1.3																																			1.0	
X	24:0		1.4																																			1.0	
X	24:0	400	1.6																																			1.4	
X	24:0		1.5																																			1.2	
X	24:0		1.4																																				
X	24:0		1.4																																			1.3	
X	24:0		1.5																																			1.3	
X	24:0		1.4																																			1.2	
X	24:0		1.3																																			1.1	
X	24:0		1.3																																			1.1	
X	24:0		1.3																																				
X	24:0		1.3																																			1.2	
X	24:0		1.4																																			1.3	
X	24:0		1.4																																			1.2	
X	24:0		1.5																																			1.3	
X	24:0		1.5																																			1.2	
X	24:0		1.6																																				
X	24:0		1.7																																			1.3	
X	24:0		1.2																																			1.4	
X	24:0		1.2																																			1.0	
		3,000																																					
		97																																					
		2,600																																					

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





**MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS**

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of: **May 2006**

Community Water System (CWS) Name: **Piney Woods**

Public Water System (PWS) Identification Number: **3351021**

Plant Name	Plant Name	Plant Name	Plant Name	Plant Name	Plant Name	Plant Name	Plant Name	Plant Name	Plant Name	Plant Name	Plant Name
Piney Woods Well 1	Spring Lake Manor Well 2										
Permitted Maximum Draw Operating Capacity of Each Well and Plant called per day											
432,000	201,600										633,600
Net Volume of Finished Water Produced by Each Plant, Gallons											
70,000	0										70,000
70,000	0										70,000
78,000	0										78,000
102,000	2,600										104,600
93,000	0										93,000
89,000	0										89,000
80,000	0										80,000
80,000	0										80,000
69,000	0										69,000
48,000	0										48,000
58,000	400										58,400
41,000	0										41,000
47,000	0										47,000
60,500	0										60,500
60,500	0										60,500
55,000	0										55,000
51,000	0										51,000
68,000	0										68,000
67,000	0										67,000
82,000	0										82,000
87,500	0										87,500
87,500	0										87,500
72,000	0										72,000
63,000	0										63,000
77,000	0										77,000
88,000	0										88,000
51,000	0										51,000
75,500	0										75,500
75,500	0										75,500
70,000	0										70,000
68,000	0										68,000
											2,187,000
											70,548
											104,600

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** June, 2006

**A. Public Water System (PWS) Information**

PWS Name:	Piney Woods	PWS Identification Number:	3351021
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	175	Total Population Served at End of Month:	613
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
Contact Person's Telephone Number:	(352) 787-0980	Zip Code:	34749
Contact Person's E-Mail Address:	beheath@aquaamerica.com		
Contact Person's Fax Number:	(352) 787-6333		

**B. Water Treatment Plant Information**

Plant Name:	Piney Woods/Spring Lake Manor	Plant Telephone Number:	352-787-0980
Plant Address:	2038 Live Oak Drive	City:	Fruitland Park
		State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	Zip Code:	34731
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

*Will Fontaine* 7-7-06  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: June, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place 'X')	Hours plant in Operation	Net Quantity of Finished Water Produced gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	77,000		1.5									1.3	
2	X	24.0	61,000		1.3									1.0	
3		24.0	52,000												
4	X	24.0	52,000		1.4										
5	X	24.0	49,000		1.5									1.1	
6	X	24.0	58,000		1.4									1.0	
7	X	24.0	79,000		1.5									1.1	
8	X	24.0	57,000		1.6									1.1	
9	X	24.0	61,000		1.6									1.2	
10	X	24.0	86,000		1.6										
11		24.0	61,500												
12	X	24.0	61,500		1.4									1.1	
13	X	24.0	43,000		1.0									0.8	
14	X	24.0	34,000		1.1									0.6	
15	X	24.0	61,000		1.1									0.8	
16	X	24.0	43,000		1.2									0.8	
17	X	24.0	68,000		1.6										
18		24.0	55,500												
19	X	24.0	55,500		1.3									0.9	
20	X	24.0	48,000		1.2									0.9	
21	X	24.0	58,000		1.4									0.9	
22	X	24.0	56,000		1.5									1.1	
23	X	24.0	46,000		1.5									1.1	
24	X	24.0	57,000		1.5										
25		24.0	47,000												
26	X	24.0	47,000		1.3									0.9	
27	X	24.0	29,000		1.3									0.9	
28	X	24.0	60,000		1.2									0.8	
29	X	24.0	43,000		1.4									0.9	
30	X	24.0	41,000		1.2									0.9	
31		24.0													
Total			1,647,000												
Average			53,129												
Maximum			86,000												

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

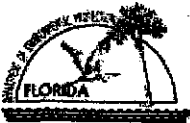
**III. Daily Data for the Month/Year of:** June, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations; or UV Dose; to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>			
1	X	24.0	400		1.4									1.3	
2	X	24.0			1.3									1.0	
3		24.0													
4	X	24.0			1.3										
5	X	24.0			1.3									1.1	
6	X	24.0			1.7									1.0	
7	X	24.0			1.3									1.1	
8	X	24.0			1.3									1.1	
9	X	24.0			1.5									1.2	
10	X	24.0			1.4										
11		24.0													
12	X	24.0			1.3									1.1	
13	X	24.0			1.0									0.8	
14	X	24.0			0.9									0.6	
15	X	24.0			0.8									0.8	
16	X	24.0			0.8									0.8	
17	X	24.0			1.2										
18		24.0													
19	X	24.0			1.1									0.9	
20	X	24.0			1.0									0.9	
21	X	24.0			1.1									0.9	
22	X	24.0			1.3									1.1	
23	X	24.0			1.3									1.1	
24	X	24.0			1.3										
25		24.0													
26	X	24.0			1.1									0.9	
27	X	24.0			1.1									0.9	
28	X	24.0			0.9									0.8	
29	X	24.0			1.2									0.9	
30	X	24.0			1.1									0.9	
31		24.0													
Total			400												
Average			13												
Maximum			400												

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : June 2006											
Community Water System (CWS) Name: Piney Woods											
Public Water System (PWS) Identification Number: 3351021											
	Plant 1 Name:	Plant 2 Name:	Plant 3 Name:	Plant 4 Name:	Plant 5 Name:	Plant 6 Name:	Plant 7 Name:	Plant 8 Name:	Plant 9 Name:	Plant 10 Name:	
	Piney Woods Well 1	Spring Lake Manor Well 2									
	Permitted Maximum Day Operating Capacity of Each Plant, gallons per day										Total
Day of Month	432,000	201,600									633,600
	Net Quantity of Finished Water Produced by Each Plant, gallons										Total
1	77,000	400									77,400
2	61,000	0									61,000
3	52,000	0									52,000
4	52,000	0									52,000
5	49,000	0									49,000
6	58,000	0									58,000
7	79,000	0									79,000
8	57,000	0									57,000
9	61,000	0									61,000
10	86,000	0									86,000
11	61,500	0									61,500
12	61,500	0									61,500
13	43,000	0									43,000
14	34,000	0									34,000
15	61,000	0									61,000
16	43,000	0									43,000
17	68,000	0									68,000
18	55,500	0									55,500
19	55,500	0									55,500
20	48,000	0									48,000
21	58,000	0									58,000
22	56,000	0									56,000
23	46,000	0									46,000
24	57,000	0									57,000
25	47,000	0									47,000
26	47,000	0									47,000
27	29,000	0									29,000
28	60,000	0									60,000
29	43,000	0									43,000
30	41,000	0									41,000
31	0	0									0
<b>Total</b>											1,647,400
<b>Avg</b>											53,142
<b>Max</b>											86,000



# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: July, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date of Month	Day Plant Operated (Place)	Flow (MGD)	Flow (MG)	Calculations of Free Chlorine Dose to Provide Four-Log Virus Inactivation in Applicable								Minimum Free Chlorine Dose Required (mg/L)	Lowest Residual Disinfectant Concentration at End of Distribution System (mg/L)	Emergence of Abnormal Operating Conditions, Reason, Maintenance Work that Involves Taking Water System Component Out of Operation
				Flow (MGD)	Flow (MG)	Disinfectant Contact Time (min)	Disinfectant Concentration (mg/L) Before Chlorine Demand	Disinfectant Concentration (mg/L) After Chlorine Demand	Flow (MGD)	Flow (MG)	Flow (MGD)			
	X	24.0	41,000				1.3							
		24.0	43,500											
	X	24.0	43,500				1.2						0.8	
	X	24.0	59,000				1.2						0.9	
	X	24.0	59,000				1.3						1.0	
	X	24.0	54,000				1.3						0.9	
	X	24.0	46,000				1.3						0.9	
	X	24.0	38,000				1.3							
		24.0	56,500											
	X	24.0	56,500				1.2						0.8	
	X	24.0	58,000				1.3						0.8	
	X	24.0	44,000				1.2						0.8	
	X	24.0	39,000				1.2						0.8	
	X	24.0	44,000				1.5						0.8	
		24.0	47,000											
	X	24.0	47,000				1.4							
	X	24.0	51,000				1.7						1.4	
	X	24.0	33,000				1.4						1.1	
	X	24.0	44,000				1.1						0.7	
	X	24.0	52,000				1.3						0.8	
	X	24.0	51,000				1.2						0.8	
	X	24.0	41,000				1.4							
		24.0	61,000											
	X	24.0	61,000				1.2						0.9	
	X	24.0	45,000				1.5						0.9	
	X	24.0	40,000				1.3						1.0	
	X	24.0	63,000				1.2						0.8	
	X	24.0	48,000				1.3						0.9	
	X	24.0	53,000				1.4							
		24.0	70,500											
	X	24.0	70,500				1.5							
			1,560,000											
			50,323											
			70,500											

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

## III. Daily Data for the Month/Year of: July, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of Month	Inception Started or Operation (M)	Hour plant in Operation	New Quantity of Water Treated (gal)	Calculations on Free Chlorine Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Dose Residual at Point of Distribution System (mg/L)	Remarks or Abnormal Operating Conditions, Repair or Maintenance Work that Involve Plant, Water System Components or Out of Operation
				Flow Rate (gpm)	Flow Rate (MGD)	Disinfectant Contact Time (min)	Flow Rate (gpm) at Point of Measurement	Flow Rate (MGD) at Point of Measurement	Flow Rate (gpm) at Point of Measurement	Flow Rate (MGD) at Point of Measurement	Flow Rate (gpm) at Point of Measurement	Flow Rate (MGD) at Point of Measurement	Flow Rate (gpm) at Point of Measurement		
	X	24.0													
		24.0													
	X	24.0												0.8	
	X	24.0												0.9	
	X	24.0	200											1.0	
	X	24.0												0.9	
	X	24.0												0.9	
	X	24.0													
		24.0													
	X	24.0												0.8	
	X	24.0												0.8	
	X	24.0												0.8	
	X	24.0												0.8	
	X	24.0												0.8	
		24.0													
	X	24.0												0.9	
	X	24.0												1.4	
	X	24.0												1.1	
	X	24.0												0.7	
	X	24.0												0.8	
	X	24.0												0.8	
		24.0													
	X	24.0												0.9	
	X	24.0												0.9	
	X	24.0												1.0	
	X	24.0												0.8	
	X	24.0												0.9	
	X	24.0													
		24.0													
	X	24.0												1.3	
Total			200												
Average			6												
Maximum			200												

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





## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : <span style="float: right;">July 2006</span>											
Community Water System (CWS) Name: <b>Piney Woods</b>											
Public Water System (PWS) Identification Number: <b>3351021</b>											
Day of Month	Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	Total
	Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day Operating Capacity of Each Plant, gallons per day											
	432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant, gallons											
	41,000	0									41,000
2	43,500	0									43,500
3	43,500	0									43,500
4	59,000	0									59,000
5	59,000	200									59,200
6	54,000	0									54,000
7	46,000	0									46,000
8	38,000	0									38,000
9	56,500	0									56,500
10	56,500	0									56,500
11	58,000	0									58,000
12	44,000	0									44,000
13	39,000	0									39,000
14	44,000	0									44,000
15	47,000	0									47,000
16	47,000	0									47,000
17	51,000	0									51,000
18	33,000	0									33,000
19	44,000	0									44,000
20	52,000	0									52,000
21	51,000	0									51,000
22	41,000	0									41,000
23	61,000	0									61,000
24	61,000	0									61,000
25	45,000	0									45,000
26	40,000	0									40,000
27	63,000	0									63,000
28	48,000	0									48,000
29	53,000	0									53,000
30	70,500	0									70,500
31	70,500	0									70,500
<b>Total</b>											1,560,200
<b>Avg</b>											50,329
<b>Max</b>											70,500

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** August, 2006

**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 175		Total Population Served at End of Month: 613	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaamerica.com		Contact Person's Fax Number: (352) 787-6333	

**B. Water Treatment Plant Information**

Plant Name: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Name	License Class	License Number	Days/Shifts Worked
Will Fontaine	C	6813	Days 1st Shift
Marty Neal	C	10027	Days 1st Shift
John Worrell	C	6597	Days 1st Shift

**II Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

	Will Fontaine	C-6813
Signature and Date	Printed or Typed Name	License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: August, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date	Time	Flow (MGD)	Chlorine Applied (lb/day)	Calculated Chlorine Residuals (mg/L)		Minimum Residual (mg/L)	Notes
				At Point of Application	At End of Distribution System		
X	24.0	50,000		1.6		1.2	
X	24.0	78,000		2.2		1.7	
X	24.0	65,000		2.0		1.6	
X	24.0	86,000		2.0		1.6	
X	24.0	45,000		1.7			
	24.0	64,500					
X	24.0	64,500		1.3		0.9	
X	24.0	42,000		1.2		0.9	
X	24.0	66,000		1.2		0.7	
X	24.0	55,000		1.2		0.8	
X	24.0	61,000		1.1		0.7	
X	24.0	49,000		1.3			
	24.0	72,000					
X	24.0	72,000		1.6		1.0	
X	24.0	30,000		1.6		1.1	
X	24.0	78,000		1.8		1.3	
X	24.0	57,000		1.7		1.3	
X	24.0	48,000		1.3		1.0	
X	24.0	39,000		1.2			
	24.0	68,000					
X	24.0	68,000		1.3		0.9	
X	24.0	51,000		1.2		0.7	
X	24.0	57,000		1.2		0.8	
X	24.0	61,000		1.3		0.8	
X	24.0	40,000		1.2		0.7	
	24.0	50,500					
X	24.0	50,500		1.3			
X	24.0	56,000		1.5		1.1	
X	24.0	43,000		1.4		1.1	
X	24.0	46,000		1.3		1.0	
X	24.0	50,000		1.4		1.0	
		1,757,000					
		56,677					
		86,000					

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





**MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS**

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : **August 2006**

Community Water System (CWS) Name: **Piney Woods**

Public Water System (PWS) Identification Number: **3351021**

Plant Name	Plant Name	Plant Name	Plant Name	Plant Name	Plant Name	Plant Name	Plant Name	Plant Name	Plant Name	Total
Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day Operating Capacity on Each Plant (gallons per day)										Total
432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant (gallons)										Total
50,000	0									50,000
78,000	0									78,000
65,000	0									65,000
86,000	0									86,000
45,000	0									45,000
64,500	0									64,500
64,500	0									64,500
42,000	0									42,000
60,000	100									60,100
55,000	0									55,000
61,000	0									61,000
49,000	0									49,000
72,000	0									72,000
72,000	0									72,000
30,000	0									30,000
78,000	0									78,000
57,000	0									57,000
48,000	0									48,000
39,000	0									39,000
68,000	0									68,000
68,000	0									68,000
51,000	0									51,000
57,000	0									57,000
61,000	0									61,000
40,000	0									40,000
50,500	0									50,500
50,500	0									50,500
56,000	0									56,000
43,000	0									43,000
46,000	0									46,000
50,000	0									50,000
										1,757,100
										56,681
										86,000

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** September, 2006

**A. Public Water System (PWS) Information**

PWS Name: <u>Piney Woods</u>		PWS Identification Number: <u>3351021</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: <u>173</u>		Total Population Served at End of Month: <u>613</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Brian Heath</u>		Contact Person's Title: <u>Area Manager</u>	
Contact Person's Mailing Address: <u>PO Box 490310</u>		City: <u>Leesburg</u>	State: <u>Florida</u> Zip Code: <u>34749</u>
Contact Person's Telephone Number: <u>(352) 787-0980</u>		Contact Person's Fax Number: <u>(352) 787-6333</u>	
Contact Person's E-Mail Address: <u>bheath@aquamerica.com</u>			

**B. Water Treatment Plant Information**

Plant Name: <u>Piney Woods Spring Lake Manor</u>		Plant Telephone Number: <u>352-787-0980</u>	
Plant Address: <u>2038 Live Oak Drive</u>		City: <u>Fruitland Park</u>	State: <u>Florida</u> Zip Code: <u>34731</u>
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>216,000</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>	
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>TV</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>	
Name	License Class	License Number	Day(s) Shift(s) Worked
<u>Will Fontaine</u>	<u>C</u>	<u>6813</u>	<u>Days 1st Shift</u>
<u>Marty Neal</u>	<u>C</u>	<u>10027</u>	<u>Days 1st Shift</u>
<u>John Worrell</u>	<u>C</u>	<u>6597</u>	<u>Days 1st Shift</u>

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

10/6/06  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: September, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date	Time	Flow (MGD)	Chlorine Dose (mg/L)	Free Chlorine Residual (mg/L)	Total Chlorine Residual (mg/L)	pH	Temperature (°F)	Temperature (°C)	Minimum Free Chlorine Residual (mg/L)	Minimum Total Chlorine Residual (mg/L)	Minimum Free Chlorine Residual (mg/L) at Remote Point in Distribution System	Minimum Total Chlorine Residual (mg/L) at Remote Point in Distribution System	Remarks	
														Free Chlorine Residual (mg/L)
X	24.0	41,000		1.6									1.1	
X	24.0	49,000		1.5										
	24.0	57,000												
X	24.0	57,000		1.5										1.2
X	24.0	50,000		1.5										1.1
X	24.0	58,000		1.5										1.1
X	24.0	52,000		1.4										1.0
X	24.0	51,000		1.5										1.0
X	24.0	45,000		1.4										
	24.0	50,000												
X	24.0	50,000		1.3										1.0
X	24.0	42,000		1.3										0.9
X	24.0	45,000		1.2										0.8
X	24.0	50,000		1.2										0.8
X	24.0	44,000		1.2										0.8
X	24.0	35,000		1.3										
	24.0	59,000												
X	24.0	59,000		1.2										0.8
X	24.0	46,000		1.2										0.8
X	24.0	40,000		1.4										0.7
X	24.0	47,000		1.0										0.7
X	24.0	45,000		1.1										0.7
X	24.0	34,000		1.1										
	24.0	72,000												
X	24.0	72,000		1.1										0.7
X	24.0	69,000		1.3										0.7
X	24.0	59,000		2.2										1.6
X	24.0	82,000		2.0										1.5
X	24.0	51,000		1.6										1.3
X	24.0	43,000		1.7										
	24.0													
		1,556,000												
		50,194												
		82,000												

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: September, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Plant Station	Date	Time	Flow (MGD)	Free Chlorine		Chlorine Dioxide		Ozone		Combined Chlorine (Chloramines)		Residual (mg/L)	Notes
				Measured	Required	Measured	Required	Measured	Required	Measured	Required		
X	24.0			1.4								1.1	
X	24.0												
	24.0												
X	24.0			1.4								1.2	
X	24.0			1.4								1.1	
X	24.0			1.4								1.1	
X	24.0			1.4								1.0	
X	24.0			1.3								1.0	
X	24.0			1.3									
	24.0	50											
X	24.0	50		1.1								1.0	
X	24.0			1.0								0.9	
X	24.0			0.9								0.8	
X	24.0			1.0								0.8	
X	24.0			1.0								0.8	
X	24.0			1.1									
	24.0												
X	24.0			1.0								0.8	
X	24.0			0.9								0.8	
X	24.0			0.9								0.7	
X	24.0			0.8								0.7	
X	24.0			0.8								0.7	
X	24.0			0.9									
	24.0												
X	24.0			0.9								0.7	
X	24.0			1.0								0.7	
X	24.0			2.0								1.6	
X	24.0			1.8								1.5	
X	24.0			1.5								1.3	
X	24.0			1.6									
	24.0												
		100											
		3											
		50											

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





# MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of: **September 2006**

Community Water System (CWS) Name: **Piney Woods**

Public Water System (PWS) Identification Number: **3351021**

Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	
Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day-Operational Capacity of Each Plant (gallons per day)										Total
432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant (gallons)										Total
43,000	0									43,000
49,000	0									49,000
57,000	0									57,000
57,000	0									57,000
50,000	0									50,000
58,000	0									58,000
52,000	0									52,000
51,000	0									51,000
45,000	0									45,000
50,000	50									50,050
50,000	50									50,050
42,000	0									42,000
45,000	0									45,000
50,000	0									50,000
44,000	0									44,000
35,000	0									35,000
59,000	0									59,000
59,000	0									59,000
46,000	0									46,000
40,000	0									40,000
47,000	0									47,000
45,000	0									45,000
34,000	0									34,000
72,000	0									72,000
72,000	0									72,000
69,000	0									69,000
59,000	0									59,000
82,000	0									82,000
51,000	0									51,000
43,000	0									43,000
0	0									0
										1,556,100
										50,197
										82,000





# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: October, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe): \_\_\_\_\_

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date	Time	Location	Chlorination of Raw Water to Demonstrate Four-Log Virus Inactivation of Enteric Bacteria										Minimum Free Chlorine Residual in Raw Water	Free Chlorine Residual in Distribution System mg/L	Sampling Location (Name, Address, City, State, Zip)	
			Free Chlorine (mg/L)	Free Chlorine (mg/L)	Free Chlorine (mg/L)	Free Chlorine (mg/L)	Free Chlorine (mg/L)	Free Chlorine (mg/L)	Free Chlorine (mg/L)	Free Chlorine (mg/L)	Free Chlorine (mg/L)	Free Chlorine (mg/L)				
X	24:0															1.0
X	24:0															1.1
X	24:0															1.1
X	24:0															1.0
X	24:0															1.0
X	24:0															
X	24:0															0.9
X	24:0															0.9
X	24:0															1.0
X	24:0															1.0
X	24:0															
X	24:0															1.0
X	24:0															1.1
X	24:0															1.0
X	24:0															0.9
X	24:0															0.8
X	24:0															
X	24:0															0.8
X	24:0															0.8
X	24:0															0.9
X	24:0															1.0
X	24:0															1.3
X	24:0															1.3
X	24:0															0.8
X	24:0															0.8
																300
																10
																300

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



**MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS**

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of: **October 2006**

Community Water System (CWS) Name: **Piney Woods**

Public Water System (PWS) Identification Number: **3351021**

Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	Total
Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day Operation Capacity of Each Plant, gallons per day										Total
432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant, gallons										Total
43,000	0									43,000
43,000	0									43,000
51,000	0									51,000
71,000	0									71,000
68,000	0									68,000
61,000	0									61,000
69,000	0									69,000
80,500	0									80,500
80,500	0									80,500
66,000	0									66,000
73,000	0									73,000
60,000	300									60,300
71,000	0									71,000
54,000	0									54,000
73,500	0									73,500
73,500	0									73,500
67,000	0									67,000
66,000	0									66,000
60,000	0									60,000
46,000	0									46,000
63,000	0									63,000
63,000	0									63,000
59,000	0									59,000
53,000	0									53,000
48,000	0									48,000
69,000	0									69,000
54,000	0									54,000
36,000	0									36,000
60,500	0									60,500
60,500	0									60,500
43,000	0									43,000
										1,886,300
										60,848
										80,500

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** November, 2006

**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 175		Total Population Served at End of Month: 613	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aguaamerica.com		Contact Person's Fax Number: (352) 787-6333	

**B. Water Treatment Plant Information**

Plant Name: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 34731	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator	Will Fontaine	C	6813 / Days 1st Shift
Other Operators	Marty Neal	C	10027 / Days 1st Shift
	John Worrell	C	6597 / Days 1st Shift

**II Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

12-8-06  
Signature and Date

Will Fontaine  
Printed or Typed Name

C-6813  
License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: November, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Date of Month	Day of the Week	Hours of Plant Operation	Net Quantity of Finished Water Produced (gal)	GAC Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions Requiring Investigation of Water System Operation		
				Peak Flow Rate (gpd)	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow (mg/L)	Disinfectant Contact Time (D) at C Measurement Point During Peak Flow (minutes)	Lowest C Provided Before or at First Customer During Peak Flow (mg/L)	Temp of Water (°C)	pH of Water if Applicable	Minimum C Required (mg/L)	Operating UV Dose (mW-sec/cm²)	Minimum UV Dose Required (mW-sec/cm²)	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System (mg/L)			
	X	24.0	69,000		1.1										0.7	
	X	24.0	47,000		1.3										0.9	
	X	24.0	55,000		1.4										1.0	
	X	24.0	38,000		1.5											
		24.0	66,000													
	X	24.0	66,000		1.4										0.9	
	X	24.0	55,000		1.4										1.0	
	X	24.0	47,000		1.3										0.9	
	X	24.0	53,000		1.4										1.0	
	X	24.0	40,000		1.5										1.0	
	X	24.0	56,000		1.5											
		24.0	65,000													
	X	24.0	65,000		1.4										1.0	
	X	24.0	53,000		1.4										1.0	
	X	24.0	59,000		1.2										0.9	
	X	24.0	52,000		1.2										0.8	
	X	24.0	55,000		1.1										0.8	
	X	24.0	49,000		1.1											
		24.0	64,000													
	X	24.0	64,000		1.3										0.9	
	X	24.0	45,000		1.2										0.9	
	X	24.0	62,000		1.2										0.8	
	X	24.0	56,000		1.3										0.9	
	X	24.0	65,000		1.4										1.0	
		24.0	62,000													
	X	24.0	62,000		1.5											
	X	24.0	77,000		1.3										0.9	
	X	24.0	51,000		1.2										0.9	
	X	24.0	48,000		1.3										0.9	
	X	24.0	55,000		1.5										1.0	
		24.0														
			1,701,000													
			54,871													
			77,000													

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

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Spring Lake Manor

III. Daily Data for the Month/Year of: November, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe): \_\_\_\_\_

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Day of Month	Plant Operated	Hours plant in operation	Net Quantity of Finished Water Produced (gals)	CFC Calculations for UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergencies or abnormal operating conditions, repair or maintenance work that involves taking water system components out of operation		
				CFC Calculations					UV Dose							
				Peak flow rate (gpd)	Lowest Residual Disinfectant Concentration (C) Before or during Customer Peak Flow (mg/l)	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow (minutes)	Flow of Disinfectant Provided Before or during Customer Peak Flow (min/l)	Temp of Water (C) if Applicable	Minimum UV Dose Required (mJ/cm <sup>2</sup> )	Lowest Operating UV Dose (mJ/cm <sup>2</sup> )	Minimum UV Dose Required (mW-sec/cm <sup>2</sup> )	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System (mg/l)				
1	X	24.0			0.9										0.7	
2	X	24.0	200		1.0										0.9	
3	X	24.0			1.2										1.0	
4	X	24.0			1.4											
5		24.0														
6	X	24.0			1.2										0.9	
7	X	24.0			1.2										1.0	
8	X	24.0			1.2										0.9	
9	X	24.0			1.2										1.0	
10	X	24.0			1.3										1.0	
11	X	24.0			1.4											
12		24.0														
13	X	24.0			1.2										1.0	
14	X	24.0			1.3										1.0	
15	X	24.0			1.1										0.9	
16	X	24.0			1.0										0.8	
17	X	24.0			0.9										0.8	
18	X	24.0			0.9											
19		24.0														
20	X	24.0			1.1										0.9	
21	X	24.0			1.0										0.9	
22	X	24.0			1.0										0.8	
23	X	24.0			1.2										0.9	
24	X	24.0			1.2										1.0	
25		24.0														
26	X	24.0			1.4											
27	X	24.0			1.1										0.9	
28	X	24.0			1.0										0.9	
29	X	24.0			1.2										0.9	
30	X	24.0			1.3										1.0	
31		24.0														
			200													
			6													
			200													

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





**MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS**

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : <b>November 2006</b>											
Community Water System (CWS) Name: <b>Piney Woods</b>											
Public Water System (PWS) Identification Number: <b>3351021</b>											
Day of Month	Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	Total
	Piney Woods Well 1	Spring Lake Manor Well 2									
	Permitted Maximum Day Operating Capacity of Each Plant, gallons per day										Total
	432,000	201,600									633,600
	Net Quantity of Finished Water Produced by Each Plant, gallons										Total
1	69,000	0									69,000
2	47,000	200									47,200
3	55,000	0									55,000
4	38,000	0									38,000
5	66,000	0									66,000
6	66,000	0									66,000
7	55,000	0									55,000
8	47,000	0									47,000
9	53,000	0									53,000
10	40,000	0									40,000
11	56,000	0									56,000
12	65,000	0									65,000
13	65,000	0									65,000
14	53,000	0									53,000
15	59,000	0									59,000
16	52,000	0									52,000
17	55,000	0									55,000
18	49,000	0									49,000
19	64,000	0									64,000
20	64,000	0									64,000
21	45,000	0									45,000
22	62,000	0									62,000
23	56,000	0									56,000
24	65,000	0									65,000
25	62,000	0									62,000
26	62,000	0									62,000
27	77,000	0									77,000
28	51,000	0									51,000
29	48,000	0									48,000
30	55,000	0									55,000
31	0	0									0
<b>Total</b>											1,701,200
<b>Avg</b>											54,877
<b>Max</b>											77,000

# MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



Polymer Page 3 Due in December

See Pages 4 for Instructions.

**I. General Information for the Month/Year of:** December, 2006

**A. Public Water System (PWS) Information**

PWS Name: <u>Piney Woods</u>		PWS Identification Number: <u>3351021</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: <u>175</u>		Total Population Served at End of Month: <u>613</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Brian Heath</u>		Contact Person's Title: <u>Area Manager</u>	
Contact Person's Mailing Address: <u>PO Box 490310</u>		City: <u>Leesburg</u>	State: <u>Florida</u>
Contact Person's Telephone Number: <u>(352) 787-0980</u>		Zip Code: <u>34749</u>	
Contact Person's E-Mail Address: <u>bheath@aquamerica.com</u>		Contact Person's Fax Number: <u>(352) 787-6333</u>	

**B. Water Treatment Plant Information**

Plant Name: <u>Piney Woods Spring Lake Manor</u>		Plant Telephone Number: <u>352-787-0980</u>	
Plant Address: <u>2038 Live Oak Drive</u>		City: <u>Fruitland Park</u>	State: <u>Florida</u>
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>216,000</u>			
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>IV</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>	
	Will Fontaine	C	6813
	Marty Neal	C	10027
	John Worrell	C	6597

**II. Certification by Lead/Chief Operator**

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

*Will Fontaine* 1-5-07  
 Signature and Date

Will Fontaine  
 Printed or Typed Name

C-6813  
 License Number

# MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Piney Woods

III. Daily Data for the Month/Year of: December, 2006

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Plant	Flow (MGD)	Flow (gpd)	Minimum Daily Dose (mg/L)	CT Calculations for UV/Dose for Disinfectant Four-Log Virus Inactivation, if Applicable										Minimum Daily Dose (mg/L)	Residual (mg/L)	Residual (mg/L)			
				Chloramines					Free Chlorine								Minimum Daily Dose (mg/L)	Residual (mg/L)	Residual (mg/L)
				Flow (MGD)	Flow (gpd)	Minimum Daily Dose (mg/L)	Residual (mg/L)	CT (min-mg/L)	Flow (MGD)	Flow (gpd)	Minimum Daily Dose (mg/L)	Residual (mg/L)	CT (min-mg/L)						
X	24.0	47,000														1.0			
X	24.0	54,000																	
	24.0	68,000																	
X	24.0	68,000														0.7			
X	24.0	39,000														0.9			
X	24.0	48,000														1.7			
X	24.0	57,000														1.0			
X	24.0	43,000														1.0			
X	24.0	40,000																	
	24.0	56,500																	
X	24.0	56,500														1.0			
X	24.0	63,000														1.0			
X	24.0	53,000														0.8			
X	24.0	58,000														0.8			
X	24.0	31,000														0.9			
X	24.0	55,000																	
	24.0	51,500																	
X	24.0	51,500														0.8			
X	24.0	52,000														0.9			
X	24.0	42,000														0.9			
X	24.0	52,000														1.0			
X	24.0	50,000														1.2			
X	24.0	32,000																	
	24.0	49,500																	
X	24.0	49,500														0.9			
X	24.0	48,000														0.8			
X	24.0	46,000														1.0			
X	24.0	52,000														1.0			
X	24.0	40,000														0.9			
X	24.0	42,000																	
	24.0	44,000																	
		1,539,000																	
		49,645																	
		68,000																	

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





## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

See page 2 for instructions.

Daily Finished-Water Production for the Month/Year of : <span style="float: right;">December 2006</span>											
Community Water System (CWS) Name: Piney Woods											
Public Water System (PWS) Identification Number: 3351021											
Day of Month	Plant 1 Name	Plant 2 Name	Plant 3 Name	Plant 4 Name	Plant 5 Name	Plant 6 Name	Plant 7 Name	Plant 8 Name	Plant 9 Name	Plant 10 Name	Total
	Piney Woods Well 1	Spring Lake Manor Well 2									
Permitted Maximum Day Operating Capacity of Each Plant (gallons per day)											
	432,000	201,600									633,600
Net Quantity of Finished Water Produced by Each Plant (gallons)											
1	47,000	0									47,000
2	54,000	0									54,000
3	68,000	0									68,000
4	68,000	0									68,000
5	39,000	0									39,000
6	48,000	0									48,000
7	57,000	0									57,000
8	43,000	0									43,000
9	40,000	0									40,000
10	56,500	0									56,500
11	56,500	0									56,500
12	63,000	0									63,000
13	53,000	300									53,300
14	58,000	0									58,000
15	31,000	0									31,000
16	55,000	0									55,000
17	51,500	0									51,500
18	51,500	0									51,500
19	52,000	0									52,000
20	42,000	0									42,000
21	52,000	0									52,000
22	50,000	0									50,000
23	32,000	0									32,000
24	49,500	0									49,500
25	49,500	0									49,500
26	48,000	0									48,000
27	46,000	0									46,000
28	52,000	0									52,000
29	40,000	0									40,000
30	42,000	0									42,000
31	44,000	0									44,000
<b>Total</b>											1,539,300
<b>AVG</b>											49,655
<b>Max</b>											68,000

**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

PWS ID:	3351021	Plant Name:	Piney Woods/Spring Lake Manor
---------	---------	-------------	-------------------------------

**IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: \*** 2006

A. Is any polymer containing the monomer acrylamide used at the water treatment plant?  No  Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose ppm =	Acrylamide Level, % <sup>†</sup> =
--------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant?  No  Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose ppm =	Epichlorohydrin Level, % <sup>†</sup> =
--------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant?  No  Yes, and the type of sequestrant, sequestrant dose, ect., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO <sub>4</sub> or mg/L of silicate as SiO <sub>2</sub> =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO <sub>2</sub> =

\* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

<sup>†</sup> Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

**PERMIT**

PINEY WOODS / SPRING LAKE



# St. Johns River Water Management District

Kirby B Green III Executive Director • David W Fisk Assistant Executive Director

4049 Reid Street • P.O. Box 1429 • Palatka FL 32178-1429 • (386) 329-4500  
On the Internet at [www.sjrwmd.com](http://www.sjrwmd.com).

CERTIFIED NUMBER: 7004 0750 0003 3823 0264

August 12, 2004

Aqua Utilities of Florida  
6960 Professional Parkway East, Suite 400  
Sarasota, FL 34240


SUBJECT: Consumptive Use Permit #2604

The District has received a copy of the Bill of Sale naming Aqua Utilities Florida as the owner of the parcel of property formerly owned by Florida Water Services.

The above referenced permit is hereby transferred to Aqua Utilities Florida as the new permit holder, you are required to comply with all the conditions as noted in the permit. If you have any questions concerning the conditions of your permit, please contact Shannon Joyce, Hydrologist IV, 407-659-4848.

Thank you for your cooperation with this matter. If you have any questions or if the District can be of further assistance, please do not hesitate to contact us.

Sincerely,

  
Gloria Lewis, Director  
Division of Permit Data Services

Enclosures:

- Permit
- Conditions of Issuance
- Compliance Forms
- Well Tags

CC: District Permit File  
Lynn Minor, Data Management Supervisor 

DOCUMENT NUMBER - DATE  
04312 MAY 22 88  
FPSC-COMMISSION CLERK

GOVERNING BOARD

Ometrias D Long CHAIRMAN APOPKA	David G. Graham, VICE CHAIRMAN ACKSOAVILLE	R. Clay Albright, SECRETARY OCHA, A	Duane Ottenstrofer, TREASURER JACKSONVILLE
W. Michael Branch FERNANDINA BEACH	John G Sowinski ORLANDO	William Kerr MELBOURNE BEACH	Ann T Moore BUNNELL
			Susan N Hughes JACKSONVILLE



#### 40C-1.612 TRANSFER OF OWNERSHIP OF PERMIT

- (1) **Transfer of Permitted Facility.** Within (30) days of any sale, conveyance, or other transfer of a facility, system, or well permitted by the District, the existing permittee must notify the District, in writing, of such transfer, giving the name and address of the transferee and providing a copy of the instrument effectuating the transfer.
- (2) **Transfer of Interest in Real Property.** Within (30) days of any transfer of ownership or control of the real property at which any permitted facility, system, consumptive use, or activity is located the permittee must notify the District, in writing, of the transfer, giving the name and address of the new owner or person in effectuating the transfer.
- (3) **Transfer of Permit.** To transfer a permit, the permittee must provide the information required in subsections (1) and (2), together with a written statement from the proposed transferee that it will bound by all terms and conditions of the permit. Additionally, where applicable, the transferee must demonstrate that it is capable of constructing, operating and maintaining the permitted facility, system, consumptive use, well or activity. Once the required information has been provided, the District may transfer the permit to the transferee.

PERMIT NO. 2606

ORIGINAL PERMIT ISSUED: July 24, 2002  
TRANSFER PROCESS DATE: August 23, 2004

PROJECT NAME: Stone Mountain

**A PERMIT AUTHORIZING:**

The District authorizes, as limited by the attached permit conditions, the use of 5.0 million gallons per year of ground water from the Floridan aquifer for the household use of 61 people and 0.1 million gallons per day for essential fire protection.

**LOCATION:**

Site: Stone Mountain  
Lake County

Section(s): 18                      Township(s): 20S                      Range(s): 25E

**ISSUED TO:**

Aqua Utilities Florida  
6960 Professional Parkway East, Suite 400  
Sarasota, FL 34240

Permittee agrees to hold and save the St. Johns River Water Management District and its successors harmless from any and all damages, claims, or liabilities which may arise from permit issuance. Said application, including all maps and specifications attached thereto, is by reference made a part hereof.

This permit does not convey to permittee any property rights nor any rights of privileges other than those specified herein, nor relieve the permittee from complying with any law, regulation or requirement affecting the rights of other bodies or agencies. All structures and works installed by permittee hereunder shall remain the property of the permittee.

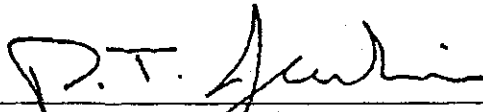
This permit may be revoked, modified or transferred at any time pursuant to the appropriate provisions of Chapter 373, Florida Statutes and 40C-1, Florida Administrative Code.

**PERMIT IS CONDITIONED UPON:**

See conditions on attached "Exhibit A", dated July 24, 2002

**AUTHORIZED BY:** St. Johns River Water Management District  
Department of Resource Management

By: \_\_\_\_\_



Dwight Jenkins  
Division Director

**"EXHIBIT A"**  
**CONDITIONS FOR ISSUANCE OF PERMIT NUMBER 2606**  
**AQUA UTILITIES FLORIDA**  
**DATED JULY 24, 2002**

1. District Authorized staff, upon proper identification, will have permission to enter, inspect and observe permitted and related facilities in order to determine compliance with the approved plans, specifications and conditions of this permit.
2. Nothing in this permit should be construed to limit the authority of the St. Johns River Water Management District to declare a water shortage and issue orders pursuant to Section 373.175, Florida Statutes, or to formulate a plan for implementation during periods of water shortage, pursuant to Section 373.246, Florida Statutes. In the event a water shortage, is declared by the District Governing Board, the permittee must adhere to the water shortage restriction as specified by the District, even though the specified water shortage restrictions may be inconsistent with the terms and conditions of this permit.
3. Prior to the construction, modification, or abandonment of a well, the permittee must obtain a Water Well Construction Permit from the St. Johns River Water Management District, or the appropriate local government pursuant to Chapter 40C-3, Florida Administrative Code. Construction, modification, or abandonment of a well will require modification of the consumptive use permit when such construction, modification or abandonment is other than that specified and described on the consumptive use permit application form.
4. Leaking or inoperative well casings, valves, or controls must be repaired or replaced as required to eliminate the leak or make the system fully operational.
5. Legal uses of water existing at the time of the permit application may not be interfered with by the consumptive use. If unanticipated interference occurs, the District may revoke the permit in whole or in part to curtail or abate the interference unless the permittee mitigates for the interference. In those cases where other permit holders are identified by the District as also contributing to the interference, the permittee may choose to mitigate in a cooperative effort with these other permittees. The permittee must submit a mitigation plan to the District for approval prior to implementing such mitigation.
6. Off-site land uses existing at the time of permit application may not be significantly adversely impacted as a result of the consumptive use. If unanticipated significant adverse impacts occur, the District shall revoke the permit in whole or in part to curtail or abate the adverse impacts, unless the impacts can be mitigated by the permittee.
7. The District must be notified, in writing, within 30 days of any sale, conveyance, or other transfer of a well or facility from which the permitted consumptive use is made or within 30 days of any transfer of ownership or control of the real property at which the permitted consumptive use is located. All transfers of ownership or transfers of permits are subject to the provisions of section 40C-1.612, Florida Administrative Code.
8. A District-issued identification tag shall be prominently displayed at each withdrawal site by permanently affixing such tag to the pump, headgate, valve or other withdrawal facility as provided by Section 40C-2.401, Florida Administrative Code. Permittee shall notify the District in the event that a replacement tag is needed.
9. Total withdrawals from well number 1 (GRS ID 9591) (as listed on the application) must be recorded continuously, totaled monthly, and reported to the District at least every six months from the initiation of the monitoring using Form No. EN-50. The reporting dates each year will be as follows for the duration of the permit:

Reporting Period	Report Due Date
January - June	July 31
July - December	January 31

10. This permit will expire 20 years from the date of issuance. July 24, 2022
11. Maximum annual withdrawal from the Floridan Aquifer for household type uses must not exceed 5.0 million gallons.
12. Maximum daily withdrawal from the Floridan Aquifer for essential fire protection, must not exceed 0.1 million gallons.
13. Well number 1 (GRS ID 9591) (as listed on the application) is equipped with a totalizing flow meter. This meter must maintain 95% accuracy, be verifiable and be installed according to the manufacturer's specifications. Documentation from the local fire protection authority must be received by the District within 30 days of the well being used for essential fire protection. The documentation must include the pump capacity and the duration of pumping.
14. All submittals made to demonstrate compliance with this permit must include the CUP number 2606 plainly labeled on the submittal.
15. Permittee must have all flow meters checked for accuracy at least once every 3 years within 30 days of the anniversary date of permit issuance, and recalibrated if the difference between the actual flow and the meter reading is greater than 5%. District Form No. EN-51 must be submitted to the District within 10 days of the inspection/calibration.
16. The permittee must maintain all flow meters. In case of failure or breakdown of any meter, the District must be notified in writing within 5 days of its discovery. A defective meter must be repaired or replaced within 30 days of its discovery.
17. The permittee must implement the Water Conservation Plan submitted to the District, and maintain these practices for the duration of the permit.
18. The lowest quality water source, such as reclaimed water and surface/storm water, must be used as irrigation water when deemed feasible pursuant to District rules and applicable state law.

**SAMPLES**

**DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION AND LABORATORY REPORTING FORMAT**

**HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.**  
 5600 U.S. 1 North, Fort Pierce, FL 34946  
 Phone: (772) 465-2400, Ext. 225 Fax: (772) 467-1584

Lab Receipt Date and Time: 12/4/07 1230  
 Received for Laboratory By: Poll  
 Analysis Date and Time: 12/4/07 1655  
 Sample Acceptance Criteria:  
 Sample Preservation  On Ice  Not On Ice 2-0°C  
 Disinfectant Check  Not Detected  >0.1 mg/l

5600 US 1 North Fort Pierce, FL 34946 DOH # E96080  
 4155 St. Johns Parkway Suite 1300 Sanford, FL 32771 FDOH # E83509  
 307 Coolidge Ave. Lehigh Acres, FL 33936 FDOH # E85370  
 18331 Cortez Blvd. Brooksville, FL 3460 FDOH # E84418

HBEL Report Number: 2130057 Sub-Contract Lab ID: \_\_\_\_\_

Analysis Method Requested:  
 Colibert  Membrane Filtration PWS I.D. 3351021

System Name: 6618 Pinckney Woods / Spring Lake / Manatee / AUF LAKE  
 System Address: 2013 Spring Lake Rd / 2038 Live Oak

City: FRUITLAND PARK System or Owner's Phone #: 352-787-0980 Fax #: 787-6333

Collector: Sandra Johnson Collector's Phone #: 516

Relinquished By: [Signature] Received By: [Signature] Relinquished By: [Signature]  
 Date/Time: 12/4/07 Date/Time: 12/4/07 Date/Time: 12/4/07 12:30

Type of Supply: (check only one)  
 Community Water System  Noncommunity Water System  Nontransient-Noncommunity Water System  Limited Use System  
 Private Well  Swimming Pool  Bottled Water  Other

Reason for Sampling: (check only one)  Routine Compliance  Repeat  Replacement  Main Clearance  Well Survey  Other

Sample Collection Date(s): 12/3/07

**LABORATORY CERTIFICATE OF ANALYSIS**

Total Coliform Analysis Method: (MF) SM9222B (Colibert) SM9223B

Fecal (MF) SM9221E		E. coli (MF) EC-MUG (Colibert) SM9223B		Lab Sample Number
Non Coliform	Total Coliform	Fecal or E. Coli	Data Qual. <sup>2</sup>	
	A			2130057 001
	A			002
	A			003
	A			2130057 004

INSTRUMENT NUMBER - 104312 MAY 22 08  
 FPSC-COMMISSION CLERK

TO BE COMPLETED BY COLLECTOR OF SAMPLE

Sample Number	SAMPLE POINT (Location or Specific Address)	Collection Time	Sample Type	Disinfect Resid mg/L	pH
W1	Well 1	4:35	R	-	-
W2	Well 2	4:00	R	-	-
R1	36417 VIA MARCIA	4:10 PM	D	1.3	-
R2	36328 SPRING LAKE RD	4:20 PM	D	1.0	-

Average of disinfectant residuals for routine and repeat samples. (Complete for community and nontransient noncommunity systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.) 1.15

Disinfectant Residual Analysis Method:  DPD Colorimetric  Other  
 Person performing analysis is:  
 A certified operator (# C-65971)  Employed by a certified lab  
 Supervised by a certified operator (# \_\_\_\_\_)  Employed by DEP or DOH

Name and Mailing Address of Person/Firm to Receive Report

**Aqua Utilities Florida, Inc.**  
 1100 Thomas Avenue  
 Leesburg, FL 34748  
Attn: Patricia Ferris



Page 1 of 1

Key: P - Present A - Absent C - Confident Growth  
 TNTC-Too Numerous to Count TA-Turbid  
 L.C.A. Absence of gas or acid  
 Analyst: Poll

Report authorized by: [Signature] Technical Director or Designee  
 Date: 12/9/07  
 Unless otherwise noted, all test results contained within this report meet all applicable Method, Laboratory and NELAP guidelines. Questions regarding this report should be directed to the report Signatory at the phone number above.

Satisfactory  Repeat Samples Required  
 Incomplete Collection Information  Replacement Samples Required  
 Date Reviewed by DEP/DOH: \_\_\_\_\_  
 DEP/DOH Reviewing Official: \_\_\_\_\_

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

Date issued: February 27, 2007

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

---

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Pine Woods #6418 DW NO3/NO2 [2127991]  
Received: 2/22/07 13:00

---

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories, Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:  
E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,



Cindy Cromer  
Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 2/27/07



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 467-2400, Ext. 285 Fax: (772) 467-584

**Quality Control Summary**

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Pine Woods #6418 DW NO3/NO2  
Received: 2/22/07 13:00

**[2127991]**

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

<b>Method Narratives (If Applicable)</b>			
<u>HBEL Sample Number</u>	<u>Sample ID</u>	<u>Analytical Method</u>	<u>Description</u>

**Quality Control Summary**

<u>Method</u>	<u>HBEL Batch</u>	<u>Analyte</u>	<u>Analytical Issue</u>
---------------	-------------------	----------------	-------------------------

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509



307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 2/27/07



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

**CERTIFICATE OF ANALYSIS**

**[2127991]**

**Client:** Aqua Utilities Florida, Inc.

**Workorder ID:** Pine Woods #6418 DW NO3/NO2

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
<b>Laboratory ID: 2127991001</b> <b>Sample ID: Point of Entry Grab</b>						<b>Sampled: 02/22/07 8:15</b> <b>Matrix: Water</b>		<b>Received: 02/22/07 13:00</b> <b>Results reported on Wet Weight Basis</b>		
Nitrate as N		0.011	mg/L	0.0030	EPA 300.0	IC7134		02/23/07 13:06	JL	E96080
Nitrite as N		0.0022 U	mg/L	0.0022	EPA 300.0	IC7134		02/23/07 13:06	JL	E96080

<sup>1</sup>Result Qualifiers: U = Not Detected    I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
 Applicable Florida Department of Environmental Protection Qualifiers defined below.    Statement of Estimated Uncertainty available upon request.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509



307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 2/27/07

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

900 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

Date issued: February 27, 2007

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

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Client: Aqua Utilities Florida, Inc.  
Workorder ID: Spring Lk Manor #6418 DW NO3/2 [2127992]  
Received: 2/22/07 13:00

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Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:  
E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,

  
Cindy Cromer  
Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

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FDOH # E83509

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FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 2/27/07



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-1584

**Quality Control Summary**

**Client:** Aqua Utilities Florida, Inc.  
**Workorder ID:** Spring Lk Manor #6418 DW NO3/2  
**Received:** 2/22/07 13:00

**[2127992]**

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

<u>HBEL Sample</u>		<u>Method Narratives (If Applicable)</u>	
<u>Number</u>	<u>Sample ID</u>	<u>Analytical Method</u>	<u>Description</u>

**Quality Control Summary**

<u>Method</u>	<u>HBEL Batch</u>	<u>Analyte</u>	<u>Analytical Issue</u>
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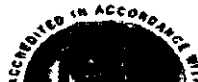
5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 2/27/07



**HARBOR BRANCH  
ENVIRONMENTAL  
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5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

**CERTIFICATE OF ANALYSIS**

**[2127992]**

**Client:** Aqua Utilities Florida, Inc.

**Workorder ID:** Spring Lk Manor #6418 DW NO3/2

Parameter	Qualifier	Result <sup>1</sup>	Units	Reporting Limit	Method	Laboratory Prep Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID:		2127992001		Sampled: 02/22/07 7:55		Received: 02/22/07 13:00				
Sample ID:		Point of Entry Grab		Matrix: Water		Results reported on Wet Weight Basis				
Nitrate as N		0.013	mg/L	0.0030	EPA 300.0	IC7134		02/23/07 12:48	JL	E96080
Nitrite as N		0.0022 U	mg/L	0.0022	EPA 300.0	IC7134		02/23/07 12:48	JL	E96080

<sup>1</sup>Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

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FDOH # E83509

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FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418



Printed: 2/27/07

**HARBOR BRANCH  
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LABORATORIES, INC.**

600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-1584

Date issued: November 8, 2006

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

---

Client: Aqua Utilities Florida, Inc.  
Workorder ID: 6418 Piney Woods Tri-Annual  
Received: 10/12/06 13:30

[2127084]

---


Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:  
E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,



Cindy Cromer  
Technical Director or Designee

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FDOH # E85370

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FDOH # E84418

Printed: 11/8/06



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600 US 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

**Quality Control Summary**

Client: Aqua Utilities Florida, Inc.  
Workorder ID: 6418 Piney Woods Tri-Annual  
Received: 10/12/06 13:30

[2127084]

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

<u>HBEL Sample</u>		<u>Method Narratives (If Applicable)</u>	
<u>Number</u>	<u>Sample ID</u>	<u>Analytical Method</u>	<u>Description</u>
2127084001	Point of Entry Grab	EPA 525.2	No MS/MSD analyzed in batch. Precision and Accuracy determined with LCS/LCSD
		EPA 548.1	No MS/MSD analyzed in batch. Precision and Accuracy determined with LCS/LCSD

**Quality Control Summary**

<u>Method</u>	<u>HBEL Batch</u>	<u>Analyte</u>	<u>Analytical Issue</u>
<u>EPA 300.0</u>			
	IC6982		
2127084001	Nitrate as N		Accuracy - Outside acceptance limits in the MS.
2127084001	Nitrate as N		Accuracy - Outside acceptance limits in the MSD.
2127084001	Nitrite as N		Accuracy - Outside acceptance limits in the MS.
2127084001	Nitrite as N		Accuracy - Outside acceptance limits in the MSD.
<u>EPA 505</u>			
	PEST4810		
2127084001	Decachlorobiphenyl		Surrogate - Outside acceptance Limits.
2127084001	Tetrachlorometaxylene		Surrogate - Outside acceptance Limits.

The above due to matrix effects. Accuracy/Precision demonstrated with other QC samples.

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FDOH # E85370

16331 Cortez Blvd  
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FDOH # E84418

Printed: 11/8/06



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500 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-1584

**CERTIFICATE OF ANALYSIS**

[2127084]

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6418 Piney Woods Tri-Annual

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID	
Laboratory ID:		2127084001		Sampled: 10/11/06 16:40		Received: 10/12/06 13:30					
Sample ID:		Point of Entry Grab		Matrix: Water		Results reported on Wet Weight Basis					
Odor		2.0	T.O.N.	1.0	EPA 140.1	WCDE15248		10/12/06 15:45	RM	E83509	
pH [6.5-8.5]	Q	7.97	SU	0.200	EPA 150.1	WCGE26433		10/14/06 19:18	GS	E96080	
Aluminum		0.0043	mg/L	0.0030	EPA 200.7	META8185		10/26/06 14:49	DM	E96080	
Barium		0.012	mg/L	0.0018	EPA 200.7	META8185		10/26/06 14:49	DM	E96080	
Beryllium		0.00010 U	mg/L	0.00010	EPA 200.7	META8185		10/26/06 14:49	DM	E96080	
Cadmium		0.00070 U	mg/L	0.00070	EPA 200.7	META8185		10/26/06 14:49	DM	E96080	
Chromium		0.0018 U	mg/L	0.0018	EPA 200.7	META8185		10/26/06 14:49	DM	E96080	
Copper		0.0014 U	mg/L	0.0014	EPA 200.7	META8185		10/26/06 14:49	DM	E96080	
Iron		0.025 U	mg/L	0.025	EPA 200.7	META8185		10/26/06 14:49	DM	E96080	
Manganese		0.0063	mg/L	0.0037	EPA 200.7	META8185		10/26/06 14:49	DM	E96080	
Nickel		0.0020 U	mg/L	0.0020	EPA 200.7	META8185		10/26/06 14:49	DM	E96080	
Silver		0.0010 U	mg/L	0.0010	EPA 200.7	META8185		10/26/06 14:49	DM	E96080	
Sodium		12	mg/L	0.50	EPA 200.7	META8185		10/26/06 14:49	DM	E96080	
Zinc		0.010 U	mg/L	0.010	EPA 200.7	META8185		10/26/06 14:49	DM	E96080	
Antimony		0.0042 U	mg/L	0.0042	EPA 200.9	META8175		10/17/06 15:38	DM	E96080	
Lead		0.00061 U	mg/L	0.00061	EPA 200.9	META8191		10/31/06 13:54	DM	E96080	
Selenium		0.0022 U	mg/L	0.0022	EPA 200.9	META8186		10/26/06 17:13	DM	E96080	
Thallium		0.0010 U	mg/L	0.0010	EPA 200.9	META8177		10/18/06 19:08	DM	E96080	
Mercury		0.000060 U	mg/L	0.000060	EPA 245.1	META8176	10/16/06 9:34	10/17/06 13:25	DM	E96080	
Chloride		19	mg/L	5.0	EPA 300.0	IC6983		10/13/06 15:30	JL	E96080	
Fluoride		0.14	mg/L	0.011	EPA 300.0	IC6982		10/13/06 13:45	JL	E96080	
Nitrate as N		0.012	mg/L	0.0030	EPA 300.0	IC6982		10/13/06 13:45	JL	E96080	
Nitrite as N		0.0022 U	mg/L	0.0022	EPA 300.0	IC6982		10/13/06 13:45	JL	E96080	
Sulfate		5.5	mg/L	1.4	EPA 300.0	IC6983		10/13/06 15:30	JL	E96080	
1,2-Dibromo-3-chloropropane		0.0020 U	ug/L	0.0020	EPA 504.1	PEST4806	10/20/06 11:56	10/20/06 19:08	JL	E96080	
1,2-Dibromoethane		0.0047 U	ug/L	0.0047	EPA 504.1	PEST4806	10/20/06 11:56	10/20/06 19:08	JL	E96080	
Chlordane		0.12 U	ug/L	0.12	EPA 505	PEST4810	10/16/06 9:14	10/17/06 2:01	JL	E96080	
Endrin		0.096 U	ug/L	0.096	EPA 505	PEST4810	10/16/06 9:14	10/17/06 2:01	JL	E96080	
gamma-BHC (Lindane)		0.019 U	ug/L	0.019	EPA 505	PEST4810	10/16/06 9:14	10/17/06 2:01	JL	E96080	
Heptachlor		0.034 U	ug/L	0.034	EPA 505	PEST4810	10/16/06 9:14	10/17/06 2:01	JL	E96080	
Heptachlor epoxide		0.026 U	ug/L	0.026	EPA 505	PEST4810	10/16/06 9:14	10/17/06 2:01	JL	E96080	
Methoxychlor		0.041 U	ug/L	0.041	EPA 505	PEST4810	10/16/06 9:14	10/17/06 2:01	JL	E96080	
PCB		0.13 U	ug/L	0.13	EPA 505	PEST4810	10/16/06 9:14	10/17/06 2:01	JL	E96080	
Toxaphene		0.57 U	ug/L	0.57	EPA 505	PEST4810	10/16/06 9:14	10/17/06 2:01	JL	E96080	
2,4,5-TP		0.19 U	ug/L	0.19	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 18:56	JL	E96080	
2,4-D		0.22 U	ug/L	0.22	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 18:56	JL	E96080	
Dalapon		2.3 U	ug/L	2.3	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 18:56	JL	E96080	
Dinoseb		0.23 U	ug/L	0.23	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 18:56	JL	E96080	
Pentachlorophenol		0.39 U	ug/L	0.39	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 18:56	JL	E96080	
Endosulfan		0.23 U	ug/L	0.23	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 18:56	JL	E96080	
1,1,1-Trichloroethane		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080	

5600 US 1 North  
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FDOH # E96080

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FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418



# HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.

600 U.S. 1 North, Fort Pierce, FL 34946  
 Home: (772) 465-2400, Ext. 285 Fax: (772) 467-5884

## CERTIFICATE OF ANALYSIS

[2127084]

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6418 Piney Woods Tri-Annual

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
1,1,2-Trichloroethane		0.44 U	ug/L	0.44	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
1,1-Dichloroethene		0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
1,2,4-Trichlorobenzene		0.41 U	ug/L	0.41	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
1,2-Dichlorobenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
1,2-Dichloroethane		0.29 U	ug/L	0.29	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
1,2-Dichloropropane		0.40 U	ug/L	0.40	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
1,4-Dichlorobenzene		0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
Benzene		0.20 U	ug/L	0.20	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
Carbon tetrachloride		0.24 U	ug/L	0.24	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
Chlorobenzene		0.30 U	ug/L	0.30	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
cis-1,2-Dichloroethene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
Ethylbenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
Methylene chloride		0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
Styrene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
Tetrachloroethene		0.24 U	ug/L	0.24	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
Toluene		0.22 U	ug/L	0.22	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
Total Xylenes		0.46 U	ug/L	0.46	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
trans-1,2-Dichloroethene		0.35 U	ug/L	0.35	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
richloroethene		0.36 U	ug/L	0.36	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
Vinyl chloride		0.32 U	ug/L	0.32	EPA 524.2	VOC2715		10/24/06 23:18	WR	E96080
Alachlor		0.60 U	ug/L	0.60	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 5:01	WR	E96080
Atrazine		0.47 U	ug/L	0.47	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 5:01	WR	E96080
Benzo(a)pyrene		0.068 U	ug/L	0.068	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 5:01	WR	E96080
bis(2-ethylhexyl)phthalate		0.83 U	ug/L	0.83	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 5:01	WR	E96080
Di(2-ethylhexyl)adipate		0.66 U	ug/L	0.66	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 5:01	WR	E96080
Hexachlorobenzene		0.30 U	ug/L	0.30	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 5:01	WR	E96080
Hexachlorocyclopentadiene		0.23 U	ug/L	0.23	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 5:01	WR	E96080
Simazine		0.62 U	ug/L	0.62	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 5:01	WR	E96080
Carbofuran		0.18 U	ug/L	0.18	EPA 531.1	HPLC2343		10/25/06 17:40	JJM	E96080
Oxamyl		0.41 U	ug/L	0.41	EPA 531.1	HPLC2343		10/25/06 17:40	JJM	E96080
Glyphosate		29 U	ug/L	29	EPA 547	HPLC2341		10/16/06 15:13	JJM	E96080
Endothall		2.8 U	ug/L	2.8	EPA 548.1	SVOC2448	10/18/06 9:23	10/23/06 22:25	WR	E96080
Diquat		1.9 U	ug/L	1.9	EPA 549.2	HPLC2346	10/16/06 9:24	10/31/06 11:53	JJM	E96080
Arsenic		0.0010 U	mg/L	0.0010	SM 3113 B	SAL1033		10/13/06 15:27	SAL	E84129
Color		4.0	CU	1.8	SM2120 B	WCGE26430		10/13/06 14:50	TCL	E96080
Total Dissolved Solids		160	mg/L	16	SM2540 C	WCGE26435		10/15/06 14:00	EE	E96080
Cyanide		0.0047 U	mg/L	0.0047	SM4500CN E	WCGE26500	10/20/06 12:00	10/23/06 11:25	GG	E96080
Surfactants as LAS, Mol.wt.340		0.022 U	mg/L	0.022	SM5540 C	WCGE26437	10/13/06 13:30	10/13/06 17:04	GG	E96080

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Printed: 11/8/06



Page 4 of 6



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

500 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-5884

**CERTIFICATE OF ANALYSIS**

[2127084]

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6418 Piney Woods Tri-Annual

Parameter	Qualifier	Result <sup>1</sup>	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID: 2127084002								Received: 10/12/06 13:30		
Sample ID: TRIP BLANK								Results reported on Wet Weight Basis		
Sampled: Matrix: Water										
1,1,1-Trichloroethane	0.21 U	ug/L	0.21	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
1,1,2-Trichloroethane	0.44 U	ug/L	0.44	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
1,1-Dichloroethene	0.23 U	ug/L	0.23	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
1,2,4-Trichlorobenzene	0.41 U	ug/L	0.41	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
1,2-Dichlorobenzene	0.21 U	ug/L	0.21	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
1,2-Dichloroethane	0.29 U	ug/L	0.29	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
1,2-Dichloropropane	0.40 U	ug/L	0.40	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
1,4-Dichlorobenzene	0.23 U	ug/L	0.23	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
Benzene	0.20 U	ug/L	0.20	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
Carbon tetrachloride	0.24 U	ug/L	0.24	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
Chlorobenzene	0.30 U	ug/L	0.30	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
cis-1,2-Dichloroethene	0.21 U	ug/L	0.21	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
Ethylbenzene	0.21 U	ug/L	0.21	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
Methylene chloride	0.23 U	ug/L	0.23	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
Styrene	0.21 U	ug/L	0.21	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
Tetrachloroethene	0.24 U	ug/L	0.24	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
Toluene	0.22 U	ug/L	0.22	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
Total Xylenes	0.46 U	ug/L	0.46	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
trans-1,2-Dichloroethene	0.35 U	ug/L	0.35	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
Trichloroethene	0.36 U	ug/L	0.36	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	
Vinyl chloride	0.32 U	ug/L	0.32	EPA 524.2	VOC2715	10/24/06	23:52	WR	E96080	

<sup>1</sup>Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.  
Q Sample held beyond the accepted holding time.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080  
Printed: 11/8/06

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509



307 Coolidge Avenue  
Lakewood, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 US 1 North, Fort Pierce FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-1584

Date issued: November 8, 2006

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

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Client: Aqua Utilities Florida, Inc.  
Workorder ID: 6418 Spring Lk Manor Triannual [2127083]  
Received: 10/12/06 13:30

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Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:  
E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,

  
Cindy Cromer  
Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

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Page 1 of 6

**HARBOR BRANCH  
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600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-1584

**Quality Control Summary**

Client: Aqua Utilities Florida, Inc.  
Workorder ID: 6418 Spring Lk Manor Triannual  
Received: 10/12/06 13:30

[2127083]

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

HBEL Sample		Method Narratives (If Applicable)	
Number	Sample ID	Analytical Method	Description
2127083001	Point of Entry Grab	EPA 525.2	No MS/MSD analyzed in batch. Precision and Accuracy determined with LCS/LCSD
		EPA 548.1	No MS/MSD analyzed in batch. Precision and Accuracy determined with LCS/LCSD

**Quality Control Summary**

Method	HBEL Batch	Analyte	Analytical Issue
EPA 505	PEST4810		
2127083001	Decachlorobiphenyl		Surrogate - Outside acceptance Limits.
2127083001	Tetrachlorometaxylene		Surrogate - Outside acceptance Limits.

The above due to matrix effects.

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FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 11/8/06



# HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.

5600 US 1 North, Fort Pierce, FL 34946  
 Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-1584

## CERTIFICATE OF ANALYSIS

[2127083]

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6418 Spring Lk Manor Triannual

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
<b>Laboratory ID: 2127083001</b>						<b>Sampled: 10/12/06 9:30</b>				
<b>Sample ID: Point of Entry Grab</b>						<b>Received: 10/12/06 13:30</b>				
						<b>Matrix: Water</b>				
						<b>Results reported on Wet Weight Basis</b>				
Odor		1.4	T.O.N.	1.0	EPA 140.1	WCDE15248		10/12/06 15:45	RM	E83509
pH [6.5-8.5]	Q	7.95	SU	0.200	EPA 150.1	WCGE26433		10/14/06 19:18	GS	E96080
Aluminum		0.0057	mg/L	0.0030	EPA 200.7	META8185		10/26/06 14:43	DM	E96080
Barium		0.012	mg/L	0.0018	EPA 200.7	META8185		10/26/06 14:43	DM	E96080
Beryllium		0.00010 U	mg/L	0.00010	EPA 200.7	META8185		10/26/06 14:43	DM	E96080
Cadmium		0.00070 U	mg/L	0.00070	EPA 200.7	META8185		10/26/06 14:43	DM	E96080
Chromium		0.0018 U	mg/L	0.0018	EPA 200.7	META8185		10/26/06 14:43	DM	E96080
Copper		0.0015	mg/L	0.0014	EPA 200.7	META8185		10/26/06 14:43	DM	E96080
Iron		0.025 U	mg/L	0.025	EPA 200.7	META8185		10/26/06 14:43	DM	E96080
Manganese		0.0058	mg/L	0.0037	EPA 200.7	META8185		10/26/06 14:43	DM	E96080
Nickel		0.0020 U	mg/L	0.0020	EPA 200.7	META8185		10/26/06 14:43	DM	E96080
Silver		0.0010 U	mg/L	0.0010	EPA 200.7	META8185		10/26/06 14:43	DM	E96080
Sodium		12	mg/L	0.50	EPA 200.7	META8185		10/26/06 14:43	DM	E96080
Zinc		0.010 U	mg/L	0.010	EPA 200.7	META8185		10/26/06 14:43	DM	E96080
Antimony		0.0042 U	mg/L	0.0042	EPA 200.9	META8175		10/17/06 15:34	DM	E96080
Lead		0.00081 U	mg/L	0.00061	EPA 200.9	META8191		10/31/06 13:54	DM	E96080
Selenium		0.0022 U	mg/L	0.0022	EPA 200.9	META8186		10/26/06 17:09	DM	E96080
Thallium		0.0010 U	mg/L	0.0010	EPA 200.9	META8177		10/18/06 19:04	DM	E96080
Mercury		0.000060 U	mg/L	0.000060	EPA 245.1	META8176	10/16/06 9:34	10/17/06 13:25	DM	E96080
Chloride		19	mg/L	5.0	EPA 300.0	IC6983		10/13/06 15:16	JL	E96080
Fluoride		0.14	mg/L	0.011	EPA 300.0	IC6982		10/13/06 15:46	JL	E96080
Nitrate as N		0.019	mg/L	0.0030	EPA 300.0	IC6982		10/13/06 15:46	JL	E96080
Nitrite as N		0.0022 U	mg/L	0.0022	EPA 300.0	IC6982		10/13/06 15:46	JL	E96080
Sulfate		5.5	mg/L	1.4	EPA 300.0	IC6983		10/13/06 15:16	JL	E96080
1,2-Dibromo-3-chloropropane		0.0020 U	ug/L	0.0020	EPA 504.1	PEST4806	10/20/06 11:56	10/20/06 18:36	JL	E96080
1,2-Dibromoethane		0.0047 U	ug/L	0.0047	EPA 504.1	PEST4806	10/20/06 11:56	10/20/06 18:36	JL	E96080
Chlordane		0.13 U	ug/L	0.13	EPA 505	PEST4810	10/16/06 9:14	10/17/06 1:32	JL	E96080
Endrin		0.099 U	ug/L	0.099	EPA 505	PEST4810	10/16/06 9:14	10/17/06 1:32	JL	E96080
gamma-BHC (Lindane)		0.019 U	ug/L	0.019	EPA 505	PEST4810	10/16/06 9:14	10/17/06 1:32	JL	E96080
Heptachlor		0.035 U	ug/L	0.035	EPA 505	PEST4810	10/16/06 9:14	10/17/06 1:32	JL	E96080
Heptachlor epoxide		0.027 U	ug/L	0.027	EPA 505	PEST4810	10/16/06 9:14	10/17/06 1:32	JL	E96080
Methoxychlor		0.043 U	ug/L	0.043	EPA 505	PEST4810	10/16/06 9:14	10/17/06 1:32	JL	E96080
PCB		0.13 U	ug/L	0.13	EPA 505	PEST4810	10/16/06 9:14	10/17/06 1:32	JL	E96080
Toxaphene		0.59 U	ug/L	0.59	EPA 505	PEST4810	10/16/06 9:14	10/17/06 1:32	JL	E96080
2,4,5-TP		0.19 U	ug/L	0.19	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 18:23	JL	E96080
2,4-D		0.22 U	ug/L	0.22	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 18:23	JL	E96080
Dalapon		2.3 U	ug/L	2.3	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 18:23	JL	E96080
Dinoseb		0.23 U	ug/L	0.23	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 18:23	JL	E96080
Pentachlorophenol		0.39 U	ug/L	0.39	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 18:23	JL	E96080
icloram		0.23 U	ug/L	0.23	EPA 515.1	PEST4815	10/23/06 6:31	11/3/06 18:23	JL	E96080
1,1,1-Trichloroethane		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080

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 FDOH # E85370

18331 Cortez Blvd  
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 FDOH # E84418



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 467-2400, Ext. 255 Fax: (772) 467-5884

**CERTIFICATE OF ANALYSIS**

**[2127083]**

**Client: Aqua Utilities Florida, Inc.**

**Workorder ID: 6418 Spring Lk Manor Triannual**

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
1,1,2-Trichloroethane		0.44 U	ug/L	0.44	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
1,1-Dichloroethene		0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
1,2,4-Trichlorobenzene		0.41 U	ug/L	0.41	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
1,2-Dichlorobenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
1,2-Dichloroethane		0.29 U	ug/L	0.29	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
1,2-Dichloropropane		0.40 U	ug/L	0.40	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
1,4-Dichlorobenzene		0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
Benzene		0.20 U	ug/L	0.20	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
Carbon tetrachloride		0.24 U	ug/L	0.24	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
Chlorobenzene		0.30 U	ug/L	0.30	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
cis-1,2-Dichloroethene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
Ethylbenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
Methylene chloride		0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
Styrene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
Tetrachloroethene		0.24 U	ug/L	0.24	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
Toluene		0.22 U	ug/L	0.22	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
Total Xylenes		0.46 U	ug/L	0.46	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
trans-1,2-Dichloroethene		0.35 U	ug/L	0.35	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
Trichloroethene		0.36 U	ug/L	0.36	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
Vinyl chloride		0.32 U	ug/L	0.32	EPA 524.2	VOC2715		10/24/06 22:11	WR	E96080
Alachlor		0.60 U	ug/L	0.60	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 4:22	WR	E96080
Atrazine		0.47 U	ug/L	0.47	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 4:22	WR	E96080
Benzo(a)pyrene		0.069 U	ug/L	0.069	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 4:22	WR	E96080
bis(2-ethylhexyl)phthalate		0.83 U	ug/L	0.83	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 4:22	WR	E96080
Di(2-ethylhexyl)adipate		0.67 U	ug/L	0.67	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 4:22	WR	E96080
Hexachlorobenzene		0.30 U	ug/L	0.30	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 4:22	WR	E96080
Hexachlorocyclopentadiene		0.23 U	ug/L	0.23	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 4:22	WR	E96080
Simazine		0.62 U	ug/L	0.62	EPA 525.2	SVOC2451	10/24/06 6:26	10/26/06 4:22	WR	E96080
Carbofuran		0.18 U	ug/L	0.18	EPA 531.1	HPLC2343		10/25/06 17:08	JJM	E96080
Oxamyl		0.41 U	ug/L	0.41	EPA 531.1	HPLC2343		10/25/06 17:08	JJM	E96080
Glyphosate		29 U	ug/L	29	EPA 547	HPLC2341		10/16/06 14:58	JJM	E96080
Endothal		2.8 U	ug/L	2.8	EPA 548.1	SVOC2448	10/18/06 9:23	10/23/06 22:03	WR	E96080
Diquat		1.9 U	ug/L	1.9	EPA 549.2	HPLC2346	10/16/06 9:24	10/31/06 11:46	JJM	E96080
Arsenic		0.0010 U	mg/L	0.0010	SM 3113 B	SAL1033		10/13/06 15:27	SAL	E84129
Color		4.0	CU	1.8	SM2120 B	WCGE26430		10/13/06 14:50	TCL	E96080
Total Dissolved Solids		150	mg/L	16	SM2540 C	WCGE26435		10/15/06 14:00	EE	E96080
Cyanide		0.0047 U	mg/L	0.0047	SM4500CN E	WCGE26500	10/20/06 12:00	10/23/06 11:25	GG	E96080
Surfactants as LAS, Mol.wt.340		0.022 U	mg/L	0.022	SM5540 C	WCGE26437	10/13/06 13:30	10/13/06 17:04	GG	E96080

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# HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.

600 U.S. 1 North, Fort Pierce, FL 34946  
 Phone: (772) 465-2400, Ext. 225 Fax: (772) 467-1584

## CERTIFICATE OF ANALYSIS

[2127083]

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6418 Spring Lk Manor Triannual

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID: 2127083002						Sampled: Received: 10/12/06 13:30 Matrix: Water Results reported on Wet Weight Basis				
Sample ID: TRIP BLANK										
1,1,1-Trichloroethane		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
1,1,2-Trichloroethane		0.44 U	ug/L	0.44	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
1,1-Dichloroethane		0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
1,2,4-Trichlorobenzene		0.41 U	ug/L	0.41	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
1,2-Dichlorobenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
1,2-Dichloroethane		0.29 U	ug/L	0.29	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
1,2-Dichloropropane		0.40 U	ug/L	0.40	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
1,4-Dichlorobenzene		0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
Benzene		0.20 U	ug/L	0.20	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
Carbon tetrachloride		0.24 U	ug/L	0.24	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
Chlorobenzene		0.30 U	ug/L	0.30	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
cis-1,2-Dichloroethene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
Ethylbenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
Methylene chloride		0.23 U	ug/L	0.23	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
Styrene		0.21 U	ug/L	0.21	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
Tetrachloroethene		0.24 U	ug/L	0.24	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
Toluene		0.22 U	ug/L	0.22	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
Total Xylenes		0.46 U	ug/L	0.46	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
trans-1,2-Dichloroethene		0.35 U	ug/L	0.35	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
Trichloroethene		0.36 U	ug/L	0.36	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080
Vinyl chloride		0.32 U	ug/L	0.32	EPA 524.2	VOC2715		10/24/06 22:44	WR	E96080

Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
 Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.  
 Q Sample held beyond the accepted holding time.

5600 US 1 North  
 Fort Pierce, FL 34946  
 FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
 Sanford, FL 32771  
 FDOH # E83509

307 Coolidge Avenue  
 Lehigh Acres, FL 33936  
 FDOH # E85370

16331 Cortez Blvd  
 Brooksville, FL 34601  
 FDOH # E84418

Printed: 11/8/06



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

500 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

Date issued: October 10, 2006

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

---

Client: Aqua Utilities Florida, Inc.  
Workorder ID: 6418 Piney Woods THM/HAA5 Grab [2126880]  
Received: 9/21/06 13:00

---

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:  
E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,

  
Cindy Cromer  
Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 10/10/06



Page 1 of 4

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 205 Fax: (772) 467-1584

**Quality Control Summary**

Client: Aqua Utilities Florida, Inc.  
Workorder ID: 6418 Piney Woods THM/HAA5 Grab  
Received: 9/21/06 13:00

[2126880]

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

<u>HBEL Sample</u>		<u>Method Narratives (if Applicable)</u>	
<u>Number</u>	<u>Sample ID</u>	<u>Analytical Method</u>	<u>Description</u>

**Quality Control Summary**

<u>Method</u>	<u>HBEL Batch</u>	<u>Analyte</u>	<u>Analytical Issue</u>
---------------	-------------------	----------------	-------------------------

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509



307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 10/10/06



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

**CERTIFICATE OF ANALYSIS**

[2126880]

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6418 Piney Woods THM/HAA5 Grab

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
<b>Laboratory ID: 2126880001</b> <b>Sample ID: 36227 Mary Ellen St</b>						<b>Sampled: 09/20/06 14:15</b> <b>Received: 09/21/06 13:00</b> <b>Matrix: Water</b> <b>Results reported on Wet Weight Basis</b>				
Bromodichloromethane		8.7	ug/L	0.25	EPA 524.2	VOC2702		10/2/06 23:40	WR	E96080
Bromoform		0.41 U	ug/L	0.41	EPA 524.2	VOC2702		10/2/06 23:40	WR	E96080
Chloroform		14	ug/L	0.25	EPA 524.2	VOC2702		10/2/06 23:40	WR	E96080
Dibromochloromethane		4.4	ug/L	0.30	EPA 524.2	VOC2702		10/2/06 23:40	WR	E96080
Total THMs		27	ug/L	0.50	EPA 524.2	VOC2702		10/2/06 23:40	WR	E96080

<sup>1</sup>Result Qualifiers: U = Not Detected      I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
 Applicable Florida Department of Environmental Protection Qualifiers defined below.      Statement of Estimated Uncertainty available upon request.

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080  
Printed: 10/10/06

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509



307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-1584

Date issued: October 10, 2006

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

---

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Spring Lk Manor 6418 THM/HAA5 [2126878]  
Received: 9/21/06 13:00

---

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:  
E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,

  
Cindy Cromer  
Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

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FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 10/10/06



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

500 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

**Quality Control Summary**

Client: Aqua Utilities Florida, Inc.  
Workorder ID: Spring Lk Manor 6418 THM/HAA5  
Received: 9/21/06 13:00

[2126878]

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

HBEL Sample

**Method Narratives (If Applicable)**

Number      Sample ID      Analytical Method      Description

**Quality Control Summary**

Method    HBEL Batch    Analyte

Analytical Issue

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080

4155 St. Johns Pkwy Suite 1300  
Sanford, FL 32771  
FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 33936  
FDOH # E85370

16331 Cortez Blvd  
Brooksville, FL 34601  
FDOH # E84418

Printed: 10/10/06



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-5884

**CERTIFICATE OF ANALYSIS**

[2126878]

**Client:** Aqua Utilities Florida, Inc.

**Workorder ID:** Spring Lk Manor 6418 THM/HAA5

Parameter	Qualifier	Result <sup>1</sup>	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
<b>Laboratory ID: 2126878001</b>						<b>Sampled: 09/20/06 13:35</b>				
<b>Sample ID: 2040 Live Oak Grab</b>						<b>Received: 09/21/06 13:00</b>				
						<b>Matrix: Water</b>				
						<b>Results reported on Wet Weight Basis</b>				
Bromodichloromethane		9.2	ug/L	0.25	EPA 524.2	VOC2702		10/2/06 22:33	WR	E96080
Bromoform		0.41 U	ug/L	0.41	EPA 524.2	VOC2702		10/2/06 22:33	WR	E96080
Chloroform		15	ug/L	0.25	EPA 524.2	VOC2702		10/2/06 22:33	WR	E96080
Dibromochloromethane		4.6	ug/L	0.30	EPA 524.2	VOC2702		10/2/06 22:33	WR	E96080
Total THMs		29	ug/L	0.50	EPA 524.2	VOC2702		10/2/06 22:33	WR	E96080

<sup>1</sup>Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.



**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

Date issued: March 17, 2006

To: Brian Heath  
Aqua Utilities Florida, Inc.  
POB 490310  
Leesburg, FL 34749

---

Client: Aqua Utilities Florida, Inc.  
Workorder ID: 6418 Piney Wd/Spring Lk NO2/3 [2125020]  
Received: 3/09/06 13:30

---

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2002 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:  
E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,



Cindy Cromer  
Technical Director or Designee

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5600 US 1 North  
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FDOH # E96080

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Sanford, FL 32771  
FDOH # E83509

307 Coolidge Avenue  
Lehigh Acres, FL 3393  
FDOH # E85370

2514 Osawaw Boulevard  
Spring Hill, FL 3460  
FDOH # E84418

Printed: 3/17/06



Page 1 of 4

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce FL 34946  
Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

**Quality Control Summary**

Client: Aqua Utilities Florida, Inc.  
Workorder ID: 6418 Piney Wd/Spring Lk NO2/3  
Received: 3/09/06 13:30

**[2125020]**

MB=Method Blank LCS=Laboratory Control Sample LCSD=Laboratory Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate

<u>HBEL Sample</u>	<b>Method Narratives (If Applicable)</b>		
<u>Number</u>	<u>Sample ID</u>	<u>Analytical Method</u>	<u>Description</u>

**Quality Control Summary**  
Analytical Issue

Method HBEL Batch Analyte

5600 US 1 North  
Fort Pierce, FL 34946  
FDOH # E96080  
Printed: 3/17/06

4155 St. John's Pkwy, Suite 1300  
Sanford, FL 32771  
FDOH # E83509



307 Coolidge Avenue  
Lehigh Acres, FL 3393  
FDOH # E85370

2514 Osawaw Boulevard  
Spring Hill, FL 3460  
FDOH # E84418

**HARBOR BRANCH  
ENVIRONMENTAL  
LABORATORIES, INC.**

5600 U.S. 1 North, Fort Pierce, FL 34946  
Phone: (772) 465-2400, Ext. 265 Fax: (772) 467-584

**CERTIFICATE OF ANALYSIS**

[2125020]

**Client:** Aqua Utilities Florida, Inc.

**Workorder ID:** 6418 Piney Wd/Spring Lk NO2/3

Parameter	Qualifier	Result <sup>1</sup>	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID	
<b>Laboratory ID: 2125020001</b>						<b>Sampled: 03/09/06 8:00</b>		<b>Received: 03/09/06 13:30</b>			
<b>Sample ID: POE P/Woods Well 1 Grab</b>						<b>Matrix: Water</b>		<b>Results reported on Wet Weight Basis</b>			
Nitrate as N		0.013	mg/L	0.0030	EPA 300.0	IC6715		03/10/06 17:18	RS	E96080	
Nitrite as N		0.0022 U	mg/L	0.0022	EPA 300.0	IC6715		03/10/06 17:18	RS	E96080	
<b>Laboratory ID: 2125020002</b>						<b>Sampled: 03/09/06 7:15</b>		<b>Received: 03/09/06 13:30</b>			
<b>Sample ID: POE SPG LK Manor Well 2 Grab</b>						<b>Matrix: Water</b>		<b>Results reported on Wet Weight Basis</b>			
Nitrate as N		0.0058	mg/L	0.0030	EPA 300.0	IC6715		03/10/06 16:26	RS	E96080	
Nitrite as N		0.0022 U	mg/L	0.0022	EPA 300.0	IC6715		03/10/06 16:26	RS	E96080	

<sup>1</sup>Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit  
Applicable Florida Department of Environmental Protection Qualifiers defined below Statement of Estimated Uncertainty available upon request.

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FDOH # E83509



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FDOH # E85370

2514 Osawaw Boulevard  
Spring Hill, FL 3460  
FDOH # E84418

Printed: 3/17/06

Page 3 of 4

**CORRESPONDENCE**





# Florida Department of Environmental Protection

Central District  
3319 Maguire Boulevard, Suite 232  
Orlando, Florida 32803-3767

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

VIA EMAIL  
[JMLIHVARCIK@AQUAAMERICA.COM]

June 29, 2007

Jack Lihvarcik, President  
Aqua Utilities Florida, Inc.  
1100 Thomas Avenue  
Leesburg, FL 34748

OCD-PW-SS-07-0817

<u>Lake County – PW</u>	<u>PWS ID Number</u>
Friendly Center Subdivision	3350426
East Lake Harris Estates	3350322
Stone Mountain Estates	3351282
Palm Mobile Home Estates	3350981
Piney Woods Subdivision (2 WTPs)	3351021
Hobby Hill Subdivision	3350544
Picciola Island Subdivision	3351009
Carlton Village	3350152

Dear Mr. Lihvarcik:

This confirms a visit to the subject community public water systems on April 18, 2007, by Danielle Owens to conduct sanitary survey inspections. Copies of the sanitary survey inspection reports are enclosed for your reference and records.

Deficiencies found during the sanitary surveys and in Department records are listed in the enclosed reports. These deficiencies shall be corrected in order to return to compliance with *Florida Administrative Code* (F.A.C.) Rules 62-550, 62-555, 62-560 and 62-602.

Please correct the indicated deficiencies, and notify the Department in writing that the deficiencies have been corrected, **no later than August 6, 2007**. (You may use the attached response form to indicate the corrective actions taken.)

If you have any questions, please contact Danielle Owens by email at [Danielle.D.Owens@dep.state.fl.us](mailto:Danielle.D.Owens@dep.state.fl.us) or by phone at (407) 894-7555, extension 2216.

Sincerely,

Kim Dodson, Environmental Manager  
Drinking Water Compliance and Enforcement

KMD/ddo  
Enclosures

cc: Patrick Farris, Aqua Utilities Florida, Inc. [PAFarris@aquaamerica.com]  
Danielle Owens, FDEP Drinking Water Compliance

DOCUMENT NUMBER - DATE  
04312 MAY 22 08  
FPSC-COMMISSION CLERK

State of Florida  
Department of Environmental Protection  
Central District

### SANITARY SURVEY REPORT

#### PLANT #1

Plant Name Piney Woods Subdivision -2WTPs County Lake PWS ID # 3351021-01  
Plant Location 2013 Spring Lake Road, Fruitland Park, FL 34731 Phone (352) 435-4028  
Owner Name Aqua Utilities Florida, Inc Phone (352) 435-4028  
Owner Address 1100 Thomas Avenue, Leesburg, FL 34748  
Contact Person Patrick Farris Title Environmental Compliance Specialist Phone (352) 435-4029  
This Survey Date 04/18/07 Last Survey Date 04/29/04 Last C.I. Date 08/24/99

#### PWS TYPE & CLASS

- Community (4C)  
 Non-transient Non-community  
 Non-Community

#### PWS STATUS

- Approved system with approval number & date  
HRS #4695, 1/31/61, As-Built 11/6/73,  
HRS #B-4695-B, 5/23/75, WC35-275708,9/7/95  
WC35-0080519, 1/15/99  
 Unapproved system

#### SERVICE AREA CHARACTERISTICS

Subdivision \_\_\_\_\_  
Food Service:  Yes  No  N/A

#### OPERATION & MAINTENANCE

Certified Operator:  Yes  No  Not required  
Operator(s) & Certification Class-Number  
Will Fontaine C-6813 Lead/Chief Operator  
See MOR for complete list of operators  
O & M Log:  Yes  No  Not required  
Operator Visitation Frequency  
Hrs/day: *Required 1hr /weekday* Actual 1hr /weekday  
*Days/wk: Required 5 + 1* Actual 5 + 1  
Non-consecutive Days?  Yes  No  N/A  
MORs submitted regularly?  Yes  No  N/A  
Data missing from MORs?  No  Yes  N/A  
One logbook for both water treatment plants.

Number of Service Connections 180  
Population Served 630 Basis Operator  
Average Day (from MORs) 49,298 gpd  
Max. Day (from MORs) 102,00 gpd 05/06  
Max-day Design Capacity 216,000 gpd

#### WRITTEN PROGRAMS

O & M Manual Yes Located Water treatment plant  
Written Preventive Maintenance Program Yes  
Flushing Plan  Yes  No Records No  
Valve Maintenance Plan  Yes  No Records No  
Emergency Response Plan  Yes  No  N/A  
Comments One operation and maintenance manual for both plants.

#### RAW WATER SOURCE

- GROUND; Number of Wells 1  
 SURFACE/UDI; Source \_\_\_\_\_  
 PURCHASED from PWS ID # \_\_\_\_\_  
 Emergency Water Source Spring Lake  
Emergency Water Capacity 100,800 gpd

#### AUXILIARY POWER SOURCE

- Yes  None  Not Required  
Source Katolight generator (propane)  
Capacity of Standby (kW) 45  
Switchover:  Automatic  Manual  
Standby Plan:  Yes  No  
Hrs Operated Under Load 1 hr/wk.  
What equipment does it operate?  
 Well pumps All  
 High Service Pumps All  
 Treatment Equipment All  
Satisfy 1/2 max-day demand?  Yes  No  Unk  
Comments Audio-visual alarm and remote telemetry in the event of a power loss.

#### TREATMENT PROCESSES IN USE

Disinfection \_\_\_\_\_  
Aeration \_\_\_\_\_  
What additional treatment is needed?  
None at this time  
For control of what deficiencies?  
N/A

#### DISTRIBUTION SYSTEM

Flow Measuring Device Flow Meter  
Meter Size & Type 6" Precision  
Backflow Prevention Devices:  Yes  No  
Cross-Connections None observed  
Disinfectant/Disinfection Byproduct Rule Monitoring  
Plan:  Yes  No  N/A  
Distribution System Map  Yes  No  N/A  
Cross-Connection Control Program:  
Implementation started April 2007.  
Comments Flow meter last calibrated 04/04/05 by Central Florida Controls, Inc.

**GROUND WATER SOURCE**

Well Number (FLUWID No.)	1 (AAC3225)			
Year Drilled	Unknown			
Depth Drilled	480'			
Drilling Method	Unknown			
Type of Grout	Unknown			
Static Water Level	Unknown			
Pumping Water Level	Unknown			
Design Well Yield	Unknown			
Test Yield	Unknown			
Actual Yield (if different than rated capacity)	Unknown			
Strainer	Unknown			
Length (outside casing)	180'			
Diameter (outside casing)	6"			
Material (outside casing)	Black steel			
Well Contamination History	None			
Is inundation of well possible?	No			
6' X 6' X 4" Concrete Pad	Yes			
SET BACKS	Septic Tank	< 100'		
	Reuse Water	N/A		
	WW Plumbing	> 100'		
	Other Sanitary Hazard	None observed		
PUMP	Type	Vertical turbine		
	Manufacturer Name	Worthington		
	Model Number	Unknown		
	Rated Capacity (gpm)	370		
	Motor Horsepower	15		
Well casing 12" above grade?	Yes			
Well Casing Sanitary Seal	Ok			
Raw Water Sampling Tap	Yes			
Above Ground Check Valve	Yes			
Fence/Housing	Housing			
Well Vent Protection	Yes			

**COMMENTS** The Department will continue to accept the septic tank set back distance and unless the well is shown to be microbially or chemically contaminated.  
**Provide information for all items marked "unknown."**

**CHLORINATION (Disinfection)**

Type:  Gas  Hypo  
 Make Chem-Tech Capacity 30 gpd  
 Chlorine Feed Rate 60% stroke  
 Avg. Amount of Cl<sub>2</sub> gas used N/A  
 Chlorine Residuals: Plant 1.27 Remote 1.47  
 Remote tap location 2115 Spring Lake Rd.  
 DPD Test Kit:  On-site  With operator  
 None  Not Used Daily  
 Injection Points Prior to aerator  
 Booster Pump Info N/A  
 Comments Conversion to calcium hypochlorite cleared for service 04/19/07, permit #WC35-0080519-003. Accu-Tab system not in service at time of this inspection.

Chlorine Gas Use Requirements	YES	NO	Comments
Dual System	<input type="checkbox"/>	<input type="checkbox"/>	
Auto-switchover	<input type="checkbox"/>	<input type="checkbox"/>	
Alarms:			
Loss of Cl <sub>2</sub> capability	<input type="checkbox"/>	<input type="checkbox"/>	
Loss of Cl <sub>2</sub> residual	<input type="checkbox"/>	<input type="checkbox"/>	
Cl <sub>2</sub> leak detection	<input type="checkbox"/>	<input type="checkbox"/>	
Scale	<input type="checkbox"/>	<input type="checkbox"/>	
Chained Cylinders	<input type="checkbox"/>	<input type="checkbox"/>	
Reserve Supply	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate Air-pak	<input type="checkbox"/>	<input type="checkbox"/>	
Sign of Leaks	<input type="checkbox"/>	<input type="checkbox"/>	
Fresh Ammonia	<input type="checkbox"/>	<input type="checkbox"/>	
Ventilation	<input type="checkbox"/>	<input type="checkbox"/>	
Room Lighting	<input type="checkbox"/>	<input type="checkbox"/>	
Warning Signs	<input type="checkbox"/>	<input type="checkbox"/>	
Repair Kits	<input type="checkbox"/>	<input type="checkbox"/>	
Fitted Wrench	<input type="checkbox"/>	<input type="checkbox"/>	
Housing/Protection	<input type="checkbox"/>	<input type="checkbox"/>	

**AERATION (Gases, Fe, & Mn Removal)**

Type Natural Draft Capacity 650 gpm  
 Aerator Condition Unknown  
 Bloodworm Presence Unknown  
 Visible Algae Growth Unknown  
 Protective Screen Condition Unknown  
 Comments \_\_\_\_\_

**STORAGE FACILITIES**

(G) Ground (H) Hydropneumatic (E) Elevated  
 (B) Bladder (C) Clearwell

Tank Type/Number	G/1	H/2	
Capacity (gal)	50,000	5,000	
Material	Steel	Steel	
Gravity Drain	Yes	Yes	
By-pass Piping	Yes	Yes	
Pressure Gauge	N/A	Yes	
Sight Glass or Level Indicator	No	Yes	
Fittings for Sight Glass	N/A	Yes	
Protected Openings	Yes	Yes	
PRV/ARV	N/A	PRV	
On/Off Pressure	N/A	40/60	
Access Padlocked	Yes	Yes	
Height to Bottom of Elevated Tank	N/A	N/A	
Height to Max. Water Level	N/A	N/A	

Comments Provide documentation of last cleaning and inspection of finished water storage tanks.

**HIGH SERVICE PUMPS**

Pump Number	1		
Type	Centrifugal		
Make	Worthington		
Model	Unknown		
Capacity (gpm)	300		
Motor HP	20		
Date Installed	Unknown		
Maintenance	In accordance with preventive maintenance program		

Comments \_\_\_\_\_

State of Florida  
Department of Environmental Protection  
Central District

### SANITARY SURVEY REPORT

Plant #2

Plant Name SPRING LAKE MANOR County Lake PWS ID # 3351021-02  
Plant Location 2038 Live Oak Drive, Fruitland Park, FL 34731 Phone (352) 435-4028  
Owner Name Aqua Utilities Florida, Inc Phone (352) 435-4028  
Owner Address 1100 Thomas Ave., Leesburg, FL 34748  
Contact Person Patrick Farris Title Environmental Compliance Specialist Phone (352) 435-4029  
This Survey Date 04/18/07 Last Survey Date 04/29/04 Last C.I. Date 08/24/99

#### PWS TYPE & CLASS

- Community (5D)  
 Non-transient Non-community  
 Non-Community

#### PWS STATUS

- Approved system with approval number & date  
HRS #4695, 1/31/61, As-built 11/6/73,  
HRS #B-4695-B, 5/23/75, WC35-0080519-001  
Issued 1/19/99, cl. 3/25/99  
 Unapproved system

#### SERVICE AREA CHARACTERISTICS

Subdivision \_\_\_\_\_  
Food Service:  Yes  No  N/A

#### OPERATION & MAINTENANCE

Certified Operator:  Yes  No  Not required  
Operator(s) & Certification Class-Number  
Will Fontaine C-6813 Lead/Chief Operator  
See MOR for complete list of operators  
O & M Log:  Yes  No

Operator Visitation Frequency  
Hrs/day: Required Visit Actual Unknown  
Days/wk: Required 3 Actual Unknown

Non-consecutive Days?  Yes  No  N/A  
MORs submitted regularly?  Yes  No  N/A  
Data missing from MORs?  No  Yes  N/A  
Flows not reported daily on MORs. One logbook for both water treatment plants.

Number of Service Connections 180  
Population Served 630 Basis Operator  
Average Day (from MORs) 279 gpd  
Max. Day (from MORs) 45,200 gpd 04/06  
Max-day Design Capacity 100,800 gpd

#### WRITTEN PROGRAMS

O & M Manual No Located N/A  
Written Preventive Maintenance Program Yes  
Flushing Plan  Yes  No Records No  
Valve Maintenance Plan  Yes  No Records No  
Emergency Response Plan  Yes  No  N/A  
Comments One operation and maintenance manual for both plants.

#### RAW WATER SOURCE

- GROUND; Number of Wells 1  
 SURFACE/UDI; Source \_\_\_\_\_  
 PURCHASED from PWS ID # \_\_\_\_\_  
 Emergency Water Source Piney Woods  
Emergency Water Capacity 216,000 gpd

#### AUXILIARY POWER SOURCE

- Yes  None  Not Required  
Source \_\_\_\_\_  
Capacity of Standby (kW) \_\_\_\_\_  
Switchover:  Automatic  Manual  
Standby Plan:  Yes  No  
Hrs Operated Under Load \_\_\_\_\_

What equipment does it operate?  
 Well pumps \_\_\_\_\_  
 High Service Pumps \_\_\_\_\_  
 Treatment Equipment \_\_\_\_\_  
Satisfy average day demand?  Yes  No  Unk  
Comments Generator located at the Piney Woods WTP.

#### TREATMENT PROCESSES IN USE

Disinfection  
What additional treatment is needed?  
None at this time  
For control of what deficiencies?  
N/A

#### DISTRIBUTION SYSTEM

Flow Measuring Device Flow Meter  
Meter Size & Type 4" Neptune  
Backflow Prevention Devices:  Yes  No  
Cross-Connections None observed  
Disinfectant/Disinfection Byproduct Rule Monitoring  
Plan:  Yes  No  N/A  
Distribution System Map  Yes  No  N/A  
Cross-Connection Control Program:  
Implementation started April 2007.  
Comments Flow meter last calibrated 06/07/05 by Central Florida Controls, Inc.

**GROUND WATER SOURCE**

Well Number (FLUWID No.)	1 (AAC3226)			
Year Drilled	1961			
Depth Drilled	336'			
Drilling Method	Unknown			
Type of Grout	Unknown			
Static Water Level	Unknown			
Pumping Water Level	Unknown			
Design Well Yield	Unknown			
Test Yield	Unknown			
Actual Yield (if different than rated capacity)	Unknown			
Strainer	Unknown			
Length (outside casing)	140'			
Diameter (outside casing)	6"			
Material (outside casing)	Black steel			
Well Contamination History	None			
Is inundation of well possible?	No			
6' X 6' X 4" Concrete Pad	Yes			
SET BACKS	Septic Tank	< 100'		
	Reuse Water	N/A		
	WW Plumbing	< 100'		
	Other Sanitary Hazard	None observed		
PUMP	Type	Vertical turbine		
	Manufacturer Name	Peerless		
	Model Number	6CIC4		
	Rated Capacity (gpm)	140		
	Motor Horsepower	10		
Well casing 12" above grade?	No			
Well Casing Sanitary Seal	Ok			
Raw Water Sampling Tap	Yes			
Above Ground Check Valve	Yes			
Fence/Housing	Housing			
Well Vent Protection	N/A			

**COMMENTS** The Department will continue to accept the septic tank set back, wastewater plumbing set back distance, and the well casing upper terminus unless the well is shown to be microbially or chemically contaminated.

**CHLORINATION (Disinfection)**

Type:  Gas  Hypo  
 Make Stenner Capacity 40 gpd  
 Chlorine Feed Rate 5 stroke  
 Avg. Amount of Cl<sub>2</sub> gas used N/A  
 Chlorine Residuals: Plant 1.25 Remote 1.47  
 Remote tap location 2115 Spring Lake Rd  
 DPD Test Kit:  On-site  With operator  
 None  Not Used Daily  
 Injection Points Prior to hydropneumatic tank  
 Booster Pump Info N/A  
 Comments \_\_\_\_\_

**STORAGE FACILITIES**

(G) Ground (H) Hydropneumatic (E) Elevated  
 (B) Bladder (C) Clearwell

Tank Type/Number	H1		
Capacity (gal)	5,000		
Material	Steel		
Gravity Drain	Yes		
By-pass Piping	Yes		
Pressure Gauge	Yes		
Sight Glass or Level Indicator	Yes		
Fittings for Sight Glass	Yes		
Protected Openings	Yes		
PRV/ARV	PRV		
On/Off Pressure	35/60		
Access Padlocked	Yes		
Height to Bottom of Elevated Tank	N/A		
Height to Max. Water Level	N/A		

Comments Provide documentation of last cleaning and inspection of finished water storage tanks.

Chlorine Gas Use Requirements	YES	NO	Comments
Dual System	<input type="checkbox"/>	<input type="checkbox"/>	
Auto-switchover	<input type="checkbox"/>	<input type="checkbox"/>	
Alarms:			
Loss of Cl <sub>2</sub> capability	<input type="checkbox"/>	<input type="checkbox"/>	
Loss of Cl <sub>2</sub> residual	<input type="checkbox"/>	<input type="checkbox"/>	
Cl <sub>2</sub> leak detection	<input type="checkbox"/>	<input type="checkbox"/>	
Scale	<input type="checkbox"/>	<input type="checkbox"/>	
Chained Cylinders	<input type="checkbox"/>	<input type="checkbox"/>	
Reserve Supply	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate Air-pak	<input type="checkbox"/>	<input type="checkbox"/>	
Sign of Leaks	<input type="checkbox"/>	<input type="checkbox"/>	
Fresh Ammonia	<input type="checkbox"/>	<input type="checkbox"/>	
Ventilation	<input type="checkbox"/>	<input type="checkbox"/>	
Room Lighting	<input type="checkbox"/>	<input type="checkbox"/>	
Warning Signs	<input type="checkbox"/>	<input type="checkbox"/>	
Repair Kits	<input type="checkbox"/>	<input type="checkbox"/>	
Fitted Wrench	<input type="checkbox"/>	<input type="checkbox"/>	
Housing/Protection	<input type="checkbox"/>	<input type="checkbox"/>	

**AERATION (Gases, Fe, & Mn Removal)**

Type \_\_\_\_\_ Capacity \_\_\_\_\_  
 Aerator Condition \_\_\_\_\_  
 Bloodworm Presence \_\_\_\_\_  
 Visible Algae Growth \_\_\_\_\_  
 Protective Screen Condition \_\_\_\_\_  
 Comments \_\_\_\_\_

**HIGH SERVICE PUMPS**

Pump Number			
Type			
Make			
Model			
Capacity (gpm)			
Motor HP			
Date Installed			
Maintenance			

Comments \_\_\_\_\_

**DEFICIENCIES:**

**Both Plants**

1. **Failure to adequately establish and implement a cross-connection control program.** Implementation of the program was not started until April 2007. Currently, commercial customers are being surveyed, and residential customers should be surveyed by December 31, 2007.

Community water systems, and all public water systems that have service areas also served by reclaimed water systems regulated under Part III of Chapter 62-610, F.A.C., shall establish and implement a routine cross-connection control program to detect and control cross-connections and prevent backflow of contaminants into the water system. This program shall include a written plan that is developed using recommended practices of the American Water Works Association set forth in *Recommended Practice for Backflow Prevention and Cross-Connection Control*, AWWA Manual M14, as incorporated into Rule 62-555.330, F.A.C. [Rule 62-555.360(2), F.A.C.]

Upon discovery of a prohibited cross-connection, public water systems shall either eliminate the cross-connection by installation of an appropriate backflow prevention device acceptable to the Department or shall discontinue service until the contaminant source is eliminated. [Rule 62-555.360(3), F.A.C.]

2. **Failure to keep records documenting that isolation valves are being exercised.**

Suppliers of water shall keep records documenting that their isolation valves are being exercised in accordance with subsection 62-555.350(2), F.A.C. [Rule 62-555.350(12)(c), F.A.C.]

3. **Failure to keep records documenting that dead-end water mains are being flushed.**

Suppliers of water shall keep records documenting that their water mains conveying finished drinking water are being flushed in accordance with subsection 62-555.350(2), F.A.C. [Rule 62-555.350(12)(c), F.A.C.]

4. **Failure to maintain a separate operation and maintenance log for each water treatment plant.** There is only one operation and maintenance logbook for both plants.

Maintain operation and maintenance logs for each plant, on site in a location accessible to 24-hour inspection, protected from weather damage, and current to the last operation and maintenance performed. The logs shall be maintained in hard bound books with consecutive page numbering, and shall contain a minimum of the previous three months of data at all times. Alternative logs or partial electronic logging are acceptable if approved by the appropriate Department district office or the local regulatory agency. The logs shall contain:

- (a) Identification of the plant;
- (b) The signature and license number of the operator and the signature of the persons making any entries;
- (c) Date and time in and out;
- (d) Specific operation and maintenance activities and any repairs made;
- (e) Results of tests performed and samples taken, unless documented on a laboratory sheet.
- (f) Performance of preventive maintenance and repairs or requests for repair of the equipment.

[Rule 62-602.650(4), F.A.C.]

Suppliers of water shall describe in the operation and maintenance logs all emergency or abnormal operating conditions and all maintenance or repair work that involves taking out of operation public water system components other than water service lines. [Rule 62-555.350(10)(e), F.A.C.]

5. **Failure to provide an operation and maintenance manual for each water treatment plant.** There is only one operation and maintenance manual for both plants.

Suppliers of water shall provide an operation and maintenance manual for each of their drinking water treatment plants and shall update the manual as necessary to reflect plant alterations and additions. The manual shall contain operation and control procedures, and preventive maintenance and repair procedures, for all plant equipment and shall be made available for reference at the plant or at a convenient location near the plant. Bound and indexed equipment manufacturer manuals shall be considered sufficient to meet the requirements of this subsection. [Rule 62-555.350(13), F.A.C.]



**Deficiencies (continued):**

**Plant #2 (Spring Lake Manor)**

- 6. Failure to describe emergency or abnormal operating conditions and all maintenance or repair work that involves taking out of operation public water system components. Monthly operation reports indicate days with no finished water produced.

Suppliers of water shall describe in the monthly operation reports all emergency or abnormal operating conditions and all maintenance or repair work that involves taking out of operation public water system components other than water service lines. [Rule 62-555.350(10)(e), F.A.C.]

**COMMENTS/REMINDERS:**

- Lead and copper tap sampling must be conducted during the June-September 2008 monitoring period.
- Based on information provided to the Department by email on April 19, 2007, the population served and number of service connections for this system has been changed. These changes may affect this systems monitoring requirements.

For chemical monitoring requirements, you are advised to call Marie Carrasquillo at (407) 894-7555, extension 2242, or Paul Morrison at (407) 893-3988.

All results must be submitted to DEP within the first 10 days following the end of the required monitoring period or the first 10 days following the month in which the sample results were received, whichever time is the shortest. A Florida Department of Health (DOH) certified laboratory must analyze all laboratory samples.

- Provide documentation of last cleaning and inspection for finished water storage tanks.  
Accumulated sludge and bio-growths shall be cleaned routinely (i.e., at least annually) from all treatment facilities that are in contact with raw, partially treated, or finished drinking water and that are not specifically designed to collect sludge or support a bio-growth; and blistering, chipped, or cracked coatings and linings on treatment or storage facilities in contact with raw, partially treated, or finished drinking water shall be rehabilitated or repaired. [Rule 62-555.350(2), F.A.C.]

Finished-drinking-water storage tanks, including conventional hydropneumatic tanks with an access manhole but excluding bladder- or diaphragm-type hydropneumatic tanks without an access manhole, shall be checked at least annually to ensure that hatches are closed and screens are in place; shall be cleaned at least once every five years to remove biogrowths, calcium or iron/manganese deposits, and sludge from inside the tanks; and shall be inspected for structural and coating integrity at least once every five years by personnel under the responsible charge of a professional engineer licensed in Florida. [Rule 62-555.350(2), F.A.C.]

Ensure proper disinfection and bacteriological evaluation of public water system components in accordance with 62-555.340, F.A.C. Also, ensure proper disposal of heavily chlorinated water from the tank disinfection process.

- Provide information for all items marked "unknown."

Inspector *Denelle D. Owens* Title Environmental Specialist I Date 06/21/07

Approved by *[Signature]* Title Environmental Manager Date 6/29/07

**AQUA**  
Utilities Florida.

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August 10, 2007

Danielle Owens  
Environmental Specialist  
FDEP Central District  
3319 Maguire Blvd., Suite 232  
Orlando, FL 32803-3767

**RE: Reply to Lake County Sanitary Surveys**

Dear Ms. Owens:

Thank you for your inspection on April 18, 2007. The purpose of the correspondence is to provide a written response as requested in your letter.

**For All Systems:**

1. *Failure to adequately establish and implement a cross-connection control program.*

**Response:**

Kim Dodson came to our office on June 28, 2007, and completed a very thorough evaluation of Aqua's Cross Connection Control Policy and our records. Although there is room for improvement, overall she seemed pleased with the progress since your inspection. Aqua will continue to develop this policy and implement it as necessary.

2. *Failure to keep records documenting that isolation valves are being exercised.*

**Response:**

Aqua is looking at software for tracking this statewide which will make our records more organized. Our staff will work on becoming more diligent in making records of the work that they do.

3. *Failure to keep records documenting that dead-end water mains are being flushed.*

**Response:**

Records of flushing are kept on the monthly log sheets are kept at the plant and then at the end of each month, these sheets are brought back to the Leesburg office to be entered on the MORs. These sheets include flushing, main breaks, and fire usage. The month of April

sheet was at each plant during your inspection on the clipboard kept near the operator's logbook. A copy of April 2007's sheets for each facility are attached for your review.

**Friendly Center PWS 3350426:**

1. *Failure to describe emergency or abnormal operating conditions and all maintenance or repair work that involves taking out of operation public water system components.*

**Response:**

Friendly Center is interconnected with East Lake Harris. There were no emergency or abnormal events during the time frame specified in the inspection. There are times when East Lake Harris treatment plant provides the water for both systems. There are also times when Friendly Center pumps more and the East Lake Harris flows are down.

**Hobby Hill Subdivision PWS 3350544:**

1. *Failure to maintain public water systems components. The hydropneumatic tank is showing signs of corrosion.*

**Response:**

The hydropneumatic tank is scheduled to be cleaned and painted. Aqua is in the process of hiring a contractor to inspect all tanks statewide for structural integrity. Copies of these inspections will be forwarded to DEP upon completion.

**Piney Woods Subdivision – 2 WTPs PWS 3351021**

1. *Failure to maintain a separate operation and maintenance log for each water treatment plant. There is only one operation and maintenance logbook for both plants.*

**Response:**

Separate log books for each plant will be maintained from now on.

2. *Failure to provide an operation and maintenance manual for each water treatment plant. There is only one operation and maintenance manual for both plants.*

**Response:**

Separate O+M manuals will be created and maintained for each plant.

If you have any questions, please contact me at (352) 435-4029 or by e-mail at [PA.Farris@aquaaamerica.com](mailto:PA.Farris@aquaaamerica.com). Thank you.

Sincerely,

*Patrick Farris*

Patrick A. Farris  
Environmental Compliance Specialist  
Aqua Utilities Florida, Inc.

Enclosure: April 2007 Flushing Records

cc: Will Fontaine, via e-mail  
Brain Heath, via e-mail  
Michael O'Reilly, via e-mail

















