

CLASS B  
WATER AND/OR WASTEWATER UTILITIES

**FINANCIAL, RATE  
AND ENGINEERING  
MINIMUM FILING  
REQUIREMENTS**

OF

Labrador Utilities, Inc.

Exact Legal Name of Utility

**VOLUME III**



FOR THE

Test Year Ended: December 31, 2007

DOCUMENT NUMBER-DATE

07842 AUG 28 8

FPSC-COMMISSION CLERK

**Labrador Utilities, Inc.**

**Docket No.: 080249-WS**

**Pasco County**

**25.30.440 (1)  
DETAILED MAP**

**Test Year Ended December 31, 2007**

**MAP PROVIDED SEPARATELY**

**Labrador Utilities, Inc.**

**Docket No.: 080249-WS**

**Pasco County**

**25.30.440 (2)  
CHEMICALS USED**

**Test Year Ended December 31, 2007**

Labrador Utilities, Inc.  
 Schedule of Chemicals  
 Test Year Ended December 31, 2007

Date of Invoice	Sodium Hypochlorite WTP		Sodium Hypochlorite WWTP		Calcium Hypochlorite		ODO-WAY (2) 65# CANS		Cheney Hydrated Lime Bagged Lime		Evergreen Odor Windscent Sleeves		Para-Block Deodorant Pine		Histosol OP-9840 Drum		CP734 Corrosion Inhibitor		TOTAL AMOUNTS
	1 Gal	Unit Price	1 Gal	Unit Price	1 Gal	Unit Price	Pound	Unit Price	50# BG	Unit Price	10PK	Unit Price	Each	Unit Price	55 LB	Unit Price	Gallon	Unit Price	
12/27/2006			300	1.15															345.00
12/27/2006	55	1.15																	63.25
1/4/2007	350	1.25																	437.50
1/10/2007	45	1.25																	56.25
1/10/2007			415	1.25															518.75
1/19/2007			200	1.25															250.00
1/24/2007	50	1.25																	62.50
1/24/2007			370	1.25															462.50
2/7/2007			385	1.25															481.25
2/7/2007	50	1.25																	62.50
2/21/2007	70	1.25																	87.50
2/21/2007			390	1.25															487.50
3/7/2007	75	1.25																	93.75
3/7/2007					1	148													148.00
3/7/2007			375	1.25															468.75
3/21/2007	50	1.25																	62.50
3/21/2007			400	1.25															500.00
4/4/2007			385	1.25															481.25
4/4/2007	50	1.25																	62.50
4/17/2007			500	1.25															625.00
4/18/2007	50	1.25																	62.50
5/2/2007			250	1.25															312.50
5/2/2007	45	1.25																	56.25
5/16/2007	20	1.25																	25.00
5/16/2007			230	1.25															287.50
5/30/2007	25	1.25																	31.25
5/30/2007			275	1.25															343.75
6/13/2007			275	1.25															343.75
6/13/2007	25	1.25																	31.25
6/27/2007			180	1.25															225.00
6/27/2007	25	1.25																	31.25
7/11/2007			250	1.25															312.50
7/11/2007	30	1.25																	37.50
7/25/2007	25	1.25																	31.25
7/25/2007			175	1.25															218.75
8/8/2007	30	1.25																	37.50
8/8/2007			185	1.25															231.25
8/22/2007	30	1.25																	37.50
8/22/2007			200	1.25															250.00
9/5/2007	30	1.25																	37.50
9/5/2007			200	1.25															250.00
9/19/2007	20	1.25																	25.00
9/19/2007			250	1.25															312.50
10/3/2007			100	1.25															125.00
10/17/2007	30	1.25																	37.50
10/3/2007	25	1.25																	31.25
10/31/2007			250	1.25															312.50
10/31/2007	30	1.25																	37.50
11/14/2007	40	1.25																	50.00
11/14/2007			100	1.25															125.00
11/28/2007	85	1.25																	106.25
12/12/2007	45	1.25																	56.25
2/12/2007							130	2.75											357.50
5/12/2007							130	2.75											357.50
4/10/2007							130	2.75											357.50
5/8/2007										1	289.95		20	48.97					1,249.35
5/8/2007							130	2.75											357.50
12/27/2006																	5	6.45	32.25
12/27/2006															220	9.56			2,103.20
1/24/2007															220	9.56			2,103.20
2/21/2007																	10	6.60	66.00
3/7/2007									20	7.5									150.00
3/27/2007															220	9.56			2,103.20
6/13/2007							130	2.75											357.50
5/14/2007															220	9.56			2,103.20
10/11/2007															110	9.56			1,051.60
	1,405		6,340			1	650		20		1		20	990		15		22,573.25	
Quantity Purchased	1,405		6,340			1	650		20		1		20	990		15			
Unit of Measure	Gallons		Gallons			Gallons	LB		50# Bags		10PK		Each	55 LB		Gallon			
Average Cost/ Unit	1.25		1.25			148.00	2.75		7.50		289.95		48.97	9.56		6.53			
Where Used (Water/ Sewer)	Water		Sewer			Sewer	Sewer		Sewer		Sewer		Sewer	Sewer		Water			

Labrador Utilities, Inc.  
 Schedule of Chemicals  
 Test Year Ended December 31, 2007

Date of Invoice	Sodium Hypochlorite WTP		Sodium Hypochlorite WWTP		Calcium Hypochlorite		ODO-WAY (2) 65# CANS		Cheney Hydrated Lime Bagged Lime		Evergreen Odor Windscent Sleeves		Para-Block Deodorant Pine		Histosol OP-9840 Drum		CP734 Corrosion Inhibitor		TOTAL AMOUNTS
	1 Gal	Unit Price	1 Gal	Unit Price	1 Gal	Unit Price	Pound	Unit Price	50# BG	Unit Price	10PK	Unit Price	Each	Unit Price	55 LB	Unit Price	Gallon	Unit Price	
Specify Dosage Rate	Disinfecting agent		Disinfecting agent		Cleaning agent		Odorizer		Disinfecting Agent for Cleaning Up Spills		Odorizer at Headworks & LS		Odorizer at Headworks & LS		Settling Aid/Odor Killer		Orthophosphate Corrosion Inhibitor		
Water, total item used	1,405																		15
Water, chemical feed rate, ppm	5		N/A		N/A		N/A		N/A		N/A		N/A		N/A		N/A		0.5
Water, volume treated, million gal.	27.4																		27.4
Sewer, total item used			6,340																
Sewer, chemical feed rate, ppm	N/A		34		N/A		N/A		N/A		N/A		Discontinued use		Discontinued use		N/A		
Sewer, volume treated, million gal.			18.5																

**Labrador Utilities, Inc.**

**Docket No.: 080249-WS**

**Pasco County**

**25.30.440 (3)  
CHEMICAL ANALYSES**

**Test Year Ended December 31, 2007**

DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION AND LABORATORY REPORTING FORMAT



Advanced Environmental Laboratories, Inc.

6601 Southpoint Pkwy. Jacksonville, FL 32216 • 904.363.8350 • Fax: 904.363.8354 • E88674
2106 NW 57th Place, Ste. 7 Gainesville, FL 32609 • 352.387.1500 • Fax: 352.387.0050 • E82830
688 S. North Lake Blvd., Ste. 1016 Altamonte Springs, FL 32701 • 407.937.1994 • Fax: 407.937.1527 • E89078

Report Number: 1060596 Sub-Contract Lab ID:

Analysis Requested: (please check all that apply)

- Standard Coliform Test
HPC
Other:

For Lab Use Only

The lab performing this analysis is checked on the left.

Lab Receipt Date & Time: 11:55 1/17/06

Analysis Date & Time: 1/17/06 1620

Sample Acceptance Criteria:

- Sample Preservation: On Ice, Not On Ice
Disinfectant Check: Not Detected
This sample does not meet the following NELAC requirements:

System Name: Forest Lakes Estates / Labrador

PWS I.D. 6 5 1 4 8 4 2

System Address: City: Zephyrhills

System or Owner's Phone #: (813) 815-1524 / (813) 621-1299 Fax #: (813) 815-1524

Collector: Shan Rainey Collector's Phone #: (707) 945-9836

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:

Table with columns: Sample Number, Sample Point (Location or Specific Address), Collection Time, Sample Type, Disinfect Res'd (mg/L), pH, Total Coliform Analysis Method, Fecal or E. coli Analysis Method, Non Coliform, Total Coliform, Fecal or E. coli, Data Qualifier, Lab Sample Number

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.)

0.5

Defined in Florida Administrative Code Rule 62-160, Table 1 All tests are performed in accordance with NELAC standards.

Disinfectant Residual Analysis Method: DPD Colorimetric
Person performing analysis is: A certified operator (# CH160)
Supervised by a cert operator (#)

Date PWS notified by lab of positive results:
Date State notified by lab of positive results:

Name and Mailing Address of Person to Receive Report

Labrador UTILITIES, INC. 200 WEATHERFIELDS AVE: ALTAMONTE SPRINGS, FL 32714

Lab Signature: Title:

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



**DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION AND LABORATORY REPORTING FORMAT**



**Advanced Environmental Laboratories, Inc.**

□ 6601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574  
 □ 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589  
 □ 2106 NW 67th Place, Ste. 7 • Gainesville, FL 32606 • 352.367.1500 • Fax 352.367.0050 • E82620  
 □ 528 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • E53076

Report Number: TX01380 Sub-Contract Lab ID: \_\_\_\_\_

**Analysis Requested:** (please check all that apply)

- Standard Coliform Test  
 HPC  
 Other: \_\_\_\_\_

**For Lab Use Only**

The lab performing this analysis is checked on the left.

Lab Receipt Date & Time: 2/8/06 1235A

Analysis Date & Time: 2-8-06 1500

**Sample Acceptance Criteria:**

Sample Preservation  On Ice  Not On Ice 40 °C  
 Disinfectant Check  Not Detected  \_\_\_\_\_ mg/L  
 This sample does not meet the following NELAC requirements:

System Name: Forest Lakes Estates / Labrador Utilities

PWS I.D. 

6	5	1	4	8	4	2
---	---	---	---	---	---	---

System Address: \_\_\_\_\_

City: Zephyr hills

System or Owner's Phone #: (863) 815-1524 / 1-800-272-1919

Fax #: (863) 815-1524

Collector: Shan Rainey

Collector's Phone #: (407) 948-9832

**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: \_\_\_\_\_

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: <u>SM9222B</u>				
						Non Coliform	Total Coliform	Fecal or E. coli	Data Qualifier <sup>2</sup>	Lab Sample Number
1	Well #1	<u>2/7/06</u> 1138	r	0.0	-		A			-01
2	Well #2	140	r	0.0	-		A			-02
3	6328 Spring Lake Dr	1130	d	2.0	-		A			-03
4	5901 Twilight Dr	1120	d	1.9	-		A			-04

**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.)

0.9

<sup>2</sup>Defined in Florida Administrative Code Rule 62-160, Table 1  
 All tests are performed in accordance with NELAC standards.

Disinfectant Residual Analysis Method:  DPD Colorimetric  Other: \_\_\_\_\_

Person performing analysis is:  
 A certified operator (# C-14160)  Employed by a certified lab  
 Supervised by a cert operator (# \_\_\_\_\_)  Employed by DEP or DOH

Date PWS notified by lab of positive results: \_\_\_\_\_

Date State notified by lab of positive results: \_\_\_\_\_

Lab Signature: [Signature]

Title: \_\_\_\_\_

Name and Mailing Address of Person to Receive Report

Shantavious J. Rainey  
 Labrador (FLE) Utilities Inc  
 UTILITIES, INC.  
 200 WEATHERFIELDS AVE.  
 ALTAMONTE SPRINGS, FL 32714

- DEP/DOH USE ONLY
- Satisfactory  
 Incomplete Collection Information  
 Repeat Samples Required  
 Replacement Samples Required

Date Reviewed by DEP/DOH: \_\_\_\_\_

DEP/DOH Reviewing Official: \_\_\_\_\_

<sup>1</sup>DEP Sample Type Codes: D = Distribution (Routine Compliance); C = Repeat or Check; R = Raw; N = Entry to Distribution; P = Plant Tap; S = Special (clearance, etc.)  
 Analysis Methods: MF = SM9222B & D; MTF = 9221B & EC/MUG; MMO/MUG = SM9223B; HPC = SM9215B  
 Results: A = coliforms are absent; P = coliforms are present; C = confluent growth; TNTC = too numerous to count

**DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION AND LABORATORY REPORTING FORMAT**



**Advanced Environmental Laboratories, Inc.**

8001 Southpointe Pkwy. - Jacksonville, FL 32216 • 904.363.9350 • Fax: 904.363.9354 • 882274  
 9610 Princess Palm Ave. - Tampa, FL 33619 • 813.630.9616 • Fax: 813.630.4327 • 894588  
 2106 Ave 47th Floor, Ste. 7 - Gainesville, FL 32608 • 352.367.1500 • Fax: 352.367.0050 • 828228  
 528 S. North Lake Blvd., Ste. 1016 - Altamonte Springs, FL 32701 • 407.987.1594 • Fax: 407.657.1597 • 658078

Report Number: 711777 Sub-Contract Lab ID: \_\_\_\_\_

Analysis Requested: (please check all that apply)

- Standard Coliform Test  
 HPC  
 Other: \_\_\_\_\_

FOR LAB USE ONLY

The lab performing this analysis is checked on the left.

Lab Receipt Date & Time: \_\_\_\_\_

Analysis Date & Time: \_\_\_\_\_

Sample Acceptance Criteria:

- Sample Preservation:  On Ice  Not On Ice  \_\_\_\_\_ °C  
 Disinfectant Check:  Not Detected  \_\_\_\_\_ mg/L  
 This sample does not meet the following NELAC requirements:

System Name: LABOR UTILITIES

PWS LD: 6514942

System Address: Princeton Way

City: Rockledge, FL

System or Owner's Phone #: (813) 780-7354 / (407) 725-1107

Fax #: (813) 780-7354

Collector: John Perry

Collector's Phone #: (407) 464-9532

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: \_\_\_\_\_

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:				
						Non Coliform	Total Coliform	Fecal or E. coli	Data Qualifier <sup>2</sup>	Lab Sample Number
1	Well #1	12:00	r	0.7	-					
2	Well #2	12:00	r	0.7	-					
3	2135 Duffin	12:00	d	0.9	-					
4	2755 P. ...	12:00	d	0.7	-					41

Average of disinfectant residuals for routine and repeat samples. (Complete for community and nontransient noncommunity systems serving populations up to and including 4,980. Do not include raw or plant samples in the average.)

<sup>2</sup>Defined in Florida Administrative Code Rule 62-160, Table 1. All tests are performed in accordance with NELAC standards.

Disinfectant Residual Analysis Method:  DPO Colorimetric  Other: \_\_\_\_\_  
 Person performing analysis is:  
 A certified operator (# 314102)  Employed by a certified lab  
 Supervised by a cert operator (# \_\_\_\_\_)  Employed by DEP or DOH

Date PWS notified by lab of positive results: \_\_\_\_\_  
 Date State notified by lab of positive results: \_\_\_\_\_

Name and Mailing Address of Person to Receive Report  
LABRADOR UTILITIES, INC. (FL)  
**UTILITIES, INC.**  
**200 WEATHERFIELDS AVE.**  
**ALTAMONTE SPRINGS, FL 32714**

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

<sup>1</sup>DEP Sample Type Codes: D = Distribution (Routine Compliance); C = Repeat or Check; R = Raw; N = Entry to Distribution; P = Plant Tap; S = Special (clearance, etc.)  
 Analysis Methods: MF = SM9222B & D; MTF = 9221B & ECAMUG; MMOMUG = SM9223B; HPC = SM9215B  
 \_\_\_\_\_ = \_\_\_\_\_ coliforms are present; C = confluent growth; TNTC = too numerous to count

May 02 06 01:29p

From: ADVANCED ENVIRONMENTAL LABS 813 630 4327

04/21/2006 10:51 AM P.001 P.001/002 P.7 693

### DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION AND LABORATORY REPORTING FORMAT



**Advanced Environmental Laboratories, Inc.**

11001 Southeast Pkwy. - Jacksonville, FL 32216 • 904.368.8200 • Fax 904.263.9054 • 982294  
3910 Pegasus Palm Ave. - Tampa, FL 33619 • 813.630.9070 • Fax 813.630.4327 • 984888  
2100 NW 47th Pkwy, Box 7 - Gainesville, FL 32606 • 352.367.3500 • Fax 352.367.3055 • 989880  
328 S. North Lake Blvd., Ste. 1016 - Altamonte Springs, FL 32714 • 407.537.6884 • Fax 407.537.1597 • 988004

Report Number: 100239154 Sub-Contract Lab ID: \_\_\_\_\_  
Analysis Requested: (please check all that apply)  
 Standard Coliform Test  
 HPC  
 Other: \_\_\_\_\_

**For Lab Use Only**

The lab performing this analysis is checked on the list.

Lab Receipt Date & Time: 4/11/06 1230AC  
Analysis Date & Time: 4-11-6 1400

Sample Acceptance Criteria:  
Sample Preservation  On Ice  Not On Ice 70 °C  
Disinfectant Check  Not Detected  \_\_\_\_\_ mg/L  
This sample does not meet the following NELAC requirements:

System Name: Labrador (Forest Lake Estate) PWS I.D. 6 5 1 4 B 4 2  
System Address: 4134 Paganette City: Zephyrhills  
System or Owner's Phone #: 1-800-270-1919 Fax #: (813) 780-7364  
Collector: Shun Rainey Collector's Phone #: (407) 918-9832

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: 4/10/06

Sample Number	Sample Point (Location or Specific Address)	Collection Time	Sample Type*	Disinfect. Resid. (mg/L)	pH	Total Coliform Analysis Method: <u>SM 222B</u>				
						Non Coliforms	Total Coliforms	Fecal or E. coli	Data Quality**	Lab Sample Number
1	Well #1	1544	9	1.1	-	A				01
2	Well #2	1545	9	1.1	-	A				02
3	6136 Utopia Drive	1530	9	1.2	-	A				03
4	5955 Paganette Way	1515	5	1.3	-	A				04

Average of disinfectant residuals for routine and repeat samples. (Complete for community and noncommunity systems serving populations up to and including 4,999. Do not include ear or plant samples in the average.) 1.2

Disinfectant Residual Analysis Method:  DPD Colorimetric  Other: \_\_\_\_\_

Person performing analysis is:  EPA certified operator # 61460  Employed by a certified lab  Supervised by a cert operator # \_\_\_\_\_  Employed by DEP or DOH

Date PWS notified by lab of positive results: \_\_\_\_\_  
Date State notified by lab of positive results: \_\_\_\_\_

Lab Signature: [Signature]  
Title: \_\_\_\_\_

Name and Mailing Address of Person to Receive Report  
Shun Rainey  
**UTILITIES, INC.**  
200 Weatherfields Ave.  
Altamonte Springs, FL 32714

**DEPIDOH USE ONLY**

Satisfactory  
 Incomplete Collection Information  
 Repeat Samples Required  
 Replacement Samples Required

Date Reviewed by DEPIDOH: \_\_\_\_\_  
DEPIDOH Reviewing Official: \_\_\_\_\_

Page 1 of 1  
\*DEP Sample Type Codes: D = Distribution (Routine Compliance); C = Repeat or Check; R = Raw; N = Entry to Distribution; P = Plant Tap; S = Special (clearance, etc.)  
Analysis Methods: MF = SM 222B & D; MTF = 8221B & ECMAUG; MICHMUG = SM 223B; HPC = SM 215B  
Results: A = coliforms are absent; P = coliforms are present; C = confluent growth; TMTT = too many to tell

From: ADVANCED ENVIRONMENTAL LABS 813 630 4327

05/12/2006 11:28 #131 P.001/002

05/04/2006 11:57 18638151524

CYPRESS LAKE

PAGE 02/02

DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION AND LABORATORY REPORTING FORMAT



Advanced Environmental Laboratories, Inc.

- 6504 Southeast Pkwy - Jacksonville, FL 32216 - 904.262.9350 - Fax 904.363.8354 - 828274
9810 Princeton Palm Ave. - Tampa, FL 33619 - 813.630.9816 - Fax 813.630.4327 - 884980
2106 NW 47th Place, Ste. 7 - Gainesville, FL 32608 - 352.367.1500 - Fax 352.367.0020 - 836620
528 S. North Lake Blvd., Ste. 1119 - Maitland, FL 32751 - 407.897.1894 - Fax 407.537.1887 - 830776

Report Number: 1065013 Sub-Contract Lab ID:
Analysis Requested: (please check all that apply)
Standard Coliform Test
HPC
Other:

For Lab Use Only

The lab performing this analysis is checked on the left.

Lab Receipt Date & Time: 5/12/06
Analysis Date & Time: 5/4/06 16:00
Sample Acceptance Criteria:
Sample Preservation: On Ice, Not On Ice
Disinfectant Check: Not Detected
This sample does not meet the following NELAC requirements:

System Name: Labrador Utilities Forest Lake Estate

PWS ID: 6514842

System Address: 4131 Paquette Way

City: Zephyrhills

System or Owner's Phone #: 1-800-372-1919

Fax #: 813 780-7864

Collector: Stan Rainey

Collector's Phone #: 407 940-9832

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: 5/3/06

Table with columns: Sample Number, Sample Point (Location or Specific Address), Collection Time, Sample Type, Disinfect Resid (mg/L), pH, Total Coliform Analysis Method, Fecal or E. coli Analysis Method, Non Coliform, Total Coliform, Fecal or E. coli, Data Qualifier, Lab Sample Number. Rows #1-4.

Average of disinfectant residuals for routine and repeat samples... (Complete for community and nontransient noncommunity systems serving populations up to and including 4,300. Do not include raw or plant samples in the average.)

0.0

Defined in Florida Administrative Code Rule 62-180, Table 1. All tests are performed in accordance with NELAC standards.

Disinfectant Residual Analysis Method: DPD Colorimetric
Person performing analysis is: BSA certified operator (if CM160), Employed by a certified lab, Supervised by a cert operator (if), Employed by DEP or DOr

Date PWS notified by lab of positive results:
Date State notified by lab of positive results:

Name and Mailing Address of Person to Receive Report: Stan Rainey, Labrador Utilities, 4131 Paquette Way, Zephyrhills FL 33540

Lab Signature: [Signature]
Title:

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

DEP Sample Type Codes: D = Distribution (Routine Compliance); C = Repeat or Check; R = Raw; N = Entry to Distribution; P = Plant Tap; S = Special (clearance, etc.)
Analysis Methods: MF = SM9222B & D; MYF = 9221B & EC/MUG; M/MO/MUG = SM9223B; HPC = SM9215B

**Labrador Utilities, Inc.**

**Docket No.: 080249-WS**

**Pasco County**

**25.30.440 (4)  
OPERATIONS REPORTS**

**Test Year Ended December 31, 2007**

**2006**

**MONTHLY OPERATION REPORTS**

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



FILE COPY

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P. 2

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

A. Public Water System (PWS) Information

PWS Name:	Labrador Utilities Inc.	PWS Identification Number:	6514842
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:	1178	Total Population Served at End of Month:	2,356
PWS Owner:	Utilities Inc. of Florida	Contact Person:	Patrick Flynn
Contact Person's Mailing Address:	200 Weathersfield	Contact Person's Title:	Regional Director
Contact Person's Telephone Number:	407-869-1919	City:	Altamont Springs
Contact Person's E-Mail Address:	pk.flynn@labradorutilities.com	State:	Florida
		Zip Code:	32714
		Contact Person's Fax Number:	407-869-6961

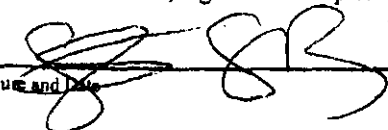
B. Water Treatment Plant Information

Plant Name:	Forest Lake Estates	Plant Telephone Number:	813-780-7364
Plant Address:	One Stage Coach Lane	City:	Zephyrhills
		State:	Florida
		Zip Code:	33540
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:	564,000		
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:	Shantavious Rainey	C	14160	Days 1st Shift
Other Operators:	Dave Shoffstall	C	7799	Days 1st Shift
	David Rodriguez	A	7880	Days 1st Shift

1) 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 Title

Shantavious Rainey  
 Printed or Typed Name

C-3399 14160  
 License Number

Mar 28 06 12:09p

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

PWS Identification Number: 6514842 Plant Name: Forest Lake Estates

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	86,500												
2	X	24.0	86,500		1.0										0.7
3	X	24.0	114,000		0.9										0.7
4	X	24.0	87,000		0.8										0.6
5	X	24.0	153,000		0.7										0.5
6	X	24.0	76,000		0.9										0.5
7	X	24.0	101,000		1.1										0.5
8		24.0	134,000												
9	X	24.0	134,000		0.8										0.5
10	X	24.0	107,000		0.8										0.6
11	X	24.0	120,000		0.7										0.5
12	X	24.0	77,000		0.9										0.6
13	X	24.0	106,000		0.8										0.6
14	X	24.0	125,000		1.0										0.5
15		24.0	90,500												
16	X	24.0	90,500		0.9										0.6
17	X	24.0	116,000		0.8										0.6
18	X	24.0	106,000		0.8										0.5
19	X	24.0	115,000		1.2										0.7
20	X	24.0	111,000		1.0										0.7
21	X	24.0	150,000		1.1										0.7
22		24.0	101,000												
23	X	24.0	101,000		1.0										0.7
24	X	24.0	113,000		0.9										0.6
25	X	24.0	101,000		1.0										0.7
26	X	24.0	114,000		1.1										0.7
27	X	24.0	147,000		1.0										0.6
28	X	24.0	86,000		1.1										0.6
29		24.0	93,000												
30	X	24.0	93,000		1.0										0.6
31	X	24.0	105,000		1.0										0.7
Total			3,340,000												
Average			107,742												
Maximum			153,000												

Mar 28 06 12:09p

Refer to the instructions for this report to determine which plants must provide this information.  
 DEP Form 62-555.800(3)  
 Effective August 28, 2003



P.5

PLANT NAME Labelflow WTP  
 PLANT NO 693  
 REPORTING MONTH January 2006

UTILITIES INC

WATER TREATMENT PLANT DAILY OPERATIONS WORKSHEET

DAY	#1 METER (Log thousands)	#2 METER (Log thousands)	TO FLOW	CL2	CL1	CL3	CL4	CL5	RV Pak	ELECTRIC	RAW	COAL	FINAL
PRIV	READING	READING	10000	Rotanetra	Flow	Flow	Flow	Flow	Meter	METER	Flow	Flow	pH
				Setting	Log	Log	Log	Log	Reading		Flow	Flow	Log Weekly
1	12527	48003								41268			
2	12537	48042							7934	41439			
3	12548	48059							7944	41635			
4	12553	48089							7949	41844			
5	12563	48124							7956	42180			70
6	12570	48142							7958	42365			
7	12579	48165											
8													
9	12593	48227							7986	43217			
10	12607	48252							7997	43465			71
11	12619	48286							8005	43739			
12	12628	48298							8014	43926			
13	12646	48323							8026	44172			
14	12649	48352											
15													
16	12654	48404							8054	44746			
17	12655	48421							8065	44956			72
18	12670	48445							8073	45156			
19	12679	48472							8084	45369			
20	12687	48497							8095	45576			
21	12694	48522							8110	45817			
22													
23	12714	48579							8129	46194			
24	12726	48605							8144	46492			69
25	12741	48628							8154	46576			
26	12740	48655							8167	46782			
27	12751	48689							8183	47052			
28	12758	48708							8198	47245			
29													
30	12774	48752							8214	47530			
31	12780	48776							8226	47743			
1													
2													
TOTAL									6363				2820
AVERAGE				10					0.1				71

Mar 28 06 12:10p

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

693

FILE COPY



P.6

I. General Information for the Month Year of Feb 2006

A. Public Water System (PWS) Information

PWS Name:	Labrador Utilities Inc.	PWS Identification Number:	6514842
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:	1178	Total Population Served at End of Month:	2,336
PWS Owner:	Utilities Inc. of Florida		
Contact Person:	Patrick Flynn	Contact Person's Title:	Regional Director
Contact Person's Mailing Address:	200 Weathersfield	City: Altamont Sprng	State: Florida Zip Code: 32714
Contact Person's Telephone Number:	407-869-1919	Contact Person's Fax Number:	407-869-6961
Contact Person's E-Mail Address:	p.f.flynn@utilitiesinc-usa.com		

B. Water Treatment Plant Information

Plant Name:	Forest Lake Estates	Plant Telephone Number:	813-780-7364	
Plant Address:	One Stage Coach Lane	City: Zephyrhills	State: Florida Zip Code: 33540	
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:	564,000			
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:	Shenavious Rainey	C	14160	Days 1st Shift
Other Operators:	Dave Shoffstall	C	7799	Days 1st Shift
	David Rodriguez	A	7880	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), P.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.

03-09-06  
 Signature and Date

Shenavious Rainey  
 Printed or Typed Name

0-7799 C-14160  
 License Number

Mar 28 06 12:11p

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

PWS Identification Number: 6514842 Plant Name: Forest Lake Estates

II. Peak 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")	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>
1	X	24.0	107000	107000	0.9							0.6	
2	X	24.0	136000		0.9							0.6	
3	X	24.0	89000		1.0							0.6	
4	X	24.0	87000		1.0							0.6	
5		24.0	104000										
6	X	24.0	208000	104000	0.6							0.2	
7	X	24.0	110000		2.1							0.9	
8	X	24.0	107000		1.8							1.0	
9	X	24.0	95000		2.5							1.4	
10	X	24.0	113000		2.0							1.0	
11	X	24.0	125000	125000	1.8							1.0	
12		24.0	240000	↓									
13	X	24.0	73000		1.4							1.0	
14	X	24.0	141000	141000	1.4							0.8	
15	X	24.0	141000	↓	1.4							1.0	
16	X	24.0	106000		1.3							0.9	
17	X	24.0	137000		1.3							1.0	
18	X	24.0	133000		1.2							0.9	
19		24.0	68000	206000									
20	X	24.0	67000	97500	1.3							1.0	
21	X	24.0	113000	↓	1.4							0.9	
22	X	24.0	256000	155000	1.5							1.0	
23	X	24.0	90000		1.2							0.8	
24	X	24.0	136000		1.2							0.7	
25	X	24.0	146000	146000	1.2							0.8	
26		24.0	115000	115000									
27	X	24.0	238000	↓	1.2							0.8	
28	X	24.0	158000		1.3							0.7	
29		24.0											
30		24.0											
31		24.0											

Total: 3222000  
 Average: 115000  
 Maximum: 265000

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

Mar 28 06 12:11P

PLANT NAME:  
PLANT NO:  
REPORTING MONTH:

Labrador WTP  
693  
FEB '08

UTILITIES INC.  
WATER TREATMENT PLANT DAILY OPERATIONS WORKSHEET  
1085/08

P. 8

DAY	#1 METER (Log thousands)		#2 METER (Log thousands)		TOTAL FLOW	CL1 Rotameter Setting #s	CL2 Gas Used #s	Phosphate Residual Log Weekly	CL2 P.E.	CL2 R.T.	RV Park Meter Reading	ELECTRIC METER 47743	KWH USED	GALS PER KWH	FINAL pH Log Weekly
	READING (000)	GALS	READING (000)	GALS											
PREV	127804	0411	48776												
1	127866	82,000	48861	25,000	167,000	10	1		0.9	0.6	8237	47942	179		
2	127991	105,000	48832	31,000	136,000	10	1		0.9	0.6	8251	48123	241		
3	128059	88,000	48853	21,000	89,000	10	1		1.0	0.6	8261	48318	165		
4	128123	64,000	48871	18,000	82,000	10	1		1.0	0.6	8270	48504	156		
5		80,000		24,000											
6	128228	80,000	48919	24,000	208,000 (3) 7.3				0.6	0.2	8292	48803	354		6.9
7	128363	82,000	48947	28,000	110,000	10	2		2.1	0.9	8304	49090	202		
8	128447	82,000	48972	25,000	107,000	10	2	0.7	1.6	1.0	8315	49286	176		
9	128520	73,000	48994	22,000	95,000	12	10	2	2.5	1.4	8327	49470	184		
10	128667	87,000	49020	26,000	113,000	10	2		2.0	1.0	8338	49675	205		
11		95,000		28,000											
12	128796	94,000	49074	28,000	242,000	10	4		1.8	1.0	8365	50129	354		
13	128852	56,000	49093	17,000	73,000	10	2		1.4	1.0	8377	50271	142		7.1
14	128946	96,000	49121	26,000	124,000	10	2		1.4	0.8	8382	50508	229		
15	129054	110,000	49155	34,000	144,000	10	3	0.5	1.4	1.0	8393	50702	202		
16	129109	51,000	49170	18,000	69,000	10	1		1.3	0.9	8408	50933	131		
17	129213	106,000	49201	31,000	137,000	10	1		1.3	1.0	8421	51134	241		
18	129317	108,000	49232	31,000	139,000	10	1		1.8	0.9	8433	51374	240		
19	129490	115,000	49284	32,000	147,000	10	4		1.3	1.0	8444	51762	406		7.3
20															
21	129600	110,000	49317	33,000	143,000	10	3	0.6	1.4	0.9	8469	52055	253		
22	129720	110,000	49352	33,000	153,000	10	4		1.5	1.0	8486	52309	274		
23	129798	69,000	49373	21,000	90,000	10	2		1.2	0.8	8497	52473	164		7.3
24	129909	120,000	49409	36,000	156,000	10	3		1.3	0.7	8513	52748	275		
25	129983	73,000	49431	22,000	95,000	10	3		1.3	0.8	8521	52918	170		
26	130100														
27	130160	120,000	49464	36,000	156,000	10	3	0.8	1.2	0.8	8557	53325	216		7.1
28	130272	120,000	49520	36,000	156,000	10	3		1.3	0.7	8564	53620	291		
29															
30															
31															
1															
2															
TOTAL															
AVERAGE															

(add PV Park (cont))

CO2 Nitro

1/17  
1/16

8/27  
8/26

130378 / 49549

Mar 28 06 12:13p

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

23



FILE COPY

04/07/2006 13:40 B136261030

GARTH A

PAGE 03

General Information for the Month of March/2006

Public Water System (PWS) Information

PWS Name:	Labrador Utilities Inc.	PWS Identification Number:	6314842
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:	1178	Total Population Served at End of Month:	2,336
PWS Owner:	Utilities Inc. of Florida		
Contact Person:	Patrick Flynn	Contact Person's Title:	Regional Director
Contact Person's Mailing Address:	200 Weathersfield	City:	Altamont Spring, Florida
Contact Person's Telephone Number:	407-869-1919	State:	Florida
Contact Person's E-Mail Address:	D.C.FLYNN@UNIKRESINC-USA.COM	Zip Code:	32714
		Contact Person's Fax Number:	407-869-6961

Water Treatment Plant Information

Plant Name:	Forest Lake Estates	Plant Telephone Number:	813-780-7364
Plant Address:	<del>One Stage Cochrane</del> 41311 Paquette Way	City:	Zephyrhills, Florida
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:	364,000	Zip Code:	33540

Plant Category (per subsection 62-699.310(4), F.A.C.):		Plant Class (per subsection 62-699.310(4), F.A.C.):	
IV		C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Shantavious Rainey	C	14160
Other Operators:	Dave Shoffnitil	C	7799
	David Rodriguez	C	8762 4980
	Keith Scheider	C	

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 62-553.320(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.

SR 4/4/06  
 Signatory and Date

Shantavious Rainey  
 Printed or Typed Name

6-7799-C-14160  
 License Number

**MONTHLY OPERATION REPORT FOR PWS'S TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

04/07/2006 13:40 8136261030 GARTH A PAGE 04

P-2

APR 07 06 09:29

PWS Identification Number: 631842		Plant Name: Forest Lake Water													
Date: 04/07/2006															
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 Demonstrate Four-Log Virus Inactivation, if Applicable <sup>a</sup>										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, 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	125000		2.8									0.5	
2	X	24.0	109000		1.4									0.5	
3	X	24.0	114000		1.5									0.6	
4	X	24.0	134000		1.5									0.6	
5		24.0	135000												
6	X	24.0	270000		1.0									0.5	
7	X	24.0	122000		1.1									0.8	
8	X	24.0	124000		1.0									0.5	
9	X	24.0	149000		1.3									0.6	
10	X	24.0	74000		1.1									0.6	
11	X	24.0	146000		1.1									0.6	
12		24.0	162000												
13	X	24.0	130000		1.0									0.5	
14	X	24.0	143000		1.3									0.7	
15	X	24.0	106000		1.3									0.6	
16	X	24.0	153000		1.5									0.3	
17	X	24.0	152000		2.8									0.8	
18	X	24.0	112000		1.0									0.4	
19		24.0	110000												
20	X	24.0	50000		1.5									0.6	
21	X	24.0	61000		1.8									0.8	
22	X	24.0	117000		1.8									0.7	
23	X	24.0	140000		1.6									0.6	
24	X	24.0	115000		1.5									0.8	
25	X	24.0	100000		1.0									0.4	
26		24.0	122000												
27	X	24.0	116000		2.5									0.9	
28	X	24.0	122000		2.2									0.9	
29	X	24.0	184000		2.0									0.8	
30	X	24.0	62000		2.0									0.5	
31	X	24.0	131000		1.0									0.5	
Total			4002000												
Average			129000												
Maximum			270000												

<sup>a</sup> Refer to the instructions for this report to determine which plants must provide this information.  
DEP Form 62-688-000(3)  
Effective August 28, 2003

PLANT NAME  
 PLANT NO  
 REPORTING MONTH

*Laboratory*  
 693  
 March DC

UTILITIES INC.  
 WATER TREATMENT PLANT DAILY OPERATIONS WORKSHEET

DAY	#1 METER (Log thousands)		#2 METER (Log thousands)		TOTAL FLOW	Potentiometer	Cl <sub>2</sub> gas used	Phosphate used	Cl <sub>2</sub> P.R.	Cl <sub>2</sub> R.T.	RV Paik	ELECTRIC METER	KWH UNDD	GALS PER MWH	Page 1 of 2
	READING (000)	GALS	READING (000)	GALS											
1	120374	96000	49549	79000	125072	10						53636			
2	130463	87000	49528	75000	109000	10	2	0.77	1.8	0.5		53782	266		2.3
3	130510	89000	49600	76000	114000	10	2		1.4	0.6		5386	54044		
4	130657	107000	49622	77000	132000	10	2		1.5	0.6		535	54346	202	
5		104000		76000		1						80602	54496	250	
6	130865	88000	49724	76000	132000	10	4	0.5	1.0	0.5		837	54780	440	7.2
7	131081	88000	49728	76000	132000	10			1.1	0.5		8038			
8	131209	90000	49759	76000	124000	10			1.0	0.5					
9	13157	115000	49770	76000	144000	10			1.2	0.6		58462			
10	131274	57000	49824	77000	74000	10			1.1	0.4		54674			
11	131331	126000	49844	78000	104000	10			1.1	0.6		59737			
12		126000		77000	102000							56073			
13	131583	102000	49916	80000	100000	10			1.0	0.5			56650		
14	131685	93000	49946	80000	142000	10			1.2	0.7			56883		
15	131778	82000	49996	84000	106000	10			1.2	0.6			57102		
16	131860	120000	50020	82000	150000	2			1.5	0.3			57293		
17	131980	122000	50052	85000	157000	8			2.0	0.8			57568		
18	132102	86000	50087	86000	112000	10			1.0	0.4			57846		
19		85000		82000	110000										
20	132221	115000	50138	85000	150000	12			1.5	0.6			58254		
21	132356	110000	50173	82000	142000				1.8	0.8		88649	58521		
22	132428	71000	50205	44000	117000				1.8	0.7			58766		
23	132571	123000	50249	31000	160000	12			1.0	0.6			58979		
24	132697	70000	50284	22000	125000	10			1.5	0.8			59239		
25	132793	83000	50312	25000	109000	10			1.0	0.4			59473		
26		83000		24000	107000				2.5	0.9					
27	132960	101000	50361	31000	138000				2.5	0.9			59665		
28	133062	111000	50392	38000	144000				2.2	0.7			60144		
29	133178	118000	50425	60000	184000				2.0	0.8			60683		
30	133296	48000	50441	14000	62000				2.0	0.5			60883		
31	133344	94000	50485	27000	121000				1.0	0.5			60803		
1	133438	274000	50532	84000	303000				1.0	0.4			61014		
2									1.0	0.3			61361		
TOTAL															
AVERAGE															

133672      50601

10 0.3      61461

30m - 0.25 = 40m

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

603

FILE COPY

P. 3



General Information for the Month of APRIL 2006

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

PWS Name:	Labrador Utilities Inc.	PWS Identification Number:	6514842
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:	1178	Total Population Served at End of Month:	2,356
PWS Owner:	Utilities Inc. of Florida		
Contact Person:	Patrick Flynn	Contact Person's Title:	Regional Director
Contact Person's Mailing Address:	200 Westersfield	City: Altamont Sprin	State: Florida
Contact Person's Telephone Number:	407-869-1919	Zip Code:	32714
Contact Person's E-Mail Address:	P.C.Flynn@utilitiesinc-usa.com	Contact Person's Fax Number:	407-869-6961

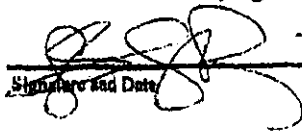
**B. Water Treatment Plant Information**

Plant Name:	Forest Lake Estates	Plant Telephone Number:	813-780-7564
Plant Address:	<del>One Stop Commerce</del> 41311 Paquette Way	City: Zephyrhills	State: Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	Zip Code:	33540
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	364,000		
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:	Shantavious Rainey	C	14160	Days 1st Shift
Other Operators:	Dave Shoffstall	C	7799	Days 1st Shift
	Dave Rodriguez Keith Scheider	A-C	8484 4888	Days 1st Shift

**III. Certification by Lead 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.

 5/2/06  
 Signature and Date

Shantavious Rainey  
 Printed or Typed Name

6-3399-C-14160  
 License Number

May 02 06 01:27p



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

AWB Identification Number: 6314843 Plant Name: Forest Lake Estates

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	152,000		1.0									0.4	
2		24.0	151,000												
3	X	24.0	140,000		1.0									0.3	
4	X	24.0	135,000		1.0									0.4	
5	X	24.0	107,000		1.9									0.4	
6	X	24.0	134,000		2.9									1.8	
7	X	24.0	149,000		3.2									1.9	
8	X	24.0	88,000		1.9									1.0	
9		24.0	88,000												
10	X	24.0	101,000		0.8									0.3	
11	X	24.0	118,000		1.0									0.9	
12	X	24.0	103,000		1.1									0.7	
13	X	24.0	109,000		1.0									0.5	
14	X	24.0	147,000		0.8									0.3	
15	X	24.0	122,000		0.9									0.9	
16		24.0	120,000												
17	X	24.0	94,000		2.8									0.9	
18	X	24.0	111,000		0.5									0.8	
19	X	24.0	120,000		0.5									0.5	
20	X	24.0	106,000		0.5									0.5	
21	X	24.0	154,000		0.5									0.3	
22	X	24.0	89,000		1.2									0.3	
23		24.0	88,000												
24	X	24.0	105,000		1.0									0.9	
25	X	24.0	48,000		3.5									1.3	
26	X	24.0	93,000		2.0									1.0	
27	X	24.0	102,000		1.8									1.0	
28	X	24.0	70,000		1.2									1.0	
29	X	24.0	90,000		1.0									0.8	
30		24.0													
31		24.0													
Total			3,384,000												
Average			110,800												
Maximum			162,000												

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

May 02 06 01:28p

PLANT NAME: Labrador WTP  
 PLANT NO: 693

UTILITIES INC.  
 WATER TREATMENT PLANT DAILY OPERATIONS WORKSHEET

REPORTING MONTH: April 2006

DAY	#1 METER (Log Thousands)	#2 METER (Log Thousands)	TOTAL FLOW	CL2 Alarm	CL2 -On-	Phosphate Residual	CL2 P.B.	CL2 R.T.	RV Park Meter	ELECTRIC METER	KWH USED	GALS PER KWH	FINAL pH
PREV	READING	READING		Setpoint	Used	Log Weekly			Reading				Log Weekly
1	1354238	52525	34000	1002			1.0	0.4		61014			
2	1354338	52533	34000										
3	1354373	52601	34000				1.0	0.3		61561			
4	1354383	52630	34000	100/100			1.0	0.4		61816			
5	1354387	52641	33000	100/100			1.4	0.4	9114	62053			
6	135467	52694	32000	100/100			2.9	1.8	9121	62239			
7	135468	52726	32000	100/100	35/75		3.2	1.9	9133	62441			
8	1354185	52759	20000	100/100	50/85		1.4	1.0	9145	62734			
9		52798	20000				2						
10	1354331	52798	23000	100/100	50/50		0.8	0.3	9127	63050			
11	1354399	52821	27000	100/100	50/50		1.0	0.9	9124	63209			
12	1354980	52848	30000	100/100	50/50		1.1	0.7	9124	63438			
13	1354563	52878	28000	100/100	50/50		1.6	0.5	9181	63601			
14	1354826	52904	23000	100/100	50/50		0.8	0.3	9192	63790			
15	1354260	52937	28000	100/100	50/50		0.9	0.9	9178	64060			
16		52980	27000										
17	1354947	52992	20000	100/100	30/50		0.3	0.9	9218	64437			
18	1355021	53012	25000	100/100	25/85		0.5	0.8	9215	64651			
19	135467	53037	34000	100/100	30/50		0.5	0.5	9221	64848			
20	135773	53071	23000	100/100	30/50		0.5	0.5	9228	65042			
21	135726	53077	26000	100/100	30/50		0.5	0.3	9232	65221			
22	135894	53130	20000	100/100	70/100		1.2	0.3		65485			
23		53180	19000										
24	135532	53171	24000	100/100	70/95		1.0	0.9	9278	65902			
25	135613	53195	22000	100/100	50/90		1.5	1.3	9254	65990			
26	135489	53212	25000	80/100	50/90		3.0	1.0	9261	66108			
27	135752	53253	18000	80/100	30/90		1.8	1.0	9266	66316			
28	135836	53270	16000	85/100	50/90		1.2	1.0	9227	66513			
29	135890	53286	21000				1.0	0.8		66617			
30		53327	20000										
1	14028	53327											
2													
TOTAL													
AVERAGE													

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



P.2

General Information for the Month/Year of: May / 2006

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

PWS Name:	Labrador Utilities Inc.	PWS Identification Number:	6514842
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:	1178	Total Population Served at End of Month:	2,356
PWS Owner:	Utilities Inc. of Florida		
Contact Person:	Patrick Flynn	Contact Person's Title:	Regional Director
Contact Person's Mailing Address:	200 Weathersfield	City:	Allamont Spring State: Florida Zip Code: 32714
Contact Person's Telephone Number:	407-869-1919	Contact Person's Fax Number:	407-869-6961
Contact Person's E-Mail Address:	p.c.flynn@utilitiesinc-usa.com		

**3. Water Treatment Plant Information**

Plant Name:	Forest Lake Estates	Plant Telephone Number:	813-780-7364
Plant Address:	<del>One Stage Constraint</del> 41311 Paquette Way	City:	Zephyrhills State: Florida Zip Code: 33540
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:	564,000		
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>
Lead/Chief Operator:	Shantavious Rainey	C	14160 Days 1st Shift
Other Operators:	Dave Shoffstall	C	7799 Days 1st Shift
	<del>David Rodriguez</del> Keith Scheider	A-C	<del>8462 7800</del> 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.

 : 6/6/06  
 Signature and Date

Shantavious Rainey  
 Printed or Typed Name

62299C-14160  
 License Number

Jun 12 06 11:57a

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

Identification Number: 6514842 Plant Name: Forest Lake Estates

Check Date for the Month/Year of: \_\_\_\_\_

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

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

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			
X	24.0	53000		1.0										0.8	
X	24.0	67000		1.2										0.8	
X	24.0	83000		1.5										0.9	
X	24.0	90000		2.2										1.2	
X	24.0	72000		1.5										1.2	
X	24.0	100000		1.8										1.2	
	24.0	110000													
X	24.0	98000		1.2										1.0	
X	24.0	53000		1.2										1.0	
X	24.0	71000		1.0										1.0	
X	24.0	64000		1.0										0.5	
X	24.0	102000		1.0										0.8	
X	24.0	75000		1.0										0.7	
	24.0	75000													
X	24.0	63000		1.0										0.6	
X	24.0	51000		3.0										1.0	
X	24.0	64000		1.5										1.0	
X	24.0	58000		3.0										1.0	
X	24.0	107000		3.0										1.5	
X	24.0	77000		1.5										2.0	
	24.0	78000													
X	24.0	58000		1.2										1.0	
X	24.0	68000		1.0										1.0	
X	24.0	59000		1.0										0.6	
X	24.0	84000		1.0										0.6	
X	24.0	80000		1.0										0.6	
X	24.0	62000		1.2										0.7	
	24.0	62000													
X	24.0	67000		1.0										0.6	
X	24.0	76000		0.7										0.6	
X	24.0	84000		1.0										0.7	
		2321000													
average		75000													
minimum		110000													

Refer to the instructions for this report to determine which plants must provide this information.  
 DEP Form 82-656, 903(3)  
 Effective August 28, 2003

P. 3

Jun 12 06 11:57a

May 2006

PLANT NAME: Labrador WTP  
 PLANT NO: 693  
 REPORTING MONTH:

UTILITIES INC.  
 WATER TREATMENT PLANT DAILY OPERATIONS WORKSHEET

Page 1 of 2

DAY	# 1 METER (Log thousands)		# 2 METER (Log thousands)		TOTAL FLOW	CL2 Setting #s	CL2 Used #s	Phosphate Residual Log Weekly	CL2 P.E.	CL2 R.T.	RV Park Meter Reading	ELECTRIC METER	KWH USED	OALS PER KWH	FINAL pH
	READING	GALS.	READING	GALS.											
PREV															
1	136028	41000	51327	12000	53000	10010			1.0	0.8		66977			(C) C14160
2	136134	67000	51339	20000	87000	10610			1.2	0.8	9236	67060			(C) C14160
3	136136	59000	51351	23000	82000	0/100			1.5	0.9	9291	67237			(C) C14160
4	136195	62000	51382	18000	80000	0/75			2.2	1.2	9244	67376			(C) C14160
5	136257	62000	51400	10000	72000	0/75			1.5	1.2	9246	67529			(C) C14160
6	136319	74000	51410	26000	100000	0/75			1.8	1.2	9200	67801			(C) C14160
7		78000		27000	101000										
8	136467	77000	51463	21000	98000	0/75			1.2	1.0	9305	68018			(C) C14160
9	136544	42000	51484	11000	53000	0/75			1.2	1.0	9308	68198			(C) C14160
10	136586	57000	51495	17000	71000	0/75			1.0	1.0	9310	68298			(C) C14160
11	136640	49000	51512	15000	64000	0/75			1.0	0.5	0011	68427			(C) C14160
12	136689	74000	51527	23000	102000	0/75			1.0	0.8	0013	68549			(C) C14160
13	136768	59000	51550	16000	75000	0/75			1.0	0.7	0016	68735			(C) C14160
14	136807	48000	51581	18000	63000	25/0			1.0	0.6	0020	68936	Switched tanks (Cl2)		(C) C14160
15	136877	45000	51599	13000	58000	25/0			1.0	0.6	0020	69137			(C) C14160
16	136932	45000	51612	14000	59000	25/0			1.5	1.0	0033	69247			(C) C14160
17	136970	45000	51631	13000	58000	1/75			3.0	1.0	0026	69359	Cl2 Dosing		(C) C14160
18	137015	45000	51644	24000	107000	0/75			3.0	1.5	0029	69478	Flush system		(C) C14160
19	137060	60000	51668	17000	77000	0/75			1.5	2.0		69719			(C) C14160
20	137143	60000	51703	13000	73000	0/75			1.2	1.0	0037	70005			(C) C14160
21		60000		13000	73000	0/75			1.0	1.0	0037	70114			(C) C14160
22	137263	45000	51716	15000	60000	0/75			1.7	0.6	0041	70242			(C) C14160
23	137308	53000	51731	16000	69000	0/75			1.0	0.6	0044	70348			(C) C14160
24	137361	43000	51747	20000	63000	0/75			1.0	0.6	0016	70507			(C) C14160
25	137424	64000	51767	18000	80000	0/75			1.2	0.7	0047	70657			(C) C14160
26	137478	62000	51785	13000	75000	0/75			1.0	0.5	0054	70937			(C) C14160
27	137532	49000	51811	18000	67000	0/75			0.7	0.6	0057	71010			(C) C14160
28		49000		17000	66000	0/75			1.0	0.7	0066	71149			(C) C14160
29	137630	59000	51829	23000	84000	0/00			1.0	0.5	0079	71284			(C) C14160
30	137679	59000	51846	23000	84000	0/00									
31	137738	54000	51871			0/00									
1	137777					0/00									
2															
TOTAL															
VERAGE															

3.0/1.0/0022

2321  
75

0410

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



**FILE COPY**

Jul 13 06 11:19a

General Information for the Month Year of: June / 2006

**Public Water System (PWS) Information**

PWS Name:				PWS Identification Number:	6514842
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:	1178			Total Population Served at End of Month:	2,356
PWS Owner:	Utilities Inc. of Florida				
Contact Person:	Patrick Flynn			Contact Person's Title:	Regional Director
Contact Person's Mailing Address:	200 Weathersfield		City:	Altamont Springs	State: Florida Zip Code: 32714
Contact Person's Telephone Number:	407-869-1919			Contact Person's Fax Number:	407-869-6961
Contact Person's E-Mail Address:	p.c.flynn@utilitiesinc-usa.com				


**Water Treatment Plant Information**

Plant Name:	Forest Lake Estates			Plant Telephone Number:	813-780-7364
Plant Address:	One-Stop Coachmans 41311 Paquette Way		City:	Zephyrhills	State: Florida Zip Code: 33540
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:	364,000				
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:	Shantavious Rainey	C	14160	Days 1st Shift
Other Operators:	Dave Sheffstall	C	7799	Days 1st Shift
	<del>David Rodriguez</del> Keith Scheider	A-C	<del>8464 7880</del>	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.

 7/7/06  
 Signature and Date

Shantavious Rainey  
 Printed or Typed Name

6-7799-C-14160  
 License Number

P. 2

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

Identification Number: 6514842 Plant Name: Forest Lake Estates

Early Data for the Month Year of \_\_\_\_\_

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

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

Day of 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		
	X	24.0	80000		1.2									0.6	
	X	24.0	76000		1.2									0.6	
	X	24.0	72000		1.0									0.5	
		24.0	71000												
	X	24.0	36000		0.8									0.5	
	X	24.0	43000		0.8									0.5	
	X	24.0	69000		2.0									0.8	
	X	24.0	74000		2.2									0.8	
	X	24.0	82000		2.1									0.9	
	X	24.0	80000		2.2									0.9	
		24.0	29000												
	X	24.0	26000		3.0									1.0	
	X	24.0	31000		3.0									1.3	
	X	24.0	26000		2.2									1.0	
	X	24.0	43000		2.0									0.8	
	X	24.0	31000		2.2									0.8	
	X	24.0	31000		2.2									0.8	
		24.0	39000												
	X	24.0	34000		2.2									1.0	
	X	24.0	20000		2.0									0.8	
	X	24.0	48000		2.1									0.8	
	X	24.0	67000		2.1									0.8	
	X	24.0	63000		2.8									2.0	
	X	24.0	31000		2.2									1.3	
		24.0	38000												
	X	24.0	93000		2.5									1.2	
	X	24.0	58000		1.5									1.0	
	X	24.0	93000		2.0									1.0	
	X	24.0	42000		2.0									0.8	
	X	24.0	27000		1.8									0.8	
		24.0													
			1490000												
			50000												
			93000												

Refer to the instructions for this report to determine which plants must provide this information.  
 DEP Form 62-658,900(3)  
 Effective August 28, 2000

Jul 13 06 11:19a

PLANT NAME:  
PLANT NO:

Lubador 693  
-693

June 2006

UTILITIES INC.

WATER TREATMENT PLANT DAILY OPERATIONS WORKSHEET

REPORTING MONTH:

Page 1 of 2

DAY	#1 METER (Log thousands)		#2 METER (Log thousands)		TOTAL FLOW	Pump Run Hours #1 #2	CL <sub>2</sub> P.E.	CL <sub>4</sub> R.T.	ELECTRIC METER	KWH USED	GALS PFR KWH	FINAL
	READING	GALS	READING	GALS								pH
PREV	137747		51871									Log Weekly
1	137847	67000	51871	14000	86000		12	0.6				@ C14160
2	137864	55000	51890	21000	76000		12	0.6	0090	71436		@ C14160
3	137919	57000	51911	15000	72000		10	0.5				@ C14160
4		57000		14000	71000							
5	138027	35000	51940	10000	36000		0.8	0.5	110	71847		@ C14160
6	138068	000	51950	43000	43000		0.8	0.5	117	71940		@ C14160
7	138068	000	51943	69000	69000		2.0	0.8	118	72220		@ C14160
8	138068	000	52068	74000	74000		2.2	0.8	119	72491		@ C14160
9	138068	000	52136	82000	82000		2.1	0.9	119	72796		@ C14160
10	138068	000	52218	80000	80000		2.2	0.9		73113		Res. 6-17-99
11		000		29000	29000					73601		
12	138068	000	52277	26000	26000		3.0	1.0	120	73803		@ C14160
13	138068	000	52303	31000	31000		2.2	1.0	120	74161		@ C14160
14	138068	000	52334	26000	26000		2.0	0.8	120	74425		@ C14160
15	138068	000	52360	43000	43000		2.2	0.8	122	74700		@ C14160
16	138068	000	52403	31000	31000		2.2	0.8	122	74922		@ C14160
17	138068	000	52434	31000	31000		2.2	0.8	124	75200		@ C14160
18		000		30000	30000					75500		
19	138068	000	52493	34000	34000		2.2	0.8	124	75800		@ C14160
20	138068	000	52529	20000	20000		2.0	0.8		76040		@ C14160
21	138068	000	52549	44000	46000		2.1	0.8	124	76262		@ C14160
22	138068	000	52595	67000	67000		2.1	0.8	124	76320		@ C14160
23	138068	000	52662	63000	63000		2.0	0.8	124	76603		@ C14160
24	138068	000	52710	31000	31000		2.0	1.0		76867		@ C14160
25		000		31000	31000							
26	138068	29000	52787	64000	93000		2.5	1.2		77437		@ C14160
27	138097	41000	52851	17000	58000		1.5	1.0	125	77677		@ C14160
28	138138	57000	52868	35000	92000		2.0	1.0	125	77799		@ C14160
29	138195	32000	52903	10000	42000		2.0	0.8	125	78008		@ C14160
30	138227	21000	52913	6000	27000		1.8	0.8		78096		@ C14160
31												
1	138269		52925									
2												
DTAL												
VOLUME												

138269 / 52925  
1490 / 50



043

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



FILE COPY

General Information for the Month of July/2006

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

PWS Name: <u>Labrador Utilities Inc.</u>		PWS Identification Number: <u>6514842</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>1178</u>		Total Population Served at End of Month: <u>2,356</u>	
PWS Owner: <u>Utilities Inc. of Florida</u>			
Contact Person: <u>Patrick Flynn</u>		Contact Person's Title: <u>Regional Director</u>	
Contact Person's Mailing Address: <u>200 Weathersfield</u>		City: <u>Altamont Springs</u> State: <u>Florida</u> Zip Code: <u>32714</u>	
Contact Person's Telephone Number: <u>407-869-1919</u>		Contact Person's Fax Number: <u>407-869-6961</u>	
Contact Person's E-Mail Address: <u>p.c.flynn@utilitiesinc-usa.com</u>			

**B. Water Treatment Plant Information**

Plant Name: <u>Forest Lake Estates</u>		Plant Telephone Number: <u>813-780-7364</u>	
Plant Address: <u>One Stage Creek Lane 41311 Paquette Way</u>		City: <u>Zephyrhills</u> State: <u>Florida</u> Zip Code: <u>33540</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>564,000</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>Shantavious Rainey</u>	<u>C</u>	<u>14160</u>	<u>Days 1st Shift</u>
Other Operators:	<u>Dave Shaffral</u>	<u>C</u>	<u>7799</u>	<u>Days 1st Shift</u>
	<u>David Rodriguez Keith Scheider</u>	<u>A-C</u>	<u>0460 7880</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.

*Shantavious Rainey*      08/08/06  
 Signature and Date

Shantavious Rainey  
 Printed or Typed Name

07799 C-14160  
 License Number

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

PWS Identification Number: 6514842 Plant Name: Forest Lake Estates

II. Daily Data for the Month Year of: July 2006

Ultraviolet Radiation  Other (Describe):  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

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	63000		1.5									0.6	
2		24.0	62000												
3	X	24.0	79000		1.5									0.6	
4	X	24.0	55000		1.6									0.8	
5	X	24.0	38000		1.5									0.8	
6	X	24.0	28000		1.2									0.6	
7	X	24.0	41000		1.2									0.6	
8	X	24.0	33000		1.2									0.6	
9		24.0	31000												
10	X	24.0	42000		1.2									0.6	
11	X	24.0	40000		1.5									0.8	
12	X	24.0	34000		1.8									0.6	
13	X	24.0	53000		1.7									0.6	
14	X	24.0	43000		1.7									0.6	
15	X	24.0	52000		1.5									0.6	
16		24.0	39000												
17	X	24.0	37000		1.6									0.7	
18	X	24.0	42000		1.5									0.7	
19	X	24.0	37000		1.5									0.8	
20	X	24.0	40000		1.4									0.9	
21	X	24.0	63000		1.6									0.8	
22	X	24.0	31000		1.8									0.8	
23		24.0	30000												
24	X	24.0	41000		1.2									0.7	
25	X	24.0	42000		1.6									0.8	
26	X	24.0	46000		1.8									1.0	
27	X	24.0	37000		1.6									0.8	
28	X	24.0	32000		1.6									0.9	
29	X	24.0	34000		1.5									0.9	
30		24.0	34000												
31	X	24.0	60000		1.5									0.8	
Total			1260000												
Average			40830												
Maximum			63000												

\* Refer to the instructions for this report to determine which plants must provide this information.  
 DEP Form 62-866.900(3)  
 Effective August 28, 2003

PLANT NAME:  
PLANT NO:  
REPORTING MONTH:

Laborator 695  
- July 2004

UTILITIES INC.  
WATER TREATMENT PLANT DAILY OPERATIONS WORKSHEET

DAY	# 1 METER (Log thousands) READING	# 2 METER (Log thousands) READING	TOTAL FLOW	Pump Run Hours	Cl <sub>2</sub> P.R.	Cl <sub>2</sub> R.T.	ELECTRIC METER	KWH USED	GAUGES PAR	FINAL pH
1	138267	48000	52925	15000	62000	1.5	0.6	78207		20.14760
2		48000		14000	62000					
3	138365	15000	52954	4000	19000	1.5	0.6	78445		20.14760
4	138380	40000	52958	13000	53600	1.6	0.8	78487		20.14760
5	138420	26000	52971	7000	33000	1.5	0.8	78584		20.14760
6	138440	22000	52978	6000	28000	1.2	0.6	78652		20.14760
7	138468	32000	52984	9000	41000	1.2	0.6	78706	18.4	20.14760
8	138500	21000	52995	4000	33000	1.2	0.6	78799		20.14760
9		28000		3000	31000					
10	138557	92000	53012	10000	42000	1.2	0.6	78952	17.4	20.14760
11	138589	31000	53022	9000	40000	1.5	0.8	79035	17.8	20.14760
12	138620	23000	53031	12000	34000	1.8	0.6	79115	18.1	20.14760
13	138642	41000	53043	13000	53000	1.7	0.6	79181	18.3	20.14760
14	138683	36000	53055	11000	47000	1.7	0.6	79281		20.14760
15	138719	32000	53066	15000	52000	1.5	0.6	79371		20.14760
16	138732	33000	53085	6000	39000	1.6	0.7	79453		20.14760
17		32000		5000	37000	1.5	0.7	79623		20.14760
18	138817	32000	53096	10000	42000	1.4	0.4	79703		20.14760
19	138849	26000	53106	11000	37000	1.4	0.9	79777	20.6	20.14760
20	138875	30000	53117	10000	40000	1.6	0.8	79859		20.14760
21	138907	48000	53127	15000	63000	1.8	0.8	79979		20.14760
22	138955	24000	53142	7000	31000					
23		27000		7000	30000					
24	139002	32000	53156	4000	31000	1.5	0.5	80101		20.14760
25	139034	32000	53165	10000	42000	1.6	0.8	80178	21.4	20.14760
26	139066	32000	53175	14000	46000	1.5	1.0	80255	21.6	20.14760
27	139098	28000	53189	9000	37000	1.6	0.8	80339	21.7	20.14760
28	139126	28000	53198	10000	38000	1.6	0.5	80410		20.14760
29	139154	24000	53208	15000	39000	1.5	0.5	80482		20.14760
30		29000		15000	44000					
31	139213	42000	53234	12000	54000	1.5	0.8	80620		20.14760
1	139254		53236							
2										
TOTAL										
AVERAGE										

1266  
40.83

1073

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

P. 3



FILE COPY

*Aug  
July/2006*

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

A. Public Water System (PWS) Information

PWS Name:	Labrador Utilities Inc.	PWS Identification Number:	6514842
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:	1178	Total Population Served at End of Month:	2,356
PWS Owner:	Utilities Inc. of Florida		
Contact Person:	Patrick Flynn	Contact Person's Title:	Regional Director
Contact Person's Mailing Address:	200 Weathersfield	City:	Altamont Spring, Florida
Contact Person's Telephone Number:	407-869-1919	State:	Florida
Contact Person's E-Mail Address:	p.flynn@utilitiesinc-usa.com	Zip Code:	32714
		Contact Person's Fax Number:	407-869-6961

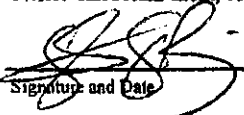
B. Water Treatment Plant Information

Plant Name:	Forest Lake Estates	Plant Telephone Number:	813-780-7364
Plant Address:	<del>One Stop Contractor</del> 41311 Paquette Way	City:	Zephyrhills, Florida
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:	564,000	Zip Code:	33540
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:	Shantavious Rainey	C	14160	Days 1st Shift
Other Operators:	Dave Shoffstall	C	7799	Days 1st Shift
	David Rodriguez Keith Scheider	A C	9484 4880	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 08/08/06

Shantavious Rainey  
 Printed or Typed Name

~~6799~~ C-14160  
 License Number

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

4 WS Identification Number: 6514842 Plant Name: Forest Lake Estates

P. 11 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, 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's Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer's 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	63000		1.5									0.6	
2		24.0	62000												
3	X	24.0	19000		1.5									0.6	
4	X	24.0	53000		1.6									0.8	
5	X	24.0	39000		1.5									0.8	
6	X	24.0	28000		1.2									0.6	
7	X	24.0	41000		1.2									0.6	
8	X	24.0	33000		1.2									0.6	
9		24.0	31000												
10	X	24.0	42000		1.2									0.6	
11	X	24.0	40000		1.5									0.8	
12	X	24.0	24000		1.8									0.6	
13	X	24.0	53000		1.7									0.6	
14	X	24.0	43000		1.7									0.6	
15	X	24.0	52000		1.5									0.6	
16		24.0	39000												
17	X	24.0	37000		1.6									0.7	
18	X	24.0	42000		1.5									0.7	
19	X	24.0	37000		1.5									0.8	
20	X	24.0	40000		1.4									0.9	
21	X	24.0	63000		1.6									0.8	
22	X	24.0	31500		1.8									0.8	
23		24.0	30000												
24	X	24.0	31000		1.5									0.5	
25	X	24.0	42000		1.6									0.8	
26	X	24.0	46000		1.8									1.0	
27	X	24.0	37000		1.6									0.8	
28	X	24.0	38000		1.6									0.5	
29	X	24.0	34000		1.5									0.5	
30		24.0	34000												
31	X	24.0	50000		1.5									0.8	
Total			1260000												
Average			40630												
Maximum			63000												

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

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PLANT NAME: Labrador 695  
 PLANT NO: July 2004

UTILITIES INC.  
 WATER TREATMENT PLANT DAILY OPERATIONS WORKSHEET

REPORTING MONTH:

DAY	# 1 METER (Log thousands)		# 2 METER (Log thousands)		TOTAL FLOW	Pulp Run Hours #1 #2	Cl <sub>2</sub> P.R.	Cl <sub>2</sub> R.T.	ELECTRIC METER	KWH USED	GALS PER KWH	FINAL pH Log Weekly
	READING	(000) GALS.	READING	(000) GALS.								
1	138267	48000	52925	15000	63000		1.5	0.6	78207			8.14160
2		48000		14000	62000							
3	138365	15000	52954	4000	19000		1.5	0.6	78445			8.14160
4	138380	40000	52957	13000	53000		1.6	0.8	78487			8.14160
5	138420	20000	52971	7000	27000		1.5	0.8	78584			8.14160
6	138440	22000	52978	6000	28000		1.2	0.6	78652			8.14160
7	138468	32000	52984	7000	41000		1.2	0.6	184 78706			8.14160
8	138500	31000	52995	4000	33000		1.2	0.6	78799			8.14160
9		20000		3000	31000							
10	138557	32000	53012	10000	42000		1.2	0.6	174 78952			8.14160
11	138589	31000	53027	9000	40000		1.3	0.8	178 79035			8.14160
12	138620	23000	53031	12000	34000		1.8	0.6	181 79115			8.14160
13	138642	41000	53043	12000	53000		1.7	0.6	183 79181			8.14160
14	138643	36000	53055	11000	47000		1.7	0.6	79281			8.14160
15	138719	33000	53066	19000	52000		1.5	0.6	79371			8.14160
16	138732	33000	53085	6000	39000		1.7	0.7	79433			8.14160
17		32000		5000	37000		1.5	0.7	79623			8.14160
18	138817	32000	53096	10000	42000		1.5	0.4	79703			8.14160
19	138809	26000	53106	11000	37000		2.4	0.9	206 79777			8.14160
20	138875	30000	53117	10000	40000		1.6	0.8	79859			8.14160
21	138907	48000	53127	15000	63000		1.8	0.8	79779			8.14160
22	138955	24000	53142	7000	31000							
23		23000		7000	30000							
24	139002	32000	53156	9000	31000		1.5	0.5	80101			8.14160
25	139034	32000	53165	10000	42000		1.6	0.8	214 80178			8.14160
26	139066	32000	53175	14000	46000		1.5	1.0	216 80255			8.14160
27	139098	28000	53189	9000	37000		1.6	0.8	217 80339			8.14160
28	139126	28000	53194	10000	38000		1.1	0.5	80410			8.14160
29	139154	24000	53208	15000	39000		1.5	0.5	80482			
30		29000		15000	44000							
31	139212	42000	53224	12000	54000		1.5	0.8	80620			8.14160
1	139254		53236									
2												
TOTAL												
AVERAGE												

1266  
40.83

P. 5

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



P.2

8137807364

Utilities, Inc

May 22 07 03:24p

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

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

PWS Name:	Labrador Utilities Inc.	PWS Identification Number:	6514842
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:	1178	Total Population Served at End of Month:	2,356
PWS Owner:	Utilities Inc. of Florida		
Contact Person:	Patrick Flynn	Contact Person's Title:	Regional Director
Contact Person's Mailing Address:	200 Weathersfield	City:	Altamont Sprig State: Florida Zip Code: 32714
Contact Person's Telephone Number:	407-869-1919	Contact Person's Fax Number:	407-869-6961
Contact Person's E-Mail Address:	p.c.flynn@utilitiesinc-usa.com		

**B. Water Treatment Plant Information**

Plant Name:	Forest Lake Estates	Plant Telephone Number:	813-780-7364
Plant Address:	<del>One Stage Coach Lane</del> 41311 Paquette Way	City:	Zephyrhills State: Florida Zip Code: 33540
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:	564,000		
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>
Lead/Chief Operator:	Shantavious Rainey	C	14160
Other Operators:	Dave Shoffstall	C	7799
	<del>David Rodriguez</del> Keith Scheider	A-C	<del>8462-7888</del>

**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.

9.6.06  
 Signature and Date

Shantavious Rainey  
 Printed or Typed Name

67799 C-14160  
 License Number

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

PWS Identification Number: 6514842 Plant Name: Forest Lake Estates

II. 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 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	37000				1.5							0.7	
2	X	24.0	67000				1.1							0.5	
3	X	24.0	35000				1.2							1.0	
4	X	24.0	40000				1.2							1.0	
5	X	24.0	38000				1.2							0.8	
6		24.0	36000												
7	X	24.0	38000				1.8							0.6	
8	X	24.0	42000				1.2							0.7	
9	X	24.0	46000				1.6							0.6	
10	X	24.0	51000				1.0							0.5	
11	X	24.0	37000				1.2							0.5	
12	X	24.0	48000				1.1							0.5	
13		24.0	47000												
14	X	24.0	41000				0.4							0.5	
15	X	24.0	40000				2.5							0.5	
16	X	24.0	39000				2.0							0.8	
17	X	24.0	41000				1.1							0.7	
18	X	24.0	42000				1.0							0.6	
19	X	24.0	46000				1.1							0.6	
20		24.0	45000												
21	X	24.0	36000				1.2							0.6	
22	X	24.0	53000				1.2							0.6	
23	X	24.0	30000				1.2							0.6	
24	X	24.0	33000				1.0							0.6	
25	X	24.0	41000				1.2							0.6	
26	X	24.0	41000				1.5							0.6	
27		24.0	39000												
28	X	24.0	53000				1.1							0.6	
29	X	24.0	46000				1.0							0.5	
30	X	24.0	39000				1.0							0.5	
31	X	24.0	37000				1.2							0.5	
Total			1,293,000												
Average			42,000												
Maximum			67,000												

8137807364  
Utilities, Inc  
May 22 07 03:24P

\* Refer to the instructions for this report to determine which plants must provide this information.  
 DEP Form 82-596.000(9)  
 Effective August 28, 2003



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



FILE COPY

1093

General Information for the Month/Year of: Sept / 2006

Public Water System (PWS) Information

PWS Name:	Labrador Utilities Inc.	PWS Identification Number:	6514842
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:	1178	Total Population Served at End of Month:	2,356
PWS Owner:	Utilities Inc. of Florida		
Contact Person:	Patrick Flynn	Contact Person's Title:	Regional Director
Contact Person's Mailing Address:	200 Weathersfield	City:	Altamont Springs, Florida
Contact Person's Telephone Number:	407-869-1919	Contact Person's Fax Number:	407-869-6961
Contact Person's E-Mail Address:	p.c.flynn@utilitiesinc-usa.com		

Water Treatment Plant Information

Plant Name:	Forest Lake Estates	Plant Telephone Number:	813-780-7364
Plant Address:	<del>One Stage Coach Lane</del> 41311 Paquette Way	City:	Zephyrhills, 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:	564,000		
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:	Shantavious Rainey	C	14160	Days 1st Shift
Other Operators:	Dave Shoffstall	C	7799	Days 1st Shift
	<del>David Rodriguez</del> Keith Scheider	A C	<del>8162 4880</del>	Days 1st Shift

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.

*SR* 10/5/06  
Signature and Date

Shantavious Rainey  
Printed or Typed Name

6-7799 C-14160  
License Number

P. 2

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

PWS Identification Number: 6514842 Plant Name: Forest Lake Estates

### III. Daily Data for the Month/Year of:

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	38000		1.6							0.6	
2	X	24.0	66000		0.6							0.3	
3		24.0	67000										
4	X	24.0	49000		0.5							0.2	
5	X	24.0	37000		0.5							0.3	
6	X	24.0	57000		2.0							0.2	
7	X	24.0	59000		2.0							0.8	
8	X	24.0	37000		2.0							0.8	
9	X	24.0	48000		0.9							0.4	
10		24.0	70000										
11	X	24.0	57000		1.0							0.4	
12	X	24.0	29000		2.0							0.6	
13	X	24.0	38000		2.0							0.6	
14	X	24.0	45000		2.0							0.7	
15	X	24.0	46000		2.0							0.6	
16	X	24.0	42000		2.1							0.8	
17		24.0	41000										
18	X	24.0	57000		1.9							0.8	
19	X	24.0	51000		1.9							0.8	
20	X	24.0	43000		1.2							0.8	
21	X	24.0	43000		1.2							0.6	
22	X	24.0	66000		1.9							0.6	
23	X	24.0	50000		1.5							0.6	
24		24.0	48000										
25	X	24.0	65000		1.2							0.8	
26	X	24.0	37000		1.2							0.8	
27	X	24.0	43000		1.4							0.6	
28	X	24.0	52000		1.8							0.4	
29	X	24.0	47000		1.8							0.6	
30	X	24.0	63000		1.8							0.6	
31		24.0											
Total			1533000										
Average			51000										
Maximum			37000										

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

PLANT NAME: *Wade*  
 PLANT NO: *113*  
 REPORTING MONTH: *July*

UTILITIES INC.  
 WATER TREATMENT PLANT DAILY OPERATIONS WORKSHEET

DAY	# 1 METER (Log thousands)		# 2 METER (Log thousands)		TOTAL FLOW	Pump Run Hours #1 #2	CL <sub>2</sub> P.E.	CL <sub>2</sub> R.T.	2V Red Meter	ELECTRIC METER	KWH USED	GALS PER KWH	Page 1 of 2 FINAL pH Log Weekly
	READING	GALS	READING	GALS									
1	140234	41000	53238	10000	50000					8351			8351
2	140280	50000	53242	10000	46000		0.6	0.3		83271			83271
3		50000		11000	67								
4	140310	42000	53270	7000	49		0.5	0.2		83471			83471
5	140342	29000	53283	8000	37		0.2	0.3		83572			83572
6	140421	41000	53571	16000	57		2.0	0.2	311	83645			83645
7	140462	46000	53607	13000	59		2.0	0.8		83745			83745
8	140508	26000	53620	7000	33		2.0	0.8		83856			83856
9	140534	32000	53627	9000	41		0.9	0.4		83922			83922
10		31000		9000	40								
11	140592	41000	53645	16000	57		1.0	0.4		84074			84074
12	140633	23000	53661	6000	24		2.0	0.6		84174			84174
13	140656	28000	53667	11000	39		2.0	0.6		84232			84232
14	140684	23000	53678	12000	35		3.0	0.2		84301			84301
15	140721	36000	53690	10000	46000		2.0	0.6	0332	84395			84395
16	140757	32000	53702	10000	42000		2.1	0.8		84460			84460
17		31000		10000	41								
18	140820	44000	53720	13000	57		1.9	0.8	0341	84639			84639
19	140864	47000	53733	13000	57		1.9	0.8		84742			84742
20	140908	33000	53746	10000	43		1.2	0.8		84848			84848
21	140941	33000	53756	10000	43		1.2	0.6		84927			84927
22	140974	51000	53766	15000	66		1.9	0.6	352	85010			85010
23	141025	38000	53787	12000	50		1.5	0.6		85130			85130
24		37000		11000	48								
25	141100	50000	53804	15000	65000		1.2	0.8		85310			85310
26	141150	24000	53819	13000	37000		1.2	0.8		85481			85481
27	141174	33000	53826	10000	33		1.4	0.8	369	85488			85488
28	141207	40000	53836	12000	52		1.8	0.4		85571			85571
29	141247	32000	53848	12000	47		1.8	0.6		85669			85669
30	141282	49000	53860	14000	63		1.8	0.6		85838			85838
31		49000		14000	63								
2	141380		53888				1.5	0.8	385	86986			86986
TOTAL AVERAGE													

*(Handwritten mark)*

1532  
0.51

693

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

FILE COPY



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

A. Public Water System (PWS) Information

PWS Name:	Labrador Utilities Inc.		PWS Identification Number:	6514842
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:	1178		Total Population Served at End of Month:	2,356
PWS Owner:	Utilities Inc. of Florida			
Contact Person:	Patrick Flynn		Contact Person's Title:	Regional Director
Contact Person's Mailing Address:	200 Weathersfield	City:	Altamont Sprin	State: Florida Zip Code: 32714
Contact Person's Telephone Number:	407-869-1919		Contact Person's Fax Number:	407-869-6961
Contact Person's E-Mail Address:	p.c.flynn@utilitiesinc-usa.com			

B. Water Treatment Plant Information

Plant Name:	Forest Lake Estates		Plant Telephone Number:	813-780-7364
Plant Address:	<del>One Stage Coach Lane</del> 41311 Paquette Way	City:	Zephyrhills	State: Florida Zip Code: 33540
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:	564,000			
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:	Shantavious Rainey	C	14160	Days 1st Shift
Other Operators:	Dave Shoffstall	C	7799	Days 1st Shift
	David Rodriguez Keith Scheider	A-C	<del>8462 7880</del>	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]

Shantavious Rainey  
Printed or Typed Name

~~6-7799~~ C-14160  
License Number

7  
3

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

PWS Identification Number: 6514842 Plant Name: Forest Lake Estates

III. Daily Data for the Month of \_\_\_\_\_

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	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>			
1		24.0	61000		1.5							0.8	
2	X	24.0	65000		1.4							0.6	
3	X	24.0	44000		1.5							0.6	
4	X	24.0	49000		1.6							0.6	
5	X	24.0	63000		1.5							0.6	
6	X	24.0	44000		1.4							0.5	
7	X	24.0	67000										
8		24.0	66000		1.6							0.6	
9	X	24.0	64000		1.4							0.5	
10	X	24.0	54000		1.5							0.6	
11	X	24.0	63000		1.6							0.5	
12	X	24.0	52000		1.4							0.4	
13	X	24.0	54000		1.9							0.5	
14	X	24.0	61000										
15		24.0	61000		1.3							0.5	
16	X	24.0	74000		1.2							0.5	
17	X	24.0	91000		1.0							0.6	
18	X	24.0	70000		1.2							0.6	
19	X	24.0	80000		1.5							0.6	
20	X	24.0	66000		1.6							0.6	
21	X	24.0	64000										
22		24.0	63000		1.8							0.6	
23	X	24.0	67000		1.8							0.8	
24	X	24.0	76000		1.8							1.0	
25	X	24.0	65000		1.5							1.0	
26	X	24.0	58000		1.6							1.0	
27	X	24.0	60000		1.6							1.0	
28	X	24.0	74000										
29		24.0	74000		1.2							1.0	
30	X	24.0	59000		1.6							1.0	
31	X	24.0	60000		1.2							0.8	
Total			1,959										
Average			0.059										
Maximum			0.091										

\* Refer to the instructions for this report to determine which plants must provide this information.  
 DEP Form 62-656 600(3)  
 Effective August 28, 2003

PLANT NAME:

Labrador

PLANT NO:

093

UTILITIES INC.

REPORTING MONTH:

Oct 2006

WATER TREATMENT PLANT DAILY OPERATIONS WORKSHEET

Page 1 of 2

DAY	# 1 METER (Log thousands)		# 2 METER (Log thousands)		TOTAL FLOW	Pump Run Hours #1 #2	CL <sub>2</sub> P.E.	CL <sub>2</sub> R.T.	ELECTRIC METER	KW/H USED	GAL'S P/R KWH	FINAL pH Log Weekly
	READING	GALS	READING	GALS								
1	141282		53860		61000							
2	141380	50000	53888	15000	65000		1.5	0.8	385	85986		@ C14160
3	141430	30000	53903	10000	44000		1.4	0.6		86108		@ C14160
4	141464	37000	53913	12000	49000		1.5	0.6	375	86193		@ C14160
5	141501	44000	53925	14000	53000		1.6	0.6		86283		@ C14160
6	141550	34000	53937	10000	44000		1.5	0.6		86369		@ C14160
7	141524	48000	53949	17000	67000		1.4	0.5		86480		@ C14160
8		48000		18000	66000							RES C-7799
9	141610	49000	53978	15000	64000		1.6	0.6	419	86710		@ C14160
10	141729	42000	53993	12000	54000		1.4	0.5		86827		@ C14160
11	141771	43000	54005	14000	60000		1.5	0.6		86931		@ C14160
12	141814	45000	54024	13000	65000		1.6	0.5		87034		@ C14160
13	141837	41000	54037	13000	54000		1.4	0.4		87142		@ C14160
14	141900	41000	54050	14000	61000		1.4	0.5		87242		@ C14160
15		47000		14000	61000							@ C14160
16	141994	57000	54078	17000	74000		1.3	0.5		87468		@ C14160
17	142051	70000	54095	21000	91000		1.7	1.5		87604		C7959
18	142121	49000	54110	21000	70000		1.0	0.6	4102	87724		@ C14160
19	142170	62000	54132	18000	80000		1.8	0.6		87886		@ C14160
20	142232	57000	54155	15000	69000		1.5	0.6		88031		@ C14160
21	142281	49000	54170	15000	64000		1.6	0.6		88141		@ C14160
22		49000		14000	63000							@ C14160
23	142379	51000	54199	16000	67000		1.8	0.6	487	88372		@ C14160
24	142433	39000	54215	17000	76000		1.8	0.8		88494		@ C14160
25	142492	60000	54232	32000	85000		1.8	1.0		88642		@ C14160
26	142552	45000	54257	13000	58000		1.5	1.0		88788		@ C14160
27	142597	41000	54270	14000	60000		1.6	1.0				@ C14160
28	142643	57000	54284	17000	74000		1.6	1.0		89004		@ C14160
29		57000		17000	74000							@ C14160
30	142737	45000	54318	14000	59000		1.2	1.0	542	89282		@ C14160
31	142778	64000	54352	20000	89000		1.6	1.0		89390		@ C14160
1	142871		54352				1.2	0.8		89543		@ C14160
2												
TOTAL					4374					1.959		
AVERAGE					0.001					0.059		

0.059

1.959



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

**FILE COPY**

673

Jan 22 07 11:18a Utilities, Inc 8137807364 P.2

**I. General Information for the Month Year of:** 12/ 2006

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

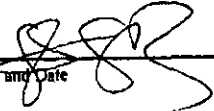
PWS Name:	Labrador Utilities Inc.			PWS Identification Number:	6514842
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	1178			Total Population Served at End of Month:	2,356
PWS Owner:	Utilities Inc. of Florida				
Contact Person:	Patrick Flynn			Contact Person's Title:	Regional Director
Contact Person's Mailing Address:	200 Weathersfield	City:	Altamont Spring	State:	Florida
Contact Person's Telephone Number:	407-869-1919			Zip Code:	32714
Contact Person's E-Mail Address:	p.flynn@utilitiesinc-usa.com				
Contact Person's Fax Number:	407-869-6961				

**B. Water Treatment Plant Information**

Plant Name:	Forest Lake Estates			Plant Telephone Number:	813-780-7364
Plant Address:	4131 Paquette Way	City:	Zephyrhills	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:	564,000				
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:	Shantavious Rainey	C	14160	Days 1st Shift	
Other Operators:	Dave Shoffstall	C	7799	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:  12-06-06

Shantavious Rainey  
Printed or Typed Name

C-14160  
License Number

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

PWS Identification Number: 8514842 Plant Name: Labrador/Forest Lakes Estates

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

Mean 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 Demonstrate Four-Log Virus Inactivation, if Applicable\*

CT Calculations

UV Dose

Day of the Month	Days Staffed or Visited by Operator (Place "X")	Plant Hours in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Residual Disinfection Concentration (C) Before or at First Customer Peak Flow, mg/L	Disinfection Contact Time (T) at C Measurement Point During Peak Flow, minutes	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/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Residual Disinfectant Concentration at Remote Distribution Point, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water Components Out of Operation	
															CT Calculations
1	X	24	88000		1.5								0.8		
2	X	24	89000		1.2								0.8		
3	X	24	72000		1.8								0.8		
4	X	24	88000		1.2								0.8		
5	X	24	89000												
6	X	24	83000		1.2								0.8		
7	X	24	89000		1.2								0.8		
8	X	24	79000		1.2								1.0		
9	X	24	125000		1.2								0.8		
10	X	24	89000		1.0								0.8		
11	X	24	78000		1.1								0.8		
12	X	24	79000												
13	X	24	118000		1.1								0.8		
14	X	24	89000		1.0								0.8		
15	X	24	89000		1.1								0.8		
16	X	24	89000		1.1								0.8		
17	X	24	109000		1.2								0.8		
18	X	24	79000		1.1								0.8		
19	X	24	79000												
20	X	24	89000		1.1								0.7		
21	X	24	89000		1.1								0.8		
22	X	24	89000		1.2								0.8		
23	X	24	118000		1.3								0.8		
24	X	24	89000		1.2								0.8		
25	X	24	89000		1.2								0.8		
26	X	24	89000												
27	X	24	89000		1.2								0.8		
28	X	24	82000		1.3								0.8		
29	X	24	82000		1.8								0.8		
30	X	24	81000		1.3								0.8		
31															
<b>Total</b>			2678000												
<b>Average</b>			86000												
<b>Maximum</b>			128000												

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

p.3  
8137807364  
Utilities, Inc  
Dec 06 06 12:05p





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

FILE COPY

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

A. Public Water System (PWS) Information

PWS Name: Labrador Utilities Inc. PWS Identification Number: 6514842
PWS Type: Community
Number of Service Connections at End of Month: 1178 Total Population Served at End of Month: 2,356
PWS Owner: Utilities Inc. of Florida
Contact Person: Patrick Flynn Contact Person's Title: Regional Director
Contact Person's Mailing Address: 200 Weathersfield City: Altamont Sprin State: Florida Zip Code: 32714
Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961
Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com

B. Water Treatment Plant Information

Plant Name: Forest Lake Estates Plant Telephone Number: 813-780-7364
Plant Address: 4131 Paquette Way City: Zephyrhills State: Florida Zip Code: 33540
Type of Water Treatment by Plant: Raw Ground Water
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 564,000
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 table with columns: Name, License Class, License Number, Day(s) / Shift(s) Worked.
Lead/Chief Operator: Shantavious Rainey License Class: C License Number: 14160 Days 1st Shift
Other Operators: Dave Shoffstall License Class: C License Number: 7799 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 1 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: [Signature] 12/06

Shantavious Rainey
Printed or Typed Name

C-14160
License Number

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

PWS Identification Number: 6514842 Plant Name: Labrador/Forest Lakes Estates

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

Mean 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 Demonstrate Four-Log Virus Inactivation, if Applicable*											
				CT Calculations					UV Dose						
Day of the Month	Days Staffed or Visited by Operator (Place "X")	Plant Hours in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Residual Disinfection Concentration (C) Before or at First Customer Point During Peak Flow, mg/L	Disinfection Contact Time (T) at C Measurement Point During Peak Flow, minutes	Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum of CT Required, mg/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2	Residual Disinfection Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that involves Taking Water Components Out of Operation.	
1	x	24	85000		1.5								0.8		
2	x	24	81000		1.3								0.8		
3		24	81000												
4	x	24	82000		1.3								0.6		
5	x	24	126000		1.5								0.8		
6	x	24	125000		1.6								0.6		
7	x	24	68000		1.6								0.8		
8	x	24	102000		1.1								0.6		
9	x	24	70000		1.2								0.6		
10		24	69000												
11	x	24	103000		1.1								0.6		
12	x	24	69000		1.3								0.8		
13	x	24	74000		1.0								0.5		
14	x	24	82000		1.3								0.6		
15	x	24	94000		1.4								0.6		
16	x	24	78000		1.1								0.6		
17		24	77000												
18	x	24	64000		1.1								0.8		
19	x	24	80000		1.1								0.6		
20	x	24	103000		1.3								0.8		
21	x	24	91000		1.6								0.6		
22	x	24	82000		1.3								0.8		
23	x	24	81000		1.6								1.0		
24		24	80000												
25	x	24	51000		1.1								0.6		
26	x	24	110000		1.3								0.6		
27	x	24	83000		1.3								0.6		
28	x	24	87000		1.2								0.5		
29	x	24	94000		1.2								0.6		
30	x	24	92000		1.2								0.8		
31		24	92000												
Total			2684000												
Average			86600												
Maximum			126000												

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

Jan 22 07 11:18a Utilities, Inc 8137807364 P.4

# LABRADOR/FOREST LAKE ESTATES (693) WTP DAILY OPERATIONS LOG

MONTH: *December*

YEAR: *2006*

Jan 22 07 11:19a

Utilities, Inc

8137807364

P.6

Date	Well Meter Readings				Total Flow	RV Park Meter		CL2 Readings		Electric Meter	KWH Used	Operator
	Well #1 Meter Reading		Well #2 Meter Reading			Total Volume	Interval Volume	Point of Entry	Remote Tap			
Pervious Day	54985	Interval Volume	144736	Interval Volume								
1	54906	25000	144796	60000	85000			1.5	0.8			① C14160
2	55031	21000	144889	60000	81000			1.3	0.6			
3	<del>55031</del>	21000	<del>144889</del>	60000	81000							
4	55073	18000	145030	64000	83000			1.3	0.6	94557		① C14160
5	55091	29000	145094	97000	126000			1.5	0.6	94702		① C14160
6	55120	21000	145191	104000	125000	925		1.6	0.6	94926		① C14160
7	55161	15000	145295	51000	66000			1.6	0.6	94955		① C14160
8	55176	23000	145346	79000	102000			1.1	0.6	95377		① C14160
9	55199	16000	145429	54000	70000			1.2	0.6	95463		C-7799 DE5
10		15000		54000	80000							
11	55232	23000	145533	80000	103000			1.1	0.6	95729		① C14160
12	55255	15000	145613	54000	69000			1.3	0.8	95909		① C14160
13	55270	21000	145667	33000	74000	1012		1.0	0.5	96033		① C14160
14	55291	19000	145720	63000	82000			1.3	0.6	96153		① C14160
15	55310	20000	145783	74000	94000	1028		1.4	1.1	96299		① C14160
16	55330	19000	145857	59000	78000			1.1	0.6	96480		① C14160
17		18000		59000	77000							
18	55367	21000	145975	63000	84000	1055		1.1	0.6	96739		① C14160
19	55388	16000	146038	64000	80000			1.1	0.6	96901		① C14160
20	55404	20000	146102	72000	103000	1071		1.3	0.6	97027		① C14160
21	55434	20000	146174	71000	91000			1.6	0.6	97179		① C14160
22	55454	21000	146245	71000	92000			1.3	0.8	97327		① C14160
23	55475	19000	146316	62000	81000			1.6	1.0	97480		① C14160
24		18000		62000	80000							
25	55512	12000	146440	39000	51000			1.1	0.6	97744		① C14160
26	55524	31000	146479	79000	110000			1.3	1.6	97827		① C14160
27	55555	19000	146558	64000	83000			1.3	0.6	97998		C14426 RB
28	55574	20000	146622	67000	87000			1.2	0.5	98132		C14426 RB
29	55594	21000	146689	73000	94000			1.2	0.6	98275		① C14160
30	55613	21000	146762	71000	92000			1.2	0.6	98427		C-7799 DE5
31	55614	21000	146833	71000	92000			1				
Total												
Mo. Avg.												

1/1/07 55657  
 1/2/07 55672

146904  
 146952

① 1.1/0.6 98726  
 1.0/1.0 98827

C-7799 DE5

20

2006

**DISCHARGE MONITORING REPORTS**

FILE COPY

693

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

PERMITTEE NAME: Latorator ENKales, Inc.  
 MAILING ADDRESS: 200 WootenGold Avenue  
 Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012801

LIMIT: Final  
 CLASS SIZE: N/A

REPORT GROUP: Monthly Domestic

FACILITY: Forest Lake Station WWTW  
 LOCATION: 41311 Piquette Way  
 Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: R-001, Including Influent

COUNTY: Pasco

NO DISCHARGE FROM SITE:   
 MONITORING PERIOD From: Jan 01 2006 To Jan 31 2006

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analyte	Sample Type
Flow, to R-001	Sample Measurement	0.119	MGD				Monthly	Calculation
PARAM Code 80091 Mon. No. 80091	Permit Measurement	0.210 (Max)	MGD				Monthly	Calculation
Flow, to R-001	Sample Measurement	0.210	MGD				5 Days/Wk	Flow meter & calculations
PARAM Code 80092 Mon. No. 80092	Permit Measurement	Report (Max Ave)	MGD				5 Days/Wk	Flow meter and calculations
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.5	MG/L	0	Monthly	Calculation
PARAM Code 80087 Mon. No. 80087	Permit Measurement			2.0 (Max)	MG/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.3	MG/L	0	Every Two Wks	8hr FPC
PARAM Code 80088 Mon. No. 80088	Permit Measurement			2.0 (Max Ave)	MG/L		Every Two Wks	8hr FPC
Solids, Total Suspended	Sample Measurement			<2.0	MG/L	0	Monthly	Calculation
PARAM Code 80031 Mon. No. 80031	Permit Measurement			2.0 (Max Ave)	MG/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			<2.0	MG/L	0	Every Two Wks	8hr FPC
PARAM Code 00530 Mon. No. 00530	Permit Measurement			2.0 (Max Ave)	MG/L		Every Two Wks	8hr FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Shantavious S. Rainey Lead Operator		(813) 780-7364	06/02/16

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Forest Lake Estuary WWTF  
County: Passaic

MONITORING GROUP NUMBER: R-005  
MONITORING PERIOD From: Jan 01 2006 To: Jan 31 2006

PERMIT NUMBER: FLA012801

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Bx.	Frequency of Analysis	Sample Type
pH	Sample Measurement			6.8	7.4		SD	0	5 Days/WK	Grab
PARM Code 80400 A Mon. Site No. BFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)		SD		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.0			#/100ML	0	Monthly	Calculation
PARM Code 74055 Y Mon. Site No. BFA-01	Permit Requirement			200 (An. Avg.)			#/100ML		Monthly	Calculation
Coliform, Fecal	Sample Measurement			1.0	100	<1.0	#/100ML	0	Every 2 Wks	Grab
PARM Code 74055 X Mon. Site No. BFA-01	Permit Requirement			Report (Mo. Geo. Mean)	400 (90%)	900 (95%)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			1.7			MG/L	0	5 Days/WK	Grab
PARM Code 50060 A Mon. Site No. BFA-01	Permit Requirement			0.5 (Min.)			MG/L		5 Days/Week	Grab
Sledge Production, Total	Sample Measurement	0					Gallons	0	Monthly	Calculation
PARM Code 49419 P Mon. Site No. OTH-01	Permit Requirement	Report (Mo. Total)					Gallons		Monthly	Calculation
Flow, total plant	Sample Measurement	0.130	MGD					0	Monthly	Calculation
PARM Code 50050 P Mon. Site No. FLW-01	Permit Requirement	0.216 (3MADP)	MGD						Monthly	Calculation
Percent Capacity (3MADP/Permitted Capacity) x 100	Sample Measurement			83			%	0	Monthly	Calculation
PARM Code 00180 I Mon. Site No. FLW-01	Permit Requirement			Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 30C	Sample Measurement			465			MG/L	0	Every 2 Wks	8-hr FPC
PARM Code 80082 G Mon. Site No. INT-01	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			1383			MG/L	0	Every 2 Wks	8-hr FPC
PARM Code 00530 G Mon. Site No. INT-01	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
	Sample Measurement									
	Permit Requirement									

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PAGE 03/04  
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GARTH A  
CYPRESS LAKE

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Feb 16 06 01:57P

DAILY SAMPLE RESULTS - PART B

Plant Number: FLA012801 From: Jan-01-2006 To: Jan-31-2006 Facility: Forest Lake Estates WWTF County: Pasco

Code	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100mL)	pH (SU)	pH (SA)	TRC (For Disinfect.) (mg/L)	Sledge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTM-01	INF-01	INF-01
1	0.214									
2	0.212				6.8		3.8			
3	0.237	3.0	<2.0	<1.0	7.4		3.8		1100	3700
4	0.231				6.9		1.7			
5	0.224				6.9		2.0			
6	0.223				7.0		3.7			
7	0.196									
8	0.211									
9	0.198				6.9		5.0			
10	0.216				6.9		5.0			
11	0.225				7.0		3.4			
12	0.240				6.9		5.0			
13	0.215				7.0		5.0			
14	0.191									
15	0.202									
16	0.202				7.0		5.0			
17	0.260				6.9		5.0			
18	0.199	<2.0	<2.0	<1.0	7.0		2.8		1100	250
19	0.233				6.8		3.0			
20	0.199				7.0		4.6			
21	0.229									
22	0.247									
23	0.243				7.0		3.0			
24	0.269				7.2		2.6			
25	0.125				6.8		5.7			
26	0.173				6.9		4.5			
27	0.227				7.0		3.2			
28	0.221									
29	0.297									
30	0.195				7.1		5.0			
31	0.250	<2.0	<2.0	<1.0	7.0		4.7		94	200
Total	6.809	3	3	3	22		22		3	3
Mo. Avg	0.220	2.3	<2.0	<1.0	7.0		4.0		465	1383

PLANT STAFFING:  
 Day Shift Operator  
 Evening Shift Operator  
 Night Shift Operator  
 Lead Operator

Class: A Certificate No: 9139 Name: David Rodriguez  
 Class: C Certificate No: 8045 Name: David Shoffstall  
 Class: C Certificate No: 9767 Name: Keith Schneider  
 Class: C Certificate No: 12994 Name: Shantavious Rainey

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT

FILE COPY

When Completed mail this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, M8 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Labrador Utilities, Inc.  
 MAILING ADDRESS: 200 Weatherfield Avenue  
 Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012401

LIMIT: Plant  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

FACILITY: Forest Lake Estates WWTP  
 LOCATION: 41311 Paquette Way  
 Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: R-001, including Influent

603

COUNTY: Pasco

NO DISCHARGE FROM SITE:   
 MONITORING PERIOD From: Feb 01 2006 To: Feb 28 2006

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Bx.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.49, 1.22	MGD			0	Monthly	Calculation
PARM Code 00090 Y Mon. Site No. FLW-01	Permit Requirement	0.275 (AAD)	MGD				Monthly	Calculation
Flow, to R-001	Sample Measurement	0.330	MGD			0	5 Days/Week	Flow meters & totalizers
PARM Code 00090 1 Mon. Site No. FLW-01	Permit Requirement (Mo. Avg.)	Report	MGD				5 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.5	MG/L	0	Monthly	Calculation
PARM Code 00082 Y Mon. Site No. BPA-01	Permit Requirement			20.0 (Mo. Avg.)	MG/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			<2.0	MG/L	0	Every 2 Weeks	8-hour FPC
PARM Code 00082 A Mon. Site No. BPA-01	Permit Requirement			30.0 (Mo. Avg.) 60.0 (Max.)	MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			2.7	MG/L	0	Monthly	Calculation
PARM Code 00090 Y Mon. Site No. BPA-01	Permit Requirement			20.0 (Mo. Avg.)	MG/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			10.0	MG/L	0	Every 2 Weeks	8-hour FPC
PARM Code 00090 A Mon. Site No. BPA-01	Permit Requirement			30.0 (Mo. Avg.) 60.0 (Max.)	MG/L		Every Two Weeks	8-hour FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMM/DD)
Shantavious S. Rainey / Lead Operator		(813) 760-7344 (813) 946-9850	2006/03/20

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



DISCHARGE MONITORING REPORT - PART A (CONTINUED)

FACILITY: Forest Lake Estates WWTF  
 County: Prince

MONITORING GROUP NUMBER: R-00  
 MONITORING PERIOD From: FEB 01 2006 To: FEB 28 2006

PERMIT NUMBER: PA 012801  
 FEB 28 2006

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement			6.7	7.2		SU	0	5 Days/Week	Grab
	Permit Requirement			6.0 (Min.)	8.5 (Max.)		SU		3 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.0			#/100ML	0	Monthly	Calculation
	Permit Requirement			200 (MAX.AVG.)			#/100ML		Monthly	Calculation
Coliform, Fecal	Sample Measurement			1.0	100	1.0	#/100ML	0	Every 2 Weeks	Grab
	Permit Requirement			Report (Mo. Occ. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			1.1			MG/L	0	5 Days/Week	Grab
	Permit Requirement			0.5 (Min.)			MG/L		3 Days/Week	Grab
Sludge Production, Total	Sample Measurement	37500					Gallons	0	Monthly	Calculation
	Permit Requirement	Report (Mo. Total)					Gallons		Monthly	Calculation
Flux, total (ft <sup>3</sup> /day)	Sample Measurement	0.206	MGD					0	Monthly	Calculation
	Permit Requirement	0.216 (3MADF)	MGD						Monthly	Calculation
Percent Capacity: (3MADF/Permitted Capacity) x 100	Sample Measurement			95			%	0	Monthly	Calculation
	Permit Requirement			Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			150			MG/L	0	Every 2 Weeks	8-hour FPC
	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			100			MG/L	0	Every 2 Weeks	8-hour FPC
	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
	Sample Measurement									
	Permit Requirement									

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GARTH A

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DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA012801

From: EPA-01-2006

To: Feb-28-2006

Facility: Forest Lake Estates WWTF  
County: Pasco

Code	Flow (MG/D) R-DM)	CBOD5 (mg/l.)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml.)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/l.)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
on. Site	FLW-01	EFA-01	FFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	.231				6.8		4.5			
2	.246				6.9		4.2	18750		
3	<del>.275</del> .177				7.0		2.8	6250		
4	<del>.248</del> .264				6.8		2.0	12500		
5	.260									
6	.237				7.1		2.8			
7	.248				6.8		2.6			
8	.296				6.9		2.0			
9	.238				7.0		3.2			
10	<del>.252</del> .184				6.8		2.8			
11	<del>.205</del> .206									
12	.269				6.8		3.0			
13	.196				7.2		4.1			
14	.204	<2.0	10.0	<1.0	6.7		4.5		150	100
15	.278				6.9		4.0			
16	.247				7.0		7.2			
17	.274				7.1		3.3			
18	<del>.236</del> .237				7.0		2.8			
19	<del>.250</del> .251									
20	.232				7.1		1.2			
21	.230				7.0		1.6			
22	.249				7.1		1.4			
23	.265				7.0		1.4			
24	.210				6.9		1.4			
25	.078				6.9		1.8			
26	.138									
27	.223				6.9		1.6			
28	.244				6.7		1.1			
29										
30										
31										
Total	6.444	1	1	1	24		24	3	1	1
Mo. Avg	.230	<2.0	10.0	<1.0	6.9		2.8	37500	150	100

PLANT STAFFING:

Day Shift Operator	Class: <u>C</u>	Certificate No: <u>12994</u>	Name: <u>Shantarius S. Rainey</u>
Evening Shift Operator	Class: <u>C</u>	Certificate No: <u>8045</u>	Name: <u>David Shoffstall</u>
Night Shift Operator	Class: <u>C</u>	Certificate No: <u>9767</u>	Name: <u>Keith Schneider</u>
Lead Operator	Class: <u>C</u>	Certificate No: <u>12994</u>	Name: <u>Shantarius S. Rainey</u>



DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT FORM

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

PERMITTEE NAME: Labrador Utilities, Inc.  
 MAILING ADDRESS: 200 Weatherfield Avenue  
 Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012801

LIMIT: Final  
 CLASS SIZE: N/A

REPORT GROUP: Monthly Domestic

FACILITY: Forest Lake Estates WWTF  
 LOCATION: 41311 Paqueta Way  
 Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DBSC: R-001, including influent

COUNTY: Pasco

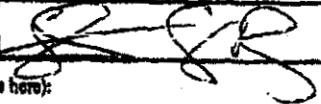
NO DISCHARGE FROM SITE:   
 MONITORING PERIOD From: March - 01 - 2006 to March - 31 - 2006

FILE COPY

693

Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	0.125	MGD			0	Monthly	Calculation
PARM Code 50050 Y Mon. Site No. FLW-01	0.215 (AAD)	MGD				Monthly	Calculation
Flow, to R-001	0.239	MGD			0	5 Days/Week	Flow meters & totalizers
PARM Code 50050 I Mon. Site No. FLW-01	Report (Mo. Avg.)	MGD				3 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C			2.7		0	Monthly	Calculation
PARM Code 80082 Y Mon. Site No. BFA-01			20.0 (Mo. Avg.)			Monthly	Calculation
BOD, Carbonaceous 5 day, 20C			4.2	8.6	0	Every 2 Wks	8-hr FPL
PARM Code 80082 A Mon. Site No. BFA-01			30.0 (Mo. Avg.)	60.0 (Max.)		Every Two Weeks	8-hour FPL
Solids, Total Suspended			3.4		0	Monthly	Calculation
PARM Code 00330 Y Mon. Site No. BFA-01			20.0 (Mo. Avg.)			Monthly	Calculation
Solids, Total Suspended			11.3	18.0	0	Every 2 Wks	8-hr FPL
PARM Code 00330 A Mon. Site No. BFA-01			30.0 (Mo. Avg.)	60.0 (Max.)		Every Two Weeks	8-hour FPL

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMMDD)
Spontaneous S. Runney / Lead Operator		407-948-4833	06/04/24

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Forest Lake Estates WWTP  
 County: Precinct

MONITORING GROUP NUMBER: R-001  
 MONITORING PERIOD From: March 01 2006 To: March 31 2006

PERMIT NUMBER: FLA012801

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Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Bx.	Frequency of Analysis	Sample Type
pH	Sample Measurement			7.0	7.5		SU	0	5 Days/Wk	Grab
	Permit Requirement			6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
PARM Code 00400 A Mon. Site No. BFA-01 Coliform, Fecal	Sample Measurement			10			#/100ML	0	Monthly	Calculation
	Permit Requirement			200 (An.Avg)			#/100ML		Monthly	Calculation
PARM Code 74055 Y Mon. Site No. BFA-01 Coliform, Fecal	Sample Measurement			10	100	<10	#/100ML	0	Every 2 Wks	Grab
	Permit Requirement			Report (Mo. Avg. Mean)	100 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection) PARM Code 50060 A Mon. Site No. BFA-01	Sample Measurement			1.4			MG/L	0	5 Days/Wk	Grab
	Permit Requirement			0.5 (Min.)			MG/L		5 Days/Week	Grab
Sludge Production, Total PARM Code 49119 P Mon. Site No. OT11-01	Sample Measurement	37500					Gallons	0	Monthly	Calculation
	Permit Requirement	Report (Mo. Total)					Gallons		Monthly	Calculation
Flow, total plant PARM Code 30050 P Mon. Site No. FLW-01	Sample Measurement	0.230	MGD					0	Monthly	Calculation
	Permit Requirement	0.216 (MADP)	MGD						Monthly	Calculation
Percent Capacity, (MADP/Permitted Capacity) x 100 PARM Code 00180 I Mon. Site No. PLW-01	Sample Measurement			106			%	0	Monthly	Calculation
	Permit Requirement			Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C PARM Code 80082 G Mon. Site No. INF-01	Sample Measurement			290			MG/L	0	Every 2 Wks	8-hr FPL
	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPL
Solids, Total Suspended PARM Code 00530 G Mon. Site No. INF-01	Sample Measurement			143			MG/L	0	Every 2 Wks	8-hr FPL
	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPL
	Sample Measurement									
	Permit Requirement									

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DAILY SAMPLE RESULTS - PART B

Report Number:  
Monitoring Period:

FLA012801  
From: March 01 2006 To: March 31 2006

Facility: Forest Lake Estates WWTF  
County: Pasco

Code	Flow (MGD) R-001	CBOCS (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SI)	TKF (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOCS (mg/L)	TSS (mg/L)
	50050	30012	00530	74053	00406	00406	30060	49019	30012	00530
on Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	0.210	<2.0	14.0	<1.0	7.1		4.5	12500	440	140
2	0.241				7.0		3.2			
3	0.239				7.0		2.5			
4	0.208				7.0		2.8			
5	0.260									
6	0.248				7.0		2.5			
7	0.249				7.1		2.6	16750		
8	0.202				7.1		2.6	6250		
9	0.239				7.1		2.5			
10	0.258				7.2		3.8			
11	0.247				7.2		2.9			
12	0.290									
13	0.248				7.5		1.6			
14	0.284				7.1		2.0			
15	0.218	8.6	18.0	<1.0	7.0		2.2		210	110
16	0.267				7.1		2.1			
17	0.273				7.1		2.3			
18	0.264									
19	0.245									
20	0.234				7.1		2.0			
21	0.234				7.4		1.4			
22	0.234				7.3		1.6			
23	0.233				7.3		1.8			
24	0.231				7.3		1.9			
25	0.214									
26	0.234									
27	0.240				7.5		1.4			
28	0.206				7.2		1.6		220	180
29	0.222	<2.0	<2.0	<1.0	7.2		1.8			
30	0.190				7.3		1.8			
31	0.233				7.4		1.8			
	0.238				7.4		1.4			
Total	7.404	3	3	3	25		25	3	3	3
Mo. Avg.	0.239	4.2	11.3	21.0	7.2		2.3	37500	290	143

PLANT STAFFING:  
Day Shift Operator  
Evening Shift Operator  
Night Shift Operator  
Lead Operator

Class: C Certificate No: 12994 Name:  
Class: C Certificate No: 8045 Name:  
Class: C Certificate No: 9767 Name:  
Class: C Certificate No: 12994 Name:

Shantarius S. Rainey  
David Sheffall  
Keith Schneider  
Shantarius S. Rainey

LABRADOR WWTP

MONTH: MARCH YEAR: 2000

DATE	TIME	FLOW METER		PH	CHLORINE				SPRAYFIELD		EFFLUENT PUMPS			SLUDGE JUDGE			SETTLABILITY			CR	
		Total Volume	Excess Volume		Infl.	Effl.	Tank #	Tank Size	Dose	Resid.	Mubar. Resid.	Run hrs	#1	#2	Run hrs	#1	#2	#3			
1	0	7106208	0.210	7.6	7.1	450	455	10	1.5	302338	1005	675.4	12.8	844.2	8.2	/	/	/	/	/	RS
2	0	7142438	0.241	7.6	7.0	445	450	15	3.2	302342		687.2	7.2	852.4	8.9	/	/	/	/	/	RS
3	0	7154281	0.239	7.6	7.0	440	440	10	2.5			704.8	7.4	865.4	10.5	/	/	/	/	/	RS
4	0	7175107	0.208	7.6	7.0	435	435		2.8				8.4			10.4	/	/	/	/	RS
5		7200748	0.160																		RS
6	0	7225926	0.246	7.4	7.0	425	425	15	2.5	300561		720.6	8.1	889.3	10.1	/	/	/	/	/	RS
7	0	7250848	0.249	7.2	7.1	425	405	20	3.4			12728.7	15.5	11049.4	8.4	/	/	/	/	/	RS
8	0	7271070	0.201	7.2	7.1	420	410	15	2.6	308346		12744.2	6.6	11067.8	6.7	/	/	/	/	/	RS
9	0	72750137	0.237	7.5	7.1	410	385	10	2.5			12744.2	6.6	11144.5	8.1	/	/	/	/	/	RS
10	0	7310805	0.258	7.4	7.2	400	385	15	3.8			13750.2	2.6	11932.6	5.3	/	/	/	/	/	RS
11	0	7315574	0.241	7.4	7.2	370	380		2.9			12755.8	8.1	11727.9	5.2	/	/	/	/	/	RS
12		7346376	0.210																		RS
13	0	7374805	0.248	7.1	7.5	375	360	10	1.6	312737		12760.0	7.1	11938.4	2.9	/	/	/	/	/	RS
14	0	7427778	0.281	7.1	7.1	370	355	10	2.0			12773.1	6.4	11741.3	2.7	/	/	/	/	/	RS
15	0	74447585	0.218	7.3	7.0	365	350	10	2.2			12774.5	10.0	11944.0	1.4	/	/	/	/	/	RS
16	0	74765440	0.267	7.4	7.1	360	345	10	2.1	315470		12789.5	7.7	11945.4	6.8	/	/	/	/	/	RS
17	0	75073425	0.273	7.4	7.1	355	340		2.3			12792.2	7.7	12000.2	4.6	/	/	/	/	/	RS
18	0	7530264	0.264										4.4			4.7	/	/	/	/	RS
19		75547042	0.245										4.4			4.6	/	/	/	/	RS
20	0	75781357	0.234	7.4	7.1	330	315	10	2.0	319240	418	12810.5	5.6	11966.2	5.3	/	/	/	/	/	RS
21	0	76020214	0.232	7.2	7.4	325	310		1.4	320158	831	12816.1	4.2	11971.5	4.8	/	/	/	/	/	RS
22	0	76253809	0.233	7.2	7.3	320	295		1.6	320487	777	12822.3	4.4	11976.3	4.4	/	/	/	/	/	RS
23	0	76485528	0.231	7.3	7.3	315	290		1.8	321466	879	12827.7	5.0	11980.7	5.6	/	/	/	/	/	RS
24	0	76694828	0.214	7.2	7.3	315	275		1.9	322645	821	12829.7	4.4	11986.3	4.3	/	/	/	/	/	RS
25	0	76934324	0.234									821	4.4		4.4	/	/	/	/	/	RS
26		77074490	0.240									821	4.4		4.4	/	/	/	/	/	RS
27	0	77380858	0.206	7.4	7.5	300	285		2.7	323108	804	12842.7	4.7	11990.3	2.1	/	/	/	/	/	RS
28	0	77602782	0.222	7.2	7.2	295	280		1.6	323714	815	12847.6	4.3	12001.7	4.4	/	/	/	/	/	RS
29	0	77770813	0.190	7.4	7.3	290	275		1.8	326071	800	12851.9	4.1	12006.8	4.4	/	/	/	/	/	RS
30	0	78080038	0.233	7.3	7.4	280	270		1.8	327609	716	12856.0	5.2	12013.2	4.7	/	/	/	/	/	RS
31	0	782408677	0.238	7.2	7.4	275	270		1.4	328325		12861.2		12017.9		/	/	/	/	/	RS
Total				7.404		7.5			1.4												
Avg. Avg.				0.231																	

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APR 28 06 10:49a

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - TABLE

075

When Completed mail this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32309-2400

PERMITTEE NAME: Labrador Utilities, Inc.  
MAILING ADDRESS: 200 Weathersfield Avenue  
Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012801

LIMIT: Final  
CLASS SIZE: N/A

REPORT GROUP: Monthly Domestic

FILE COPY

FACILITY: Forest Lake Estates WWTP  
LOCATION: 41311 Paquette Way  
Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESC: R-001, including Influent

COUNTY: Pasco

NO DISCHARGE FROM SITE:   
MONITORING PERIOD From: April - 01 - 2006 To April - 30 - 2006

P-7

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.128		MGD				0	Monthly	Calculation
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.218 (AAD)		MGD					Monthly	Calculation
Flow, to R-001	Sample Measurement	0.158		MGD				0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)		MGD					5 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement				2.6		MG/L	0	Monthly	Calculation
PARM Code 80082 Y Mon. Site No. EPA-01	Permit Requirement				20.0 (An. Avg.)		MG/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement				2.3	2.6	MG/L	0	Every 2 Weeks	8-hr FPC
PARM Code 80082 A Mon. Site No. EPA-01	Permit Requirement				30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				3.5		MG/L	0	Monthly	Calculation
PARM Code 00530 Y Mon. Site No. EPA-01	Permit Requirement				20.0 (An. Avg.)		MG/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement				3.0	4.0	MG/L	0	Every 2 Weeks	8-hr FPC
PARM Code 00530 A Mon. Site No. EPA-01	Permit Requirement				30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	8-hour FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Shantavious S. Rainey / Lead Operator		(407) 948-9852	06/05/19

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

May 19 06 10:26a



DISCHARGE MONITORING REPORT

FACILITY: Forest Lake Estates WWTF  
 County: Pasco

MONITORING GROUP NUMBER: R-001  
 MONITORING PERIOD From: April 01, 2006 To

PERMIT NUMBER: FLA012801  
 April - 30 - 2006

P. 8

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Bx.	Frequency of Analysis	Sample Type
pH	Sample Measurement			7.1	7.5		SU	0	5 Days/Wk	Grab
	Permit Requirement			6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
PARM Code 00400 A Mon. Site No. EFA-01 Coliform, Fecal	Sample Measurement			1.2			#/100ML	0	Monthly	Calculation
	Permit Requirement			200 (An. Avg.)			#/100ML		Monthly	Calculation
PARM Code 74035 Y Mon. Site No. EFA-01 Coliform, Fecal	Sample Measurement			3.0	95	5.0	#/100ML	0	Every 2 Wks	Grab
	Permit Requirement			Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection) PARM Code 50060 A Mon. Site No. EFA-01	Sample Measurement			1.2			MGL	0	5 Days/Wk	Grab
	Permit Requirement			0.5 (Min.)			MGL		5 Days/Week	Grab
Sludge Production, Total PARM Code 49019 P Mon. Site No. OT14-01	Sample Measurement	37500					Cubic Yards	0	Monthly	Calculation
	Permit Requirement	Report (Mo. Total)					Gallons		Monthly	Calculation
Flow, total plant PARM Code 50050 P Mon. Site No. FLW-01	Sample Measurement	0.209	MGD					0	Monthly	Calculation
	Permit Requirement	0.216 (3MADP)	MGD						Monthly	Calculation
Percent Capacity, (3MADP/Permitted Capacity) x 100 PARM Code 00180 I Mon. Site No. FLW-01	Sample Measurement			97			%	0	Monthly	Calculation
	Permit Requirement			Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20°C PARM Code 80082 O Mon. Site No. INF-01	Sample Measurement			102			MGL	0	Every 2 Wks	8-hr FPC
	Permit Requirement			Report (Mo. Avg.)			MGL		Every Two Weeks	8-hour FPC
Solids, Total Suspended PARM Code 00530 G Mon. Site No. INF-01	Sample Measurement			285			MGL	0	Every 2 Wks	8-hr FPC
	Permit Requirement			Report (Mo. Avg.)			MGL		Every Two Weeks	8-hour FPC
	Sample Measurement									
	Permit Requirement									

May 19 06 10:27a

DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA012801  
From: April - 01 - 2006 To: April - 30 - 2006

Facility: Forest Lake Estates WWTF  
County: Pasco

	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Focal Coliform Bacteria (#/100mL)	pH (SL)	pH (SL)	TRC (For Manufact.) (mg/l)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Loc. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTR-01	INF-01	INF-01
								12500		
1	0.206									
2	0.192									
3	0.179				7.3		1.8			
4	0.219				7.3		1.3			
5	0.161				7.2		1.9			
6	0.183				7.2		1.2			
7	0.193				7.3		1.2	18750		
8	0.187							6250		
9	0.223								63	250
10	0.173	2.6	4.0	5.0	7.2		1.2			
11	0.180				7.2		1.2			
12	0.172				7.3		2.2			
13	0.168				7.3		2.2			
14	0.171				7.2		2.2			
15	0.169									
16	0.173									
17	0.167				7.4		2.2			
18	0.170				7.1		2.2			
19	0.138				7.2		2.2			
20	0.123				7.5		2.2			
21	0.157				7.4		2.2			
22	0.118									
23	0.139									
24	0.120	<2.0	<2.0	<1.0	7.4		2.2		140	320
25	0.129				7.2		2.2			
26	0.112				7.3		2.2			
27	0.122				7.2		2.2			
28	0.085				7.2		2.0			
29	0.101									
30	0.111									
31										
Total	4.741	2	2	2	20		20	3	2	2
Mo. Avg.	0.158	2.9	3.0	3.0	7.3		1.9	37500	103	285

PLANT STAFFING:  
Day Shift Operator

Class: C Certificate No: 12994

Name: Shantavious S. Rainey

Evening Shift Operator

Class: C Certificate No: 8045

Name: David Shoffstall

Night Shift Operator

Class: C Certificate No: 9767

Name: Keith Schneider

Lead Operator

Class: C Certificate No: 12994

Name: Shantavious S. Rainey

LABRADOR WWTP MONTH: April YEAR: 2006

TIME	FLOW METER		PH					CHLORINE			SPRAYFIELD		EFFLUENT PUMPS			SLUDGE	
	Total Volume	Initial Volume	Diff.	PH1	TANK #1	Tank #2	Algae	Resid.	Mixer Pump	Pump #1	#1	Flow	#2	Flow	Flow	Flow	
1	78475097	0.200															
2	78667224	0.143															
3	78845595	0.174	7.1	7.3	265	810	15	1.8	330566	889	12814.0	4.2	12030.4	5.3			
4	79065497	0.217	7.1	7.3	260	300	10	1.3	331375	801	12878.2	7.7	12077.7	4.0			
5	79226576	0.161	7.1	7.3	255	195	15	1.4	332196	528	12862.1	3.2	12039.7	3.3			
6	79410001	0.183	7.2	7.2	250	185	20	1.8	332724	712	12885.3	3.7	12043.0	3.9			
7	79603349	0.193	7.3	7.3	240	175		1.2	332136		12889.0		12046.7				
8	79790650	0.187															
9	80013465	0.223															
10	80186945	0.173	7.1	7.2	235	115	25	1.2	335556	670	12901.1	3.4	12059.4	3.8			
11	80367584	0.180	7.2	7.2	220	85	15	1.2	336220	407	12905.0	4.0	12063.2	4.1			
12	80548024	0.172	6.4	7.3	215	75	15	2.2+	336833	634	12907.0	6.3	12067.3	6.3			
13	80708347	0.168	7.0	7.3	205	65	15	2.2+	337447	630	12915.3	6.2	12072.6	5.7			
14	80879526	0.171	7.1	7.2	200	50		2.2+	338127		12922.5		12074.3				
15	81048173	0.169															
16	81223576	0.173															
17	81390386	0.167	7.2	7.4	140	50	20	2.2+	340078	647	12932.1	3.5	12096.3	3.5			
18	81560791	0.170	7.1	7.1	120	50	20	2.2+	340725	631	12935.6	4.5	12093.8	4.3			
19	81699119	0.138	7.2	7.2	120	50	10+	2.2+	341366	612	12940.1	4.1	12098.1	4.1			
20	81822798	0.123	7.3	7.5	90	50	20+	2.2+	341968	325	12944.2	8.8	12103.2	9.3			
21	8198624	0.157	7.2	7.4	70	50		2.2+	342293		12953.0		12111.5				
22	82098896	0.118															
23	82238603	0.187															
24	82358728	0.120	7.1	7.4	30%	→		2.2+	343768	574	12961.7	2.0	12120.9	2.1			
25	82487854	0.124	7.1	7.2	30%	→		2.2+	344287	499	12963.7	3.3	12123.0	3.1			
26	82600078	0.112	7.0	7.3	30%	→		2.2+	344786	417	12966.4	2.3	12126.1	2.6			
27	82722539	0.122	7.1	7.2	100%	→		2.2+	345203	426	12968.7	2.2	12128.7	2.7			
28	82807804	0.085	7.2	7.2	100%	→		2.0	345629		12970.4		12131.4				
29	82909117	0.101															
30	83027183	0.111															
31																	
Total			4.74														
No. Avg.			0.158														

TIME	PH	CHLORINE	SPRAYFIELD	EFFLUENT PUMPS	SLUDGE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
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21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT

693

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

PERMITTEE NAME: Labrador Utilities, Inc.  
 MAILING ADDRESS: 200 Weatherfield Avenue  
 Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012801

LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

FACILITY: Forest Lake Estates WWTP  
 LOCATION: 41311 Paquette Way  
 Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: R-001, including Influent

FILE COPY

COUNTY: Pasco

NO DISCHARGE FROM SITE:   
 MONITORING PERIOD From: May-01-2006 To: May-31-2006

JUL 05 06 11:30a

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.130	MGD			0	Monthly	Calculation
PARM Code 50050 Mon. Site No. FLW-01	Permit Requirement	0.218 (AADP)	MGD				Monthly	Calculation
Flow, to R-001	Sample Measurement	0.087	MGD			0	5 Days/Week	Flow meter & totalizer
PARM Code 50050 Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.4	MG/L	0	Monthly	Calculation
PARM Code 80062 Mon. Site No. BFA-01	Permit Requirement			20.0 (Mo. Avg.)	MG/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			12.5	MG/L	0	Every 2 Weeks	8 hr FPC
PARM Code 80062 Mon. Site No. BFA-01	Permit Requirement			30.0 (Mo. Avg.)	MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			3.6	MG/L	0	Monthly	Calculation
PARM Code 00530 Mon. Site No. BFA-01	Permit Requirement			20.0 (Mo. Avg.)	MG/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			3.0	MG/L	0	Every 2 Weeks	8 hr FPC
PARM Code 00530 Mon. Site No. EPA-01	Permit Requirement			30.0 (Mo. Avg.)	MG/L		Every Two Weeks	8-hour FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMMDD)
Shantavious Rainey / Lead Operator		407 948-9833	06/06/21

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here).

On 5/25/06 WWTP effluent flow meter was replaced with Peisaur Ultra Series 3 Mach 3.  
 (see calibration report)

DISCHARGE MONITORING REPORT - PART A (CONTINUOUS)

FACILITY: Forest Lake Estates WWTP  
 County: Pasco

MONITORING GROUP NUMBER: R-001  
 MONITORING PERIOD From: May 01-2006 To May 31-2006

PERMIT NUMBER: FLA012801  
 May 31-2006

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement			7.1	7.5		SU	0	5 Days/WK	Grab
	Permit Requirement			6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
PARM Code 00400 A Mon. Site No. BFA-01 Coliform, Fecal	Sample Measurement			2.0			#/100 ML	0	Monthly	Calculation
	Permit Requirement			200 (Ar. Avg.)			#/100 ML		Monthly	Calculation
PARM Code 74055 Y Mon. Site No. EPA-01 Coliform, Fecal	Sample Measurement			<1.0	100	<1.0	#/100 ML	0	Every 2 Weeks	Grab
	Permit Requirement			Report (Mo. Oco. Mean)	400 (90%)	800 (Max.)	#/100 ML		Every Two Weeks	Grab
PARM Code 74055 A Mon. Site No. EPA-01 Total Residual Chlorine (For Disinfection)	Sample Measurement			1.8			MCL	0	5 Days/WK	Grab
	Permit Requirement			0.5 (Min.)			MCL		5 Days/Week	Grab
Sludge Production, Total	Sample Measurement	0					Gal/tons	0	Monthly	Calculation
	Permit Requirement	Report (Mo. Total)					Gal/tons		Monthly	Calculation
PARM Code 49019 P Mon. Site No. OTH-01 Flow, total plant	Sample Measurement	0.161	MGD					0	Monthly	Calculation
	Permit Requirement	0.216 (3MADP)	MGD						Monthly	Calculation
PARM Code 50050 P Mon. Site No. FLW-01 Percent Capacity, (3MADP/Permitted Capacity) x 100	Sample Measurement			75			%	0	Monthly	Calculation
	Permit Requirement			Report			%		Monthly	Calculation
PARM Code 00180 I Mon. Site No. FLW-01 BOD, Carbonaceous 5 day, 20C	Sample Measurement			680			MCL	0	Every 2 Weeks	8-hr FPC
	Permit Requirement			Report (Mo. Avg.)			MCL		Every Two Weeks	8-hour FPC
PARM Code 80082 O Mon. Site No. INF-01 Solids, Total Suspended	Sample Measurement			4365			MCL	0	Every 2 Weeks	8-hr FPC
	Permit Requirement			Report (Mo. Avg.)			MCL		Every Two Weeks	8-hour FPC
PARM Code 00530 O Mon. Site No. INF-01	Sample Measurement									
	Permit Requirement									

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P. 3

### DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA012801

From: May 01, 2006 To: May 31, 2006

Facility: Forest Lake Estates WWTF  
County: Pasco

Code	Flow (MGD) R-101	CBOD5 (mg/L)	TSS (mg/L)	Focal Coliform Bacteria (#/100mL)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Loc. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	0.111				7.2		2.0			
2	0.129				7.2		1.8			
3	0.113				7.3		2.2			
4	0.122				7.3		1.9			
5	0.112				7.2		2.2			
6	0.097									
7	0.114									
8	0.106				7.4		1.9			
9	0.120	23	4.0		7.3		2.2		1100	8000
10	0.132				7.2		2.2			
11	0.128				7.2		2.0			
12	0.101			<1.0	7.5		2.2			
13	0.102				7.3		2.1			
14	0.103									
15	0.094				7.3		2.0			
16	0.105				7.4		2.2			
17	0.095				7.3		2.2			
18	0.103				7.2		2.2			
19	0.092				7.3		2.2			
20	0.079									
21	0.087									
22	0.097				7.2		2.1			
23	0.086	<2.0	<2.0	<1.0	7.1		2.0		360	730
24	0.035				7.3		2.2			
25	0.035				7.2		2.0			
26	0.034				7.2		2.2			
27	0.033				7.2		2.2			
28	0.033									
29	0.033				7.3		2.2			
30	0.033				7.3		2.2			
31	0.032				7.4		2.2			
Total	2.701	2	2	2	2.5		2.5		2	2
Mo. Avg	0.087	1.5	3.0	1.0	7.3		2.1		680	4365

**PLANT STAFFING:**

Day Shift Operator

Class: C

Certificate No:

12994

Name:

Shantavious S. Rainey

Evening Shift Operator

Class: C

Certificate No:

8045

Name:

David Shoffstall

Night Shift Operator

Class: C

Certificate No:

9767

Name:

Keith Schneider

Lead Operator

Class: C

Certificate No:

12994

Name:

Shantavious S. Rainey

DEPARTMENT OF ENVIRONMENTAL PROTECTION

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

PERMITTEE NAME: Labrador Utilities, Inc.  
 MAILING ADDRESS: 200 Weatherfield Avenue  
 Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012801

LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

FACILITY: Forest Lake Estates WWTP  
 LOCATION: 41311 Paqueta Way  
 Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: R-001, including influent

COUNTY: Pasco

NO DISCHARGE FROM SITE:   
 MONITORING PERIOD From: May 01, 2006 to May 31, 2006

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.130	MGD			0	Monthly	Calculation
PARAM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.215 (AADP)	MGD				Monthly	Calculation
Flow, to R-001	Sample Measurement	0.087	MGD			0	5 Days/Wk	Flow meter & totalizer
PARAM Code 50050 I Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.4	MG/L	0	Monthly	Calculation
PARAM Code 80082 Y Mon. Site No. BFA-01	Permit Requirement			20.0 (Ar. Avg.)	MG/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			12.5	MG/L	0	EVERY 2 WEEKS	8 hr FPC
PARAM Code 80082 A Mon. Site No. BFA-01	Permit Requirement			30.0 (Mo. Avg.)	MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			3.6	MG/L	0	Monthly	Calculation
PARAM Code 00530 Y Mon. Site No. BFA-01	Permit Requirement			25.0 (Ar. Avg.)	MG/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			3.0	MG/L	0	EVERY 2 WEEKS	8 hr FPC
PARAM Code 00530 A Mon. Site No. BFA-01	Permit Requirement			30.0 (MG. Avg.)	MG/L		Every Two Weeks	8-hour FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Shentarius Rainey / Lead Operator		407 948-9825	06/06/21

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

On 5/25/06 WWTP effluent flow meter was replaced with Paiseur Ultra Series 3 Mach 3. (see calibration report)

LABRADOR WWTP

MONTH: MAY

YEAR: 2006

STATION	FLOW METER		PH		CHLORINE				SPRAYFIELD		EFFLUENT PUMPS			SLUDGE JUDGE			SETTLABILITY			CP
	Total Volume	Interval Volume	Infl	Effl	Tank #	Tank Amt	Dose	Resid.	Member	Run hrs	#1	Run hrs	#2	Run hrs	#1	#2	#3			
831528	0.111	7.2	7.2	98%	→	3.0	346927	401	12977.7	2.8	12138.4	2.6	3.0	3.3	-	400	400	⊙		
8326375	0.124	7.2	7.2	95%	→	1.8	347328	421	12980.2	2.4	12141.0	2.4	3.0	3.3	-	400	410	⊙		
83373349	0.113	7.0	7.3	92%	→	2.2	347749	419	12982.0	2.5	12143.4	2.5	3.0	3.3	-	370	380	⊙		
83495724	0.122	6.9	7.3	90%	→	1.9	348168	447	12985.1	2.1	12145.9	2.2	3.0	3.3	-	350	350	⊙		
83608207	0.112	7.1	7.2		→	2.2	348615		12987.2		12148.1		3.0	3.3	-	320	320	⊙		
83705316	0.097																	⊙		
83819005	0.114																	⊙		
83935285	0.106	7.3	7.4	75%	→	1.9	349782	402	12993.7	3.4	12155.5	3.1	3.0	3.3	-	370	350	⊙		
84045144	0.120	7.1	7.3	75%	→	2.2	350184	389	12997.1	2.0	12158.6	1.7	3.0	3.3	-	400	380	⊙		
84176958	0.132	7.0	7.2	75%	→	2.2	350673	301	12999.1	2.6	12160.3	2.5	3.0	3.3	-	420	400	⊙		
84304669	0.128	6.9	7.2	70%	→	2.0	35104	427	13001.7	1.8	12162.3	2.2	3.0	3.3	-	450	440	⊙		
84436222	0.121	7.1	7.5	70%	→	2.2	351591		13003.5	3.4	12165.0	2.7	3.0	3.3	-	500	500	⊙		
84562691	0.108	7.0	7.3	70%	→	2.1			13006.9		12167.7							⊙		
84611202	0.103																	⊙		
84705356	0.094	7.0	7.3	55%	→	2.0	352678	379	13009.3	1.9	12172.2	2.2	3.0	3.3	-	510	500	⊙		
84810337	0.105	7.1	7.4	90%	→	2.2	353007	347	13011.2	1.9	12173.4	1.9	3.0	3.3	-	360	350	⊙		
84905628	0.095	6.9	7.3	45%	→	2.2	353354	381	13013.1	2.7	12175.3	3.5	3.0	3.3	-	370	-	⊙		
85000825	0.083	7.1	7.2	100%	→	2.2	353735	305	13015.3	1.9	12177.1	1.8	3.0	3.3	-	370	-	⊙		
85100717	0.092	7.0	7.3	100%	→	2.2	354030		13017.7		12180.9		3.0	3.3	-	370	-	⊙		
85185665	0.074																	⊙		
85268118	0.087																	⊙		
85365801	0.097	6.9	7.2	80%	→	2.1	354964	313	13023.0	1.7	12186.7	1.7	3.0	3.3	-	340	-	⊙		
85452002	0.086	7.0	7.1	75%	→	2.0	355266	327	13024.7	1.8	12188.4	1.7	3.0	3.3	-	250	-	⊙		
New totalizer	0.035	7.0	7.3	75%	→	2.2	355573	270	13026.5	1.5	12190.3	1.5	3.0	3.3	-	240	-	⊙		
New totalizer	0.035	7.1	7.2	70%	→	2.0	355863	379	13028.0	1.4	12191.3	2.0	3.0	3.3	-	130	-	⊙		
85615	0.039	7.0	7.2	55%	→	2.2	356242		13032.1		12194.8		3.0	3.3	-	130	-	⊙		
73692	0.033	7.1	7.2	60%	→	2.2			13034.7		12197.1							⊙		
2033																		⊙		
138195	0.033	6.9	7.3	55%	→	2.2	357284	290	13039.2	1.5	12203.9	1.2	3.0	3.3	-	250	-	⊙		
171427	0.033	7.1	7.3	55%	→	2.2	357574	301	13040.7	1.3	12205.1	1.6	3.0	3.3	-	260	-	⊙		
204086	0.032	6.9	7.4	50%	→	2.2	357875	355	13042.5		12206.7		3.0	3.3	-	250	-	⊙		
Total		2.701																		
MO. AVE		0.1487																		



DISCHARGE MONITORING REPORT - PART A (CONTINUED)

FACILITY:  
County:

Forest Lake Estates WWTP  
Pasco

MONITORING GROUP NUMBER: R-001  
MONITORING PERIOD From: May 01 2006 To

PERMIT NUMBER: FLA012801  
May 31 2006

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement			7.1	7.5		SU	0	5 Days/WK	Grab
	Permit Requirement			6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
PARM Code 00400 A Mon. Site No. EFA-01	Sample Measurement			2.0			#/100 ML	0	Monthly	Calculation
Coliform, Fecal	Permit Requirement			200 (An. Avg.)			#/100 ML		Monthly	Calculation
PARM Code 74055 Y Mon. Site No. EFA-01	Sample Measurement			<1.0	100	<1.0	#/100 ML	0	Every 2 Weeks	Grab
Coliform, Fecal	Permit Requirement			Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100 ML		Every Two Weeks	Grab
PARM Code 74055 A Mon. Site No. EFA-01	Sample Measurement			1.8			MGL	0	5 Days/WK	Grab
Total Residual Chlorine (For Disinfection)	Permit Requirement			0.5 (Min.)			MGL		5 Days/Week	Grab
PARM Code 50060 A Mon. Site No. EFA-01	Sample Measurement	0					Gallons	0	Monthly	Calculation
Sludge Production, Total	Permit Requirement	Report (Mo. Total.)					Gallons		Monthly	Calculation
PARM Code 49019 P Mon. Site No. OTH-01	Sample Measurement	0.161	MGD					0	Monthly	Calculation
Flow, total plant	Permit Requirement	0.216 (3MADF)	MGD						Monthly	Calculation
PARM Code 50050 P Mon. Site No. FLW-01	Sample Measurement			75			%	0	Monthly	Calculation
Percent Capacity, (3MADF/Permitted Capacity) x 100	Permit Requirement			Report			%		Monthly	Calculation
PARM Code 00190 I Mon. Site No. FIW-01	Sample Measurement			0.80			MGL	0	Every 2 Weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Permit Requirement			Report (Mo. Avg.)			MGL		Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon. Site No. INF-01	Sample Measurement			436.5			MGL	0	Every 2 Weeks	8-hr FPC
Solids, Total Suspended	Permit Requirement			Report (Mo. Avg.)			MGL		Every Two Weeks	8-hour FPC
PARM Code 00530 Q Mon. Site No. INF-01	Sample Measurement									
	Permit Requirement									

Jun 21 06 01:33p

P. 4

**DAILY SAMPLE RESULTS - PART B**

Permit Number:  
Monitoring Period

FLA012811

From: May 01 2006 To: May 31 2006

Facility: Forest Lake Estates WWTF  
County: Pasco

Code	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Focal Coliform Bacteria (#/100ml)	pH (SU)	pH (SL)	TRC (Per Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	0.111				7.2		2.0			
2	0.129				7.2		1.8			
3	0.113				7.3		2.2			
4	0.122				7.3		1.9			
5	0.112				7.2		2.2			
6	0.097									
7	0.114									
8	0.106				7.4		1.9			
9	0.120	23	4.0		7.3		2.2		1100	8000
10	0.132				7.2		2.2			
11	0.128				7.2		2.0			
12	0.101			<1.0	7.5		2.2			
13	0.102				7.3		2.1			
14	0.103									
15	0.094				7.3		2.0			
16	0.105				7.4		2.2			
17	0.095				7.3		2.2			
18	0.103				7.2		2.2			
19	0.092				7.3		2.2			
20	0.079									
21	0.087									
22	0.097				7.2		2.1			
23	0.086	<2.0	<2.0	<1.0	7.1		2.0		360	730
24	0.035				7.3		2.2			
25	0.035				7.2		2.0			
26	0.034				7.2		2.2			
27	0.033				7.2		2.2			
28	0.033									
29	0.033				7.3		2.2			
30	0.033				7.3		2.2			
31	0.032				7.4		2.2			
Total	2.701	2	2	2	2.5		2.5		2	2
Mo. Avg	0.087	12.5	3.0	1.0	7.3		2.1		680	4365

**PLANT STAFFING:**

Day Shift Operator

Class: C Certificate No: 12994

Name:

Shantavious S. Rainey

Evening Shift Operator

Class: C Certificate No: 8045

Name:

David Shoffstall

Night Shift Operator

Class: C Certificate No: 9767

Name:

Keith Schneider

Lead Operator

Class: C Certificate No: 12994

Name:

Shantavious S. Rainey

DEPARTMENT OF ENVIRONMENTAL PROTECTION

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

693

PERMITTEE NAME: Labrador Utilities, Inc.  
MAILING ADDRESS: 200 Weatherfield Avenue  
Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012801

LIMIT: Final  
CLASS SIZE: N/A

REPORT: Monthly  
GROUP: Domestic

FACILITY: Forest Lake Estates WWTF  
LOCATION: 41311 Paquette Way  
Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESC: R-001, including Influent

COUNTY: Pasco

NO DISCHARGE FROM SITE:   
MONITORING PERIOD From: June 01 2006 To: June 30 2006

P. 1

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. EX.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.125		MGD				0	Monthly	Calculation
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.216 (AAD)		MGD					Monthly	Calculation
Flow, to R-001	Sample Measurement	0.035		MGD				0	5 Days/Week	Flow meters totalizers
PARM Code 50050 I Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)		MGD					5 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement				3.6		MG/L	0	Monthly	Calculation
PARM Code 80082 Y Mon. Site No. BFA-01	Permit Requirement				20.0 (An. Avg.)		MG/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement				4.6	4.8	MG/L	0	Every two Weeks	8-hour FPC
PARM Code 80082 A Mon. Site No. BFA-01	Permit Requirement				30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				3.6		MG/L	0	Monthly	Calculation
PARM Code 00530 Y Mon. Site No. BFA-01	Permit Requirement				20.0 (An. Avg.)		MG/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement				2.0	2.0	MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 A Mon. Site No. BFA-01	Permit Requirement				30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	8-hour FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Shantarius S. Rainey / Lead Operator		(807) 948-9532	06/07/20

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

Jul 20 06 12:37P

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Forest Lake Estates WWTP  
 County: Pasco

MONITORING GROUP NUMBER: R-001  
 MONITORING PERIOD From: June 01 2006 To June 30 2006

PERMIT NUMBER: FLA012801

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement			7.1	7.3		SU	0	5 Days/Wk	Grab
	Permit Requirement			6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
PARM Code 00400 A Mon. Site No. BFA-01	Sample Measurement			1.5			#/100ML	0	Monthly	Calculation
Coliform, Fecal	Permit Requirement			200 (An. Avg.)			#/100ML		Monthly	Calculation
PARM Code 74055 Y Mon. Site No. BFA-01	Sample Measurement			< 1.0	100	< 1.0	#/100ML	0	Every 2 Weeks	Grab
Coliform, Fecal	Permit Requirement			Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
PARM Code 74055 A Mon. Site No. BFA-01	Sample Measurement			2.2			MG/L	0	5 Days/Wk	Grab
Total Residual Chlorine (For Disinfection)	Permit Requirement			0.5 (Min.)			MG/L		5 Days/Week	Grab
PARM Code 50060 A Mon. Site No. BFA-01	Sample Measurement	0.035					Gallons	0	Monthly	Calculation
Sludge Production, Total	Permit Requirement	Report (Mo. Total)					Gallons		Monthly	Calculation
PARM Code 49019 P Mon. Site No. OTH-01	Sample Measurement	0.043	MGD					0	Monthly	Calculation
Flow, total plant	Permit Requirement	0.216 (3MADP)	MGD						Monthly	Calculation
PARM Code 50050 P Mon. Site No. FLW-01	Sample Measurement			43			%	0	Monthly	Calculation
Percent Capacity, (3MADP/Permitted Capacity) x 100	Permit Requirement			Report			%		Monthly	Calculation
PARM Code 00180 I Mon. Site No. FLW-01	Sample Measurement			210			MG/L	0	Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon. Site No. INF-01	Sample Measurement			131			MG/L	0	Every Two Weeks	8-hour FPC
Sulfide, Total Suspended	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon. Site No. INF-01	Sample Measurement									
	Permit Requirement									

P. 2

Jul 20 06 2:37p

DAILY SAMPLE RESULTS - PART B

Facility: Forest Lake Estates WWTF  
County: Pasco

Permit Number:  
Monitoring Period

LA012801  
From: June 01 2006 To: June 30 2006

Code	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Focal Coliform Bacteria (#/100ml)	pH (SU)	pH (STH)	TRC (For Disinfect) (mg/L)	Sludge Volume (G/L)	CBOD5 (mg/L)	TSS (mg/L)
50050	FLW-01	80082	00530	74055	00406	03406	50060	49019	80082	00530
on. Site		EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	0.043				7.1		2.2			
2	0.041				7.3		2.2			
3	0.031									
4	0.031									
5	0.030				7.2		2.2			
6	0.028	4.8	2.0	1.0	7.2		2.2		210	210
7	0.026				7.1		2.2			
8	0.014				7.3		2.2			
9	0.024				7.2		2.2			
10	0.021									
11	0.024									
12	0.08				7.3		2.2			
13	0.03				7.3		2.2			
14	0.03				7.3		2.2			
15	0.02				7.3		2.2			
16	0.02				7.3		2.2			
17	0.0									
18	0.0									
19	0.03				7.3		2.2			
20	0.03	4.4	2.0	1.0	7.3		2.2		210	52
21	0.0				7.3		2.2			
22	0.0				7.2		2.2			
23	0.0				7.3		2.2			
24	0.0									
25	0.0									
26	0.0				7.3		2.2			
27	0.0				7.3		2.2			
28	0.0				7.3		2.2			
29	0.0				7.3		2.2			
30	0.0				7.3		2.2			
31										
Total	1.0	2	2	2	2.2		2.2		2	2
Mo. Avg	0.0	4.6	2.0	1.0	7.3		2.2		210	131

PLANT STAFFING  
Day Shift Operator  
Evening Shift Operator  
Night Shift Operator  
Lead Operator

Class: C	Certificate No: 12994	Name: Shantavious S. Rainey
Class: C	Certificate No: 8045	Name: David Shaffstall
Class: C	Certificate No: 9767	Name: Keith Schneider
Class: C	Certificate No: 12994	Name: Shantavious S. Rainey

# LABRADOR WWTP

MONTH: June YEAR: 2006

DATE	TIME	FLOW METER		PH	CHLORINE				SPRAYFIELD		EFFLUENT PUMPS			SLUDGE JUDGE			SETTLABILITY			CP		
		Total Volume	Chlorine Volume		In. Ft.	Eff. Ft.	Tank #1	Tank #2	Usage	Resid.	Number Read	Run hrs	#1	Run hrs	#2	Run hrs	#1 AM/PM	#2 AM/PM	#3 AM/PM		#1	#2
1		235853	0.043	6.9	7.1	77%	→	2.2+	358230	321	13044.6	1.5	12208.5	3.0	3.0	3.0	-	-	-	240	-	Ⓢ
2		279031	0.041	7.1	7.2	95%	→	2.2+	358451		13046.1		12211.5							260	-	Ⓢ
3		320036	0.031																			Ⓢ
4			0.051																			Ⓢ
5		331401	0.030	7.1	7.2	80%	→	2.2+	359666	228	13050.0	1.1	12212.1	1.0	3.0	3.0	-	-	-	280	-	Ⓢ
6		411413	0.028	7.1	7.2	80%	→	2.2+	359894	227	13051.7	0.1	12210.9	2.7	3.0	3.0	-	-	-	280	-	Ⓢ
7		434674	0.026	7.0	7.1	80%	→	2.2+	360121	373	13051.8	1.7	12223.6	2.8	3.0	3.0	-	-	-	260	-	Ⓢ
8		465237	0.014	6.9	7.3	70%	→	2.2+	360444	126	13053.5	0.5	12226.4	0.0	3.0	3.0	-	-	-	320	-	Ⓢ
9		479260	0.024	7.1	7.2	65%	→	2.2+	360620		13054.0		12226.4									Ⓢ
10			0.024																			Ⓢ
11			0.024								13054.1	7.9	12232.3	8.6	3.0	3.0	-	-	-	320	-	Ⓢ
12	10	552462	0.088	7.0	7.3	60%	→	2.2+			13054.1	7.9	12232.3	8.6	3.0	3.0	-	-	-	152	250	Ⓢ
13	0	640567	0.032	7.0	7.3	99%	→	2.2+	361783	296	13067.0	0.1	12240.9	3.4	3.0	3.0	-	-	-	260	-	Ⓢ
14	0	672751	0.019	7.0	7.3	95%	→	2.2+	362079	274	13067.1	0.0	12244.3	3.3	3.0	3.0	-	-	-	280	-	Ⓢ
15	0	70760	0.027	7.0	7.3	95%	→	2.2+	362353	227	13067.1	0.0	12247.6	3.8	3.0	3.0	-	-	-	260	-	Ⓢ
16		729117	0.028	7.0	7.3	95%	→	2.2+	362500		13067.1		12250.4									Ⓢ
17			0.028																			Ⓢ
18			0.024																			Ⓢ
19	1.3	815956	0.037	7.0	7.3	80%	→	2.2+	363319	236			12260.8	0.0	3.0	3.0	-	-	-	260	-	Ⓢ
20	1		0.037	7.0	7.3	80%	→	2.2+	363555	374	13070.2	3.4	12260.8	0.0	3.0	3.0	-	-	-	260	-	Ⓢ
21		893324	0.032	7.0	7.3	70%	→	2.2+	364094	301	13072.6	5.4	12260.8	0.0	3.0	3.0	-	-	-	260	-	Ⓢ
22		924956	0.018	7.0	7.2	70%	→	2.2+	364400	173	13077.0	1.6	12260.8	0.0	3.0	3.0	-	-	-	260	-	Ⓢ
23		443049	0.023	7.0	7.3	60%	→	2.2+	364573		13078.6		12260.8									Ⓢ
24			0.023																			Ⓢ
25	1.5		0.023																			Ⓢ
26		1012325	0.025	6.9	7.3	50	→	2.2+	365235	280	13083.7	0.0	12262.8	3.4	3.0	3.0	-	-	-	260	-	Ⓢ
27		1037247	0.023	6.9	7.3	50	→	2.2+		280	13083.7	0.0	12265.4	1.0	3.0	3.0	-	-	-	280	-	Ⓢ
28		1070606	0.024	7.0	7.3	50	→	2.2+		280	13086.0	3.0	12266.4	0.0	3.0	3.0	-	-	-	280	-	Ⓢ
29		1044214									13091.0											Ⓢ
30		1108954	0.054	7.0	7.3	94	→															Ⓢ
31		1163050																				Ⓢ
Total			0.155																			Ⓢ
Mo. Avg			0.031																			Ⓢ

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

FILE COPY

PERMITTEE NAME: Labrador Utilities, Inc.  
 MAILING ADDRESS: 200 Weatherfield Avenue  
 Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012801

LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

FACILITY: Forest Lake Estates WWTP  
 LOCATION: 41311 Paquette Way  
 Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: R-001, including influent

COUNTY: Pasco

NO DISCHARGE FROM SITE:   
 MONITORING PERIOD From: July 01 - 2006 To July 31 - 2006

6013

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.121	MGD			0	Monthly	Calculation
PARM Code 50050 Y Mon Site No. FLW-01	Permit Requirement	0.218 (AADF)	MGD				Monthly	Calculation
Flow, to R-001	Sample Measurement	0.037	MGD			0	5 Days/Week	Flow meter & totalizer
PARM Code 50050 1 Mon Site No. FLW-01	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.7	MG/L	0	Monthly	Calculation
PARM Code 50082 Y Mon Site No. BPA-01	Permit Requirement			20.0 (Mo.Avg.)	MG/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.9	MG/L	0	Every 2 Weeks	8-hr FPC
PARM Code 50082 A Mon Site No. BPA-01	Permit Requirement			30.0 (Mo.Avg.)	MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			3.6	MG/L	0	Monthly	Calculation
PARM Code 00530 Y Mon Site No. BPA-01	Permit Requirement			20.0 (Mo.Avg.)	MG/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			2.0	MG/L	0	Every 2 Weeks	8-hr FPC
PARM Code 00530 A Mon Site No. BPA-01	Permit Requirement			30.0 (Mo.Avg.)	MG/L		Every Two Weeks	8-hour FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Shantavious S. Rainey / Lead Operator		(904) 948-4632	06/08/24

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

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Forest Lake Estates WWTF  
 County: Pasco

MONITORING GROUP NUMBER: R-001  
 MONITORING PERIOD From: July 01, 2006 To

PERMIT NUMBER: FLA012801  
July 31, 2006

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				7.3	7.6		SU	0	5 Days/Week	Grab
	Permit Requirement				6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
PARM Code 00400 A Mon. Site No. BFA-01 Coliform, Fecal	Sample Measurement				1.5			#/100ML	0	Monthly	Calculation
	Permit Requirement				200 (Ar. Avg.)			#/100ML		Monthly	Calculation
PARM Code 74055 Y Mon. Site No. BFA-01 Coliform, Fecal	Sample Measurement				1.0	100%	1.0	#/100ML	0	Every 2 Weeks	Grab
	Permit Requirement				Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
PARM Code 74055 A Mon. Site No. EFA-01 Total Residual Chlorine (For Disinfection)	Sample Measurement				2.0			MG/L	0	5 Days/WK	Grab
	Permit Requirement				0.5 (Min.)			MG/L		5 Days/Week	Grab
PARM Code 50060 A Mon. Site No. EFA-01 Sludge Production, Total	Sample Measurement	0						Gallons	0	Monthly	Calculation
	Permit Requirement	Report (Mo. Total.)						Gallons		Monthly	Calculation
PARM Code 49019 P Mon. Site No. OTH-01 Flow, total plant	Sample Measurement	0.053		MGD					0	Monthly	Calculation
	Permit Requirement	0.216 (3MADP)		MGD						Monthly	Calculation
PARM Code 50050 P Mon. Site No. FLW-01 Percent Capacity, (3MADP/Permitted Capacity) x 100	Sample Measurement				25			%	0	Monthly	Calculation
	Permit Requirement				Report			%		Monthly	Calculation
PARM Code 80082 O Mon. Site No. INF-01 BOD, Carbonaceous 5 day, 20C	Sample Measurement				250			MG/L	0	Every 2 Weeks	8-hr FPL
	Permit Requirement				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPL
PARM Code 00530 O Mon. Site No. INF-01 Solids, Total Suspended	Sample Measurement				180			MG/L	0	Every 2 Weeks	8-hr FPL
	Permit Requirement				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPL
	Sample Measurement										
	Permit Requirement										



DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA012801  
From: July 01, 2006 To: July 31, 2006

Facility: Forest Lake Estates WWTF  
County: Pasco

Code	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100mL)	pH (SU)	pH (SU)	TRC (For Nisinfect.) (mg/L)	Sudge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
in. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	0.023									
2	0.023									
3	0.020				7.3		2.2+			
4	0.026				7.3		2.2+			
5	0.031	3.2	2.0	1.0	7.3		2.2+		200	160
6	0.029				7.3		2.2+			
7	0.004				7.4		2.2+			
8	0.120									
9	0.120									
10	0.048				7.4		2.2+			
11	0.035				7.3		2.2+			
12	0.044				7.6		2.2+			
13	0.039				7.5		2.2+			
14	0.041				7.5		2.2+			
15	0.038				7.4		2.0			
16	0.032									
17	0.035				7.4		2.2+			
18	0.033				7.5		2.2+			
19	0.031				7.4		2.2+			
20	0.031	4.6	2.0	1.0	7.4		2.2+		300	200
21	0.034				7.7		2.2+			
22	0.030									
23	0.034									
24	0.032				7.3		2.2+			
25	0.023				7.4		2.2+			
26	0.026				7.3		2.2+			
27	0.040				7.3		2.2+			
28	0.022				7.3		2.2+			
29	0.030				7.4		2.0			
30	0.030									
31	0.035				7.3		2.2+			
Total	1.133	2	2	2	23		23		2	2
Mo. Avg.	0.037	3.4	2.0	1.0	7.4		2.2		250	180

LANT STAFFING:  
Day Shift Operator  
Evening Shift Operator  
Night Shift Operator  
Lead Operator

Class: <u>C</u>	Certificate No: <u>12994</u>	Name: <u>Shantavious S. Rainey</u>
Class: <u>C</u>	Certificate No: <u>8045</u>	Name: <u>David Shoffstall</u>
Class: <u>C</u>	Certificate No: <u>9767</u>	Name: <u>Keith Schneider</u>
Class: <u>C</u>	Certificate No: <u>12994</u>	Name: <u>Shantavious S. Rainey</u>

LABRADOR WWTP

MONTH: July

YEAR: 2006

DATE	FLOW METER		PH		CHLORINE			SPRAY FGLD		EFFLUENT PUMPS				SLUDGE JUDGE			SETTLABILITY			CP		
	Total Volume	Influent Volume	Infl.	Effl.	Tank #1	Tank #2	Usage	Resid.	Meter-Bezel	Run hrs	#1	Run hrs	#2	Run hrs	# AM/PM	# AM/PM	# AM/PM	#1	#2		#3	
1	1163450	0.023																				
2		0.023													20	20		120	200	-	Ⓢ	
3	1269945	0.020	7.0	7.3	40	→	22+								20	20		120	200	-	Ⓢ	
4	1229574	0.026	7.0	7.3	40	→	22+								20	20		120	200	-	Ⓢ	
5	1255961	0.031	7.0	7.3	85	→	22+	368154		130979			12281.0		15	15		100	200	-	Ⓢ	
6	1286972	0.029	7.0	7.3	70	→	22+			13097.9			12284.1		15	15		100	200	-	Ⓢ	
7	1215592	0.004	6.9	7.4	70	→	22+	368704		13100.9			12284.8		15	15		100	210	-	Ⓢ	
8	1319396	0.120	Flow for future @ Flow meter			@ Flow meter			UPS future													
9		0.120																				
10	1558539	0.048	6.9	7.4	65	→	22+	370364	458	13120.3	2.3		12284.8	0.0	15	10		120	200	-	Ⓢ	
11	11006858	0.035	7.1	7.3	65	→	22+	370872	306	13125.6	3.8		12284.8	0.0	15	10		100	180	-	Ⓢ	
12	1641566	0.044	7.0	7.6	60	→	22+	371128	407	13129.4	0.9		12284.8	3.7	15	10		100	180	-	Ⓢ	
13	1609422	0.039	6.8	7.5	60	→	22+	371535	356	13130.3	0.0		12288.2	3.8	10	10		100	180	-	Ⓢ	
14	1724048	0.041	6.9	7.5	60	→	22+	371891		13130.3			12292.0		10	10		120	200	-	Ⓢ	
15	1765454	0.032	6.8	7.4	55	→	20			13130.3			12296.3									AS
16		0.032																				
17	1830200	0.035	6.9	7.4	55	→	22+	372909	634	13130.4	0.0		12303.1	3.6								Ⓢ
18	1865350	0.033	6.9	7.5	50	→	22+	373247	627	13130.4	0.0		12306.7	3.2	10	10		120	200	-	Ⓢ	
19	1897891	0.031	6.9	7.4	50	→	22+	373517	632	13130.4	0.0		12309.9	3.5	10	10		100	200	-	Ⓢ	
20	1929973	0.031	6.9	7.4	50	→	22+	373836		13130.4	0.1		12313.4	3.3	10	10		100	200	-	Ⓢ	
21	1960530	0.034	7.0	7.4	50	→	22	374132		13130.5	.1		12315.7	3.3								Ⓢ
22	1944586	0.030																				
23	2024150	0.034																				
24	2057991	0.032	6.9	7.3	45	→	22+			13139.7	0.6		12316.9	2.6								Ⓢ
25	2089950	0.023	6.9	7.4	40	→	22+	375302	620	13140.3	2.2		12319.5	0.0	7	10						Ⓢ
26	2122730	0.026	6.9	7.3	40	→	22+	375502		13143.5			12314.5	0.0	7	15						Ⓢ
27	2148976	0.040	6.9	7.3	40	→	22+			13146.3			12319.5	0.0	7	10						Ⓢ
28	2184176	0.022	6.9	7.3	40	→	22+			13150.1			12319.5		7	10						Ⓢ
29	2211508	0.030	7.0	7.4	40	→	20			13152.6			12319.5									
30		0.030																				
31	2271743	0.035	7.0	7.3	40	→	22+			13158.5			12319.5		7	15						Ⓢ
Total		1.133																				
Mo. Avg		0.037																				

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

FILE COPY

693

PERMITTEE NAME: Labrador Utilities, Inc.  
MAILING ADDRESS: 200 Weathersfield Avenue  
Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012801

LIMIT: Final  
CLASS SIZE: N/A

REPORT: Monthly  
GROUP: Domestic

FACILITY: Forest Lake Estates WWTP  
LOCATION: 41311 Paquette Way  
Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESC: R-001, including Influent

COUNTY: Pasco

NO DISCHARGE FROM SITE:   
MONITORING PERIOD From: August 01, 2006 To August 31, 2006

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.121	MGD			0	Monthly	Calculation
PARM Code 50050 Mon. Site No. FLW-01	Permit Requirement	0.2 (A.ADF)	MGD				Monthly	Calculation
Flow, to R-001	Sample Measurement	0.035	MGD			0	5 Days/Wk	Flow meter & totalizers
PARM Code 50050 Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement			6.8	MG/L	0	Monthly	Calculation
PARM Code 80082 Mon. Site No. BFA-01	Permit Requirement			20.0 (Mo. Avg.)	MG/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			7.5	MG/L	0	Every 2 Weeks	8-hr FPC
PARM Code 80082 Mon. Site No. BFA-01	Permit Requirement			30.0 (Mo. Avg.)	MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			3.7	MG/L	0	Monthly	Calculation
PARM Code 00530 Mon. Site No. BFA-01	Permit Requirement			20.0 (Mo. Avg.)	MG/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			3.0	MG/L	0	Every 2 Weeks	8-hr FPC
PARM Code 00530 Mon. Site No. BFA-01	Permit Requirement			30.0 (Mo. Avg.)	MG/L		Every Two Weeks	8-hour FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Shantavious S. Rainey / Lead Operator		(407) 948-9833	06/09/22

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

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Forest Lake Estates WWTF  
 County: Pasco

MONITORING GROUP NUMBER: R-001  
 MONITORING PERIOD From: August 01, 2006 To: August 31, 2006

PERMIT NUMBER: FLA012801

P. 3

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH PARM Code 00400 A Mon. Site No. BFA-01	Sample Measurement				7.2	8.0		SU	0	5 Days/WK	Grab
	Permit Requirement				6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
Coliform, Fecal PARM Code 74055 Y Mon. Site No. BFA-01	Sample Measurement				1.4			#/100 ML	0	Monthly	Calculation
	Permit Requirement				200 (An. Avg.)			#/100ML		Monthly	Calculation
Coliform, Fecal PARM Code 74055 A Mon. Site No. BFA-01	Sample Measurement				1.0	100%	1.0	#/100ML	0	Every 2 Weeks	Grab
	Permit Requirement				Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection) PARM Code 50060 A Mon. Site No. BFA-01	Sample Measurement				1.6			MG/L	0	5 Days/WK	Grab
	Permit Requirement				0.5 (Min.)			MG/L		5 Days/Week	Grab
Sludge Production, Total PARM Code 49019 P Mon. Site No. OTH-01	Sample Measurement	0						Gallons	0	Monthly	Calculation
	Permit Requirement	Report (Mo. Total.)						Gallons		Monthly	Calculation
Flow, total plant PARM Code 50050 P Mon. Site No. FLW-01	Sample Measurement	0.036		MGD					0	Monthly	Calculation
	Permit Requirement	0.216 (3MADP)		MGD						Monthly	Calculation
Percent Capacity, (3MADP/Permitted Capacity) x 100 PARM Code 00180 I Mon. Site No. FLW-01	Sample Measurement				17			%	0	Monthly	Calculation
	Permit Requirement				Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C PARM Code 80082 G Mon. Site No. INF-01	Sample Measurement				134			MG/L	0	Every 2 Weeks	8-hr PFC
	Permit Requirement				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour PFC
Solids, Total Suspended PARM Code 00530 G Mon. Site No. INF-01	Sample Measurement				207			MG/L	0	Every 2 Weeks	8-hour PFC
	Permit Requirement				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour PFC
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA012801  
 Monitoring Period: From August 01, 2006 To August 31, 2006  
 Facility: Forest Lake Estates WWTF  
 County: Pasco

Code	Flow (MGID) R-001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	0.029	<2.0	<2.0	<1.0	7.3		2.2		60	<2.0
2	0.028				7.3		2.2			
3	0.029				7.3		5.0			
4	0.061				7.3		2.2			
5	0.022				7.4		4.2			
6	0.021									
7	0.034				7.3		2.2			
8	0.030				7.4		2.2			
9	0.026				7.3		2.2			
10	0.030				8.0		2.2			
11	0.029				7.4		2.2			
12	0.021									
13	0.020									
14	0.021				7.3		2.2			
15	0.030	15.0	5.0	<1.0	7.3		2.2		280	510
16	0.029				7.2		2.2			
17	0.029				7.3		2.2			
18	0.158				7.4		2.2			
19	0.024				7.3		1.6			
20	0.024									
21	0.020				7.4		2.2			
22	0.053				7.3		2.0			
23	0.027				7.4		2.2			
24	0.033				7.3		2.2			
25	0.028				7.3		2.2			
26	0.030									
27	0.029									
28	0.029				7.2		2.2			
29	0.031				7.4		2.2			
30	0.030				7.4		2.2			
31	0.031	5.5	<2.0	<1.0	7.3		2.2		62	110
Total	1.092	3	3	3	2.5		2.5		3	3
Mo. Avg	0.035	7.5	3.0	<1.0	7.4		2.4		134	207

PLANT STAFFING:

Day Shift Operator	Class: C	Certificate No: 12994	Name: Shantavious S. Rainey
Evening Shift Operator	Class: C	Certificate No: 8045	Name: David Shoffstall
Night Shift Operator	Class: C	Certificate No: 9767	Name: Keith Schneider
Lead Operator	Class: C	Certificate No: 12994	Name: Shantavious S. Rainey



**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

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

PERMITTEE NAME: Labrador Utilities, Inc.  
 MAILING ADDRESS: 200 Weatherfield Avenue  
 Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012801

LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

693

FACILITY: Forest Lake Estates WWTP  
 LOCATION: 41311 Paquette Way  
 Zephyrhills, FL 33540

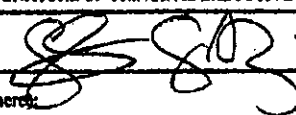
MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: R-001, including Influent

COUNTY: Pasco

NO DISCHARGE FROM SITE:   
 MONITORING PERIOD From: August 01, 2006 To: August 31, 2006

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.120	MGD			0	Monthly	Calculation
PARAM Code 50050 Mon. Site No. FLW-01	Permit Requirement	0.216 (AADP)	MGD				Monthly	Calculation
Flow, to R-001	Sample Measurement	0.033	MGD			0	5 Days/Wk	Flow meter & totalizers
PARAM Code 50050 Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement			6.8		MG/L	0	Monthly Calculation
PARAM Code 80082 Mon. Site No. BFA-01	Permit Requirement			20.0 (Ar. Avg.)		MG/L		Monthly Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			7.5	15.0	MG/L	0	Every 2 Weeks 8-hr FPC
PARAM Code 80082 Mon. Site No. BFA-01	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks 8-hour FPC
Solids, Total Suspended	Sample Measurement			3.7		MG/L	0	Monthly Calculation
PARAM Code 00530 Mon. Site No. BFA-01	Permit Requirement			20.0 (Ar. Avg.)		MG/L		Monthly Calculation
Solids, Total Suspended	Sample Measurement			3.0	5.0	MG/L	0	Every 2 Weeks 8-hr FPC
PARAM Code 00530 Mon. Site No. BFA-01	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks 8-hour FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Shantavious S. Rainey / Lead Operator		(407) 948-9833	06/09/22

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

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Forest Lake Estates WWTP  
 County: Pasco

MONITORING GROUP NUMBER: R-001  
 MONITORING PERIOD From: August 11, 2006 To: August 31, 2006

PERMIT NUMBER: FLA012801

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH PARM Code 00400 A Mon. Site No. BFA-01	Sample Measurement			7.2	8.0		SU	0	5 Days/WK	Grab
	Permit Requirement			6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
Coliform, Fecal PARM Code 74055 Y Mon. Site No. BFA-01	Sample Measurement			1.4			#/100 ML	0	Monthly	Calculation
	Permit Requirement			200 (An. Avg.)			#/100ML		Monthly	Calculation
Coliform, Fecal PARM Code 74055 A Mon. Site No. BFA-01	Sample Measurement			1.0	100%	1.0	#/100ML	0	Every 2 Weeks	Grab
	Permit Requirement			Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection) PARM Code 50060 A Mon. Site No. BFA-01	Sample Measurement			1.6			MG/L	0	5 Days/WK	Grab
	Permit Requirement			0.5 (Min.)			MG/L		5 Days/Week	Grab
Sludge Production, Total PARM Code 49019 P Mon. Site No. OTH-01	Sample Measurement	0					Gallons	0	Monthly	Calculation
	Permit Requirement	Report (Mo. Total.)					Gallons		Monthly	Calculation
Flow, total plant PARM Code 50050 P Mon. Site No. FLW-01	Sample Measurement	0.035	MGD					0	Monthly	Calculation
	Permit Requirement	0.216 (3MADP)	MGD						Monthly	Calculation
Percent Capacity, (3MADP/Permitted Capacity) x 100 PARM Code 00180 I Mon. Site No. FLW-01	Sample Measurement			16			%	0	Monthly	Calculation
	Permit Requirement			Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C PARM Code 80082 G Mon. Site No. INF-01	Sample Measurement			134			MG/L	0	Every 2 Weeks	8-hr FPC
	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended PARM Code 00530 G Mon. Site No. INF-01	Sample Measurement			207			MG/L	0	Every 2 Weeks	8-hr FPC
	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
	Sample Measurement									
	Permit Requirement									



DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA012801  
From: August 01, 2006

To: August 31, 2006

Facility: Forest Lake Estates WWTF  
County: Pasco

	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Focal Coliform Bacteria (#/100mL)	pH (SU)	pH (SI)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTB-01	INF-01	INF-01
1	0.029	<2.0	<2.0	<1.0	7.3		2.2		60	<2.0
2	0.028				7.3		2.2			
3	0.029				7.3		5.0			
4	0.061				7.3		2.2			
5	0.022				7.4		4.2			
6	0.021									
7	0.034				7.3		2.2			
8	0.030				7.4		2.2			
9	0.026				7.3		2.2			
10	0.030				8.0		2.2			
11	0.029				7.4		2.2			
12	0.021									
13	0.020									
14	0.021				7.3		2.2			
15	0.030	15.0	5.0	<1.0	7.3		2.2		280	510
16	0.029				7.2		2.2			
17	0.029				7.3		2.2			
18	0.158				7.4		2.2			
19	0.024				7.3		1.6			
20	0.024									
21	0.020				7.4		2.2			
22	0.053				7.3		2.0			
23	0.027				7.4		2.2			
24	0.033				7.3		2.2			
25	0.028				7.3		2.2			
26	0.030									
27	0.029									
28	0.029				7.2		2.2			
29	0.031				7.4		2.2			
30	0.030				7.4		2.2			
31	0.031	5.5	<2.0	<1.0	7.3		2.2		62	110
Total	1.036	3	3	3	2.5		2.5		3	3
Mo. Avg.	0.035	7.5	3.0	<1.0	7.4		2.4		134	207

PLANT STAFFING:

Day Shift Operator

Class: C

Certificate No:

12994

Name:

Shantarius S. Rainey

Evening Shift Operator

Class: C

Certificate No:

8045

Name:

David Shoffstall

Night Shift Operator

Class: C

Certificate No:

9767

Name:

Keith Schneider

Lead Operator

Class: C

Certificate No:

12994

Name:

Shantarius S. Rainey

161 \* 34243#2

LABRADOR WWTP

MONTH: Aug YEAR: 2006

DATE	FLOW METER		PH		CHLORINE			SPRAYFIELD		EFFLUENT		PUMPS			SLUDGE JUDGE			SETTLABILITY			CP
	Total Volume	Infl. Volume	Infl.	Effl.	Tank #1	Tank #2	Usage	Resid.	Meter	Run Hrs	#1	Run Hrs	#2	Run Hrs	#1	#2	#3	#1	#2	#3	
											13161.7		12319.9						200		Ⓞ
	2306855	0.029	6.9	7.3	80		→	2.2+			13161.7		12322.0						180		Ⓞ
	2335883	0.028	6.4	7.3	80		→	2.2+			13161.8		12321.1						180		Ⓞ
	2363970	0.029	6.9	7.3	80		→	5.0+			13164.7		12326.0								
	2392540	0.061	7.0	7.3	40		→	2.2+			13168.8		12326.0								
	2453515	0.022	7.0	7.4			→	4.2													
		0.021																			
	2497285	0.024	6.7	7.3	60		→	2.2+	379027		13174.9		12326.0						180		Ⓞ
	2531530	0.050	7.0	7.4	50		→	2.2+			13178.3		12326.0								
	2564984	0.026	6.9	7.3	100		→	2.2+	379610		13181.4		12326.0						60		Ⓞ
	2587683	0.020	6.9	8.0	100		→	2.2+			13183.9		12326.0						1.60		Ⓞ
	2617199	0.029	6.9	7.4	95		→	2.2+			13186.9		12326.0								
	2646585	0.021																			
		0.020																			
	2687909	0.021	6.9	7.3	80		→	2.2+	38076		13194.0		12327.0						180		Ⓞ
	2708965	0.020	6.9	7.3	80		→	2.2+			13196.1		12327.0						180		Ⓞ
	2728603	0.029	6.9	7.2	75		→	2.2+	381250		13199.2		12327.0						180		Ⓞ
	2767831	0.029	7.0	7.3			→	2.2+	381478		13200.3		12327.0						160		Ⓞ
	2797059	0.158	7.0	7.4			→	2.2+			13204.9		12327.0								Ⓞ
	2813879	0.024	6.8	7.3			→	1.6			13206.4		12327.0								
		0.024																			
	2854948	0.020	6.9	7.4	60		→	2.2+	382357		13210.3		12329.0	1.0					180		Ⓞ
	2879532	0.053	7.0	7.3	100		→	2.0			13212.1		12320.0						160		Ⓞ
	2932326	0.027	6.9	7.4	90		→	2.2			13214.1		12334.3						180		Ⓞ
	2959729	0.033	6.9	7.3	90		→	2.2+	383278		13217.1		12334.3								
	2993014	0.028	6.9	7.3	90		→	2.2+			13220.3		12334.3								
	3020765	0.030																			
		0.029																			
	3086370	0.029	7.0	7.2	80		→	2.2+	384345		13228.8		12334.5						200		Ⓞ
	3104079	0.031	6.9	7.4	80		→	2.2+	384621		13229.1		12337.4						180		Ⓞ
	3140064	0.030	7.0	7.4	70		→	2.2+			13232.6		12337.4								
	3170920	0.031	7.0	7.3	71		→	2.2+	385166		13235.6		12337.4								
Total			10.36																		

2.016

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

PERMITTEE NAME: Labrador Utilities, Inc.  
 MAILING ADDRESS: 200 Weathersfield Avenue  
 Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012801

LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

FACILITY: Forest Lake Estates WWTP  
 LOCATION: 41311 Paquette Way  
 Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: R-001, including influent

FILE COPY

COUNTY: Pasco

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: Sept. 01, 2006 To: Sept. 30, 2006

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.119	MGD			0	Monthly	Calculations
PARAM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.216 (AADP)	MGD				Monthly	Calculation
Flow, to R-001	Sample Measurement	0.039	MGD			0	5 Days/Wk	Flow meters & totalizers
PARAM Code 50050 I Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.3	MG/L	0	Monthly	Calculations
PARAM Code 80082 Y Mon. Site No. BPA-01	Permit Requirement			20.0 (Ar. Avg.)	MG/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.6	MG/L	0	Every 2 Weeks	8-hr FPC
PARAM Code 80082 A Mon. Site No. BPA-01	Permit Requirement			30.0 (Mo. Avg.) 50.0 (Max.)	MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			3.7	MG/L	0	Monthly	Calculations
PARAM Code 00530 Y Mon. Site No. BPA-01	Permit Requirement			20.0 (Ar. Avg.)	MG/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			>2.0	MG/L	0	Every 2 Weeks	8-hr FPC
PARAM Code 00530 A Mon. Site No. BPA-01	Permit Requirement			30.0 (Mo. Avg.) 50.0 (Max.)	MG/L		Every Two Weeks	8-hour FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Shantavious S. Rainey / Lead Operator		(407) 948-9832	06/10/19

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

FACILITY: Forest Lake Estates WWTP  
 County: Pasco

MONITORING GROUP NUMBER: R-001  
 MONITORING PERIOD From: Sept - 01 - 2006 To

PERMIT NUMBER: FLA012801  
Sept - 30 - 2006

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				7.1	7.4		SU	0	5 Days/Wk	Grab
PARM Code 00400 A Mon. Site No. BFA-01	Permit Requirement				6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1.3			#/100ML	0	Monthly	Calculations
PARM Code 74055 Y Mon. Site No. BFA-01	Permit Requirement				200 (Ar. Avg.)			#/100ML		Monthly	Calculation
Coliform, Fecal	Sample Measurement				1.0	100 %	1.0	#/100ML	0	Every 2 Weeks	Grab
PARM Code 74055 A Mon. Site No. BFA-01	Permit Requirement				Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.0			MG/L	0	5 Days/Wk	Grab
PARM Code 50060 A Mon. Site No. BFA-01	Permit Requirement				0.5 (Min.)			MG/L		5 Days/Week	Grab
Sludge Production, Total	Sample Measurement	0						Gallons	0	Monthly	Calculation
PARM Code 49019 P Mon. Site No. OTH-01	Permit Requirement	Report (Mo. Total.)						Gallons		Monthly	Calculation
Flow, total plant	Sample Measurement	0.036		MGD					0	Monthly	Calculation
PARM Code 30050 P Mon. Site No. FLW-01	Permit Requirement	0.216 (3MADP)		MGD						Monthly	Calculation
Percent Capacity, (3MADP/Permitted Capacity) x 100	Sample Measurement				17			%	0	Monthly	Calculation
PARM Code 00180 I Mon. Site No. FLW-01	Permit Requirement				Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement				215			MG/L	0	Every 2 Weeks	8-hr FPL
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPL
Solids, Total Suspended	Sample Measurement				169			MG/L	0	Every 2 Weeks	8-hr FPL
PARM Code 00530 Q Mon. Site No. INF-01	Permit Requirement				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPL
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA012801  
From: Sept-01-2006

To: Sept-30-2006

Facility: Forest Lake Estates WWTF  
County: Pasco

	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100mL)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Ion. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	0.034				7.3		2.2			
2	0.034				7.3		2.0			
3	0.034									
4	0.038				7.4		2.1			
5	0.025				7.3		2.2			
6	0.037				7.4		2.2			
7	0.037				7.4		2.2			
8	0.029				7.3		5.0			
9	0.035									
10	0.034									
11	0.035				7.4		5.0			
12	0.032	5.0	72.0	>1.0	7.3		5.0		270	240
13	0.035				7.3		5.0			
14	0.033				7.4		1.0			
15	0.023				7.3		2.2			
16	0.033									
17	0.032									
18	0.034				7.2		2.2			
19	0.076				7.3		2.2			
20	0.062				7.3		2.2			
21	0.110				7.2		2.2			
22	0.042				7.3		2.2			
23	0.026									
24	0.026									
25	0.036				7.4		2.2			
26	0.032		72.0	>1.0	7.3		2.2		160	98
27	0.033				7.3		2.2			
28	0.038				7.2		2.2			
29	0.038	2.2			7.1		2.2			
30	0.058				7.1		2.2			
31										
Total	1.171	2	2	2	2.2		2.2		2	2
Mo. Avg.	0.039	3.6	2.0	1.0	7.3		2.2		215	169

PLANT STAFFING:

Day Shift Operator	Class: <u>C</u>	Certificate No: <u>12994</u>	Name: <u>Shantavious S. Rainey</u>
Evening Shift Operator	Class: <u>C</u>	Certificate No: <u>8045</u>	Name: <u>David Shoffstall</u>
Night Shift Operator	Class: <u>C</u>	Certificate No: <u>9767</u>	Name: <u>Keith Schneider</u>
Lead Operator	Class: <u>C</u>	Certificate No: <u>12994</u>	Name: <u>Shantavious S. Rainey</u>

LABRADOR WWTP

MONTHS

YEARS

DATE	TIME	FLOW METER		PH		CHLORINE			SPRAYFIELD		EFFLUENT		PUMPS			SLUDGE JUDGE			SETTLABILITY			CP
		Total Volume	Calculated Volume	Infl.	Effl.	Tank #1	Tank #2	Usage	Resid.	Marker	Resid.	#1	Run hrs	#2	Run hrs	#1	#2	#3	#1	#2	#3	
1		3202644	0.034	7.0	7.3	10		2.2+	385460		13238.7		12337.4							160		Ⓢ
2		3235098	0.034	6.8	7.3	10		2.0			13242.1		12332.4									
3			0.034																			
4		3203453	0.038	7.1	7.4			2.1			13246.1		12338.3									
5		3341567	0.025	7.1	7.3			2.2+	386736		13248.9		12342.1							180		Ⓢ
6		3366364	0.037	7.1	7.4			2.2+	386958		13248.8		12344.9							200		Ⓢ
7		3403462	0.037	7.0	7.4			2.2+														
8		3440560	0.029	7.0	7.3			5.0+	387627		13256.0		12344.9							190		Ⓢ
9		3469280	0.035								13258.9		13346.9									
10			0.034																			
11		3542251	0.035	6.9	7.4			5.0+			13266.1		12344.9							200		Ⓢ
12		3577672	0.032	7.0	7.3			5.0+			13269.8		12344.9							190		Ⓢ
13		3609980	0.035	7.0	7.3			5.0+	389162		13273.2		12344.9							150		Ⓢ
14		3644902	0.033	7.0	7.4			1.0			13275.1		12344.9							160		Ⓢ
15		3677913	0.023	6.9	7.3			2.2+			13277.9		12344.9							180		Ⓢ
16		3701291	0.033																			
17			0.032																			
18		3765893	0.034	6.9	7.2			2.2+	389457		13288.8		12344.9							190		Ⓢ
19		3799992	0.076	6.9	7.3			2.2+	389457		13292.2		12344.9							200		Ⓢ
20		3873715	0.062	7.0	7.3			2.2+	389458		13295.2		12344.9							190		Ⓢ
21		3913358	0.110	6.9	7.2			2.2+	389458		13301.3		12344.9							150		Ⓢ
22		3923762	0.042	7.0	7.3			2.2	389458		13304.1		12344.9							160		Ⓢ
23		3966179	0.036																			
24			0.036																			
25		4018549	0.036	7.0	7.4			2.2+	389430		13314.3		12344.9							180		Ⓢ
26		4054846	0.032	7.0	7.3			2.2+			13318.0		12344.9							160		Ⓢ
27		4086941	0.033	7.0	7.3			2.2+	390534		13321.4		12344.9							180		Ⓢ
28		4120092	0.038	6.9	7.2			2.2+	390800		13323.9		12347.2							190		Ⓢ
29		4157639	0.038	6.9	7.1			2.2	391147		13326.0		12349.3									
30		4195890	0.058	6.9	7.1			2.2														
31																						
Total				11.71																		
Mo. Avg				0.63																		

3813382

10.7

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

FILE COPY

693

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

P. 2  
8137807364  
Utilities, Inc  
Nov 27 06 09:29a

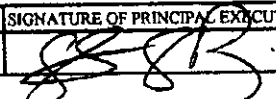
PERMITTEE NAME: Labrador Utilities Inc.  
 MAILING ADDRESS: 200 Weathersfield Avenue  
 Altamonte Springs, Fl 32714  
 FACILITY: Forest Lake Estates WWTF  
 LOCATION: 41311 Paquette Way  
 Zephyrhills, FL 33540  
 COUNTY: Pasco

PERMIT NUMBER: FLA012801  
 LIMIT: Final  
 CLASS SIZE: N/A  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: R-001, including Influent  
 NO DISCHARGE FROM SITE:  
 MONITORING PERIOD: From: Oct-01-2006 To: Oct-31-2006

REPORT: Montly  
 GROUP: Domestic

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.120	MGD			0	Monthly	Calculation
PARM Code 50050 Y	Permit Requirement	0.216 (AADF)	MGD				Monthly	Calculation
Mon. Site No. FLW-01								
Flow, to R-001	Sample Measurement	0.045	MGD			0	5 Days/Week	Flow Meter and totalizers
PARM Code 50050 1	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow Meter and totalizers
Mon. Site No. FLW-01								
BOD, Carbonaceous 5 day,20C	Sample Measurement			4.2	MG/L	0	Monthly	Calculation
Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)	MG/L		Monthly	Calculation
PARM Code 50050 1								
Mon. Site No. FLW-01								
BOD, Carbonaceous 5 day,20C	Sample Measurement			2.5	MG/L	0	Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	MG/L		Every Two Weeks	8-hour FPC
PARM Code 80082 Y				60.0 (Max)				
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			3.8	MG/L	0	Monthly	Calculation
PARM Code 00530 Y	Permit Requirement			20.0 (An.Avg.)	MG/L		Monthly	Calculation
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			3.0	MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 A	Permit Requirement			30.0 (Mo.Avg.)	MG/L		Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01				60.0 (Max)				

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

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Shantavious Rainey/Lead Operator		407 948-9832	06/11/24

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

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Forest Lake Estates WWTF  
 COUNTY: Pasco

MONITORING GROUP NUMBER:  
 MONITORING PERIOD:

R-001 PERMIT NUMBER: FLA012801  
 From: *Oct-01-2006* To: *Oct-31-2006*

P.3  
8137807364  
Utilities, Inc  
Nov 27 06 09:29a

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH					7.1	7.4		SU		5 Days/Week	Grab
PARM Code 00400 Mon. Site No. EFA-01	A				6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
Coliform, Fecal					1.3			#/100ML		Monthly	Calculation
PARM Code 74055 Mon. Site No. FLW-01	Y				200 (An. Avg.)			#/100ML		Monthly	Calculation
Coliform, Fecal					1.0	100	1.0	#/100ML		Every Two Weeks	Grab
PARM Code 74055 Mon. Site No. FLW-01	A				Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)					2.2			MG/L		5 Days/Week	Grab
PARM Code 50060 Mon. Site No. FLW-01	A				0.5 (Min.)			MG/L		5 Days/Week	Grab
Sludge Production, Total		0						Gallons		Monthly	Calculation
PARM Code 49019 Mon. Site No. OTH-01	P				Report (Mo. Total.)			Gallons		Monthly	Calculation
Flow, total plant		0.039		MGD						Monthly	Calculation
PARM Code 50050 Mon. Site No. EFA-01	P			MGD	0.216 (3MADF)					Monthly	Calculation
Percentage Capacity, (3MADF/Permitted Capacity) x 100					18			%		Monthly	Calculation
PARM Code 00180 Mon. Site No. FLW-01	I				Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C					128			MG/L		Every Two Weeks	8-hour FPC
PARM Code 80082 Mon. Site No. INF-01	G				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended					305			MG/L		Every Two Weeks	8-hour FPC
PARM Code 00530 Mon. Site No. INF-01	G				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC



**DAILY SAMPLE RESULTS - PART B**

Permit Number:  
Monitoring Period

FLA012801  
From: Oct-01-2006

To: Oct-31-2006

Facility: Labrador/Forest Lake Estates WWTF  
County: Pasco

	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	58,000									
2	85,000				7.4		2.2			
3	28,000				7.4		2.2			
4	65,000				7.4		2.2			
5	36,000				7.2		2.2			
6	25,000				7.2		2.2			
7	50,000				7.2		2.2			
8	50,000									
9	48,000				7.3		2.2			
10	33,000	2.6	4.0	1.0	7.3		2.2		95	250
11	33,000				7.4		2.2			
12	31,000				7.3		2.2			
13	40,000				7.4		2.2			
14	36,000				7.4		2.2			
15	35,000									
16	37,000				7.2		2.2			
17	37,000				7.1		2.2			
18	61,000				7.3		2.2			
19	48,000				7.4		2.2			
20	30,000				7.5		2.2			
21	33,000									
22	32,000									
23	42,000				7.4		2.2			
24	118,000	2.4	2.0	1.0	7.4		2.2		160	360
25	35,000				7.4		2.2			
26	41,000				7.4		2.2			
27	49,000				7.4		2.2			
28	48,000									
29	48,000									
30	38,000				7.4		2.2			
31	45,000				7.4		2.2			
Total	1,395,000	2	2	2	24		24		2	2
Mo. Avg.	45,000	2.5	3.0	1.0	7.3		2.2		128	305

**PLANT STAFFING:**

Day shift Operator      Class: C      Certificate No:12294      Name:Shantavious S. Rainey

Evening Shift Operator      Class:C      Certificate No:8040      Name:David E. Shoffstall

Night Shift Operator      Class: \_\_\_\_\_      Certificate No: \_\_\_\_\_      Name: \_\_\_\_\_

Lead Operator      Class: C      Certificate No:12294      Name:Shantavious S. Rainey

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

**WASTE NAME:** Labrador Utilities Inc.  
**WASTE ADDRESS:** 200 Weathersfield Avenue  
 Altamonte Springs, FL 32714

**PERMIT NUMBER:** FLA012801

**LIMIT:** Final  
**CLASS SIZE:** N/A

**REPORT GROUP:** Monthly Domestic

FILE COPY

**CITY:** Forest Lake Estates WWTF  
**LOCATION:** 41311 Paquette Way  
 Zephyrhills, FL 33540

**MONITORING GROUP NUMBER:** R-001  
**MONITORING GROUP DESC:** R-001, including Influent

**CITY:** Pasco

**NO DISCHARGE FROM SITE:**  
**MONITORING PERIOD**

From: Nov 01, 2006 to: Nov 30, 2006

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
R-001 Code 50050 Y Site No. FLW-01	Sample Measurement	0.113		MGD				0	Monthly	Calculation
	Permit Requirement	0.216 (AADF)		MGD					Monthly	Calculation
R-001 Code 50050 I Site No. FLW-01	Sample Measurement	0.059		MGD				0	5 Days/Week	Flow Meter and totalizers
	Permit Requirement	Report (Mo. Avg.)		MGD					5 Days/Week	Flow Meter and totalizers
Carbonaceous 5 day, 20C Code 50050 I Site No. FLW-01	Sample Measurement				2.0		MG/L	0	Monthly	Calculation
	Permit Requirement				20.0 (An. Avg.)		MG/L		Monthly	Calculation
Carbonaceous 5 day, 20C Code 80082 Y Site No. EFA-01	Sample Measurement				2.0	2.0	MG/L	0	Every Two Weeks	8-hour FPC
	Permit Requirement				30.0 (Mo. Avg.)	60.0 (Max)	MG/L		Every Two Weeks	8-hour FPC
Total Suspended Code 00530 Y Site No. EFA-01	Sample Measurement				2.0		MG/L	0	Monthly	Calculation
	Permit Requirement				20.0 (An. Avg.)		MG/L		Monthly	Calculation
Total Suspended Code 00530 A Site No. EFA-01	Sample Measurement				2.5	4.0	MG/L	0	Every Two Weeks	8-hour FPC
	Permit Requirement				30.0 (Mo. Avg.)	60.0 (Max)	MG/L		Every Two Weeks	8-hour FPC

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

<b>NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	<b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	<b>TELEPHONE NO.</b>	<b>DATE (YY/MM/DD)</b>
Avlous Rainey/Lead Operator		407 948-9832	06/12/26

LIST OF VIOLATIONS OR EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

ITY: Forest Lake Estates WWTF  
 TY: Pasco

MONITORING GROUP NUMBER:  
 MONITORING PERIOD:

R-001 PERMIT NUMBER: FLA012801  
 From: 11-01-2006 To: 11-30-2006

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Code 00400 A Site No. EFA-01	Sample Measurement				6.8	7.4		SU	0	5 Days/Week	Grab
	Permit Requirement				6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
m, Fecal Code 74055 Y Site No. FLW-01	Sample Measurement							#/100ML	0	Monthly	Calculation
	Permit Requirement				200 (Ar. Avg.)			#/100ML		Monthly	Calculation
m, Fecal Code 74055 A Site No. FLW-01	Sample Measurement				2.5	100	4.0	#/100ML	0	Every Two Weeks	Grab
	Permit Requirement				Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Residual Chlorine (Portion) Code 50060 A Site No. FLW-01	Sample Measurement				0.8			MG/L	0	5 Days/Week	Grab
	Permit Requirement				0.5 (Min.)			MG/L		5 Days/Week	Grab
Production, Total Code 49019 P Site No. OTH-01	Sample Measurement	0						Gallons	0	Monthly	Calculation
	Permit Requirement	Report (Mo. Total.)						Gallons		Monthly	Calculation
Total plant Code 50050 P Site No. EFA-01	Sample Measurement	0.048		MGD					0	Monthly	Calculation
	Permit Requirement	0.216 (3MADF)		MGD						Monthly	Calculation
Storage Capacity, (DF/Permitted Capacity) x Code 00180 I Site No. FLW-01	Sample Measurement				22			%	0	Monthly	Calculation
	Permit Requirement				Report			%		Monthly	Calculation
Carbonaceous 5 day, 20C Code 80082 O Site No. INF-01	Sample Measurement				130			MG/L	0	Every Two Weeks	8-hour FPC
	Permit Requirement				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Total Suspended Code 00530 O Site No. INF-01	Sample Measurement				225			MG/L	0	Every Two Weeks	8-hour FPC
	Permit Requirement				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										

Permit Number:  
Monitoring Period

FLA012801  
From: 11-01-2006 To: 11-30-06

Facility: Labrador/Forest Lake Estates WWTF  
County: Pasco

Code	Flow (MGD) R001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	50060	49019	80082	00530
1	42,000				7.4		2.2			
2	54,000				7.4		2.2			
3	38,000				7.4		2.2			
4	53,000									
5	53,000									
6	65,000				7.4		2.2			
7	71,000				7.3		2.2			
8	57,000	2.0	4.0	4.0	7.4		2.2		200	250
9	68,000				7.4		2.2			
10	96,000				7.4		2.2			
11	41,000				7.3		2.1			
12	41,000									
13	55,000				7.4		2.2			
14	41,000				7.4		2.0			
15	60,000				7.4		2.2			
16	44,000				7.4		2.2			
17	132,000				7.4		2.2			
18	73,000				7.3		2.0			
19	73,000									
20	60,000				7.4		2.2			
21	60,000	2.0	2.0	1.0	7.4		2.2		60	200
22	69,000				7.4		2.2			
23	57,000				7.4		2.2			
24	51,000				7.3		2.2			
25	50,000									
26	50,000									
27	52,000				7.4		2.2			
28	46,000				7.4		1.0			
29	61,000				7.4		0.8			
30	51,000				7.4		2.2			
31										
<b>Total</b>	<b>1,784,000</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>24</b>		<b>24</b>		<b>2</b>	<b>2</b>
<b>Mo. Avg.</b>	<b>59,000</b>	<b>2.0</b>	<b>3.0</b>	<b>2.5</b>	<b>7.4</b>		<b>2.1</b>		<b>130</b>	<b>225</b>

PLANT STAFFING:

Day shift Operator	Class: C	Certificate No:12294	Name:Shantavious S. Rainey
Evening Shift Operator	Class:C	Certificate No:8040	Name:David E. Shoffstall
Night Shift Operator	Class:_____	Certificate No:_____	Name:_____
Lead Operator	Class: C	Certificate No:12294	Name:Shantavious S. Rainey

PA File No. FLA012801-005-DW2P  
DEP Form 62-620.910(10), Effective November 28, 1994



**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3351, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Labrador Utilities Inc.  
 MAILING ADDRESS: 200 Weathersfield Avenue  
 Altamonte Springs, FL 32714  
 FACILITY: Forest Lake Estates WWTF  
 LOCATION: 41311 Paquette Way  
 Zephyrhills, FL 33540  
 COUNTY: Pasco

PERMIT NUMBER: FLA012801  
 LIMIT: Final  
 CLASS SIZE: N/A  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: R-001, including Influent  
 NO DISCHARGE FROM SITE:  
 MONITORING PERIOD: From: Dec 01, 2006 To: Dec 31, 2006

**FILE COPY**  
 REPORT: Monthly  
 GROUP: Domestic

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.103	MGD			0	Monthly	Calculation
PARM Code 50050 Y	Permit Requirement	0.216 (AADF)	MGD				Monthly	Calculation
Mon. Site No. FLW-01								
Flow, to R-001	Sample Measurement	0.050	MGD			0	5 Days/Week	Flow Meter and totalizers
PARM Code 50050 1	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow Meter and totalizers
Mon. Site No. FLW-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.2	MG/L	0	Monthly	Calculation
Mon. Site No. EFA-01	Permit Requirement			20.0 (An. Avg.)	MG/L		Monthly	Calculation
PARM Code 50050 1								
Mon. Site No. FLW-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.0	MG/L	0	Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.)	MG/L		Every Two Weeks	8-hour FPC
PARM Code 80082 Y				60.0 (Max)				
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			4.0	MG/L	0	Monthly	Calculation
PARM Code 00530 Y	Permit Requirement			20.0 (An. Avg.)	MG/L		Monthly	Calculation
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			4.0	MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 A	Permit Requirement			30.0 (Mo. Avg.)	MG/L		Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01				60.0 (Max)				

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

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Shantavious Rainey/Lead Operator		407 948-9832	7/1/2022

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

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Forest Lake Estates WWTF  
 COUNTY: Pasco

MONITORING GROUP NUMBER:  
 MONITORING PERIOD

R-001  
 From: Dec 01, 2006

PERMIT NUMBER: FLA012801  
 To: Dec 31, 2006

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH PARM Code 00400 Mon. Site No. EFA-01	A	Sample Measurement			7.2	7.4		SU	0	5 Days/Week	Grab
		Permit Requirement			6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
Coliform, Fecal PARM Code 74055 Mon. Site No. FLW-01	Y	Sample Measurement			1.6			#/100ML	0	Monthly	Calculation
		Permit Requirement			200 (An. Avg.)			#/100ML		Monthly	Calculation
Coliform, Fecal PARM Code 74055 Mon. Site No. FLW-01	A	Sample Measurement			1.0	100	1.0	#/100ML	0	Every Two Weeks	Grab
		Permit Requirement			Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection) PARM Code 50060 Mon. Site No. FLW-01	A	Sample Measurement			0.8			MG/L	0	5 Days/Week	Grab
		Permit Requirement			0.5 (Min.)			MG/L		5 Days/Week	Grab
Sludge Production, Total PARM Code 49019 Mon. Site No. OTH-01	P	Sample Measurement	18750					Gallons	0	Monthly	Calculation
		Permit Requirement	Report (Mo. Total.)					Gallons		Monthly	Calculation
Flow, total plant PARM Code 50050 Mon. Site No. EFA-01	P	Sample Measurement	0.051		MGD				0	Monthly	Calculation
		Permit Requirement	0.216 (3MADE)		MGD					Monthly	Calculation
Percentage Capacity, (3MADF/Permitted Capacity) x 100 PARM Code 00180 Mon. Site No. FLW-01	I	Sample Measurement			11			%	0	Monthly	Calculation
		Permit Requirement			Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C PARM Code 80082 Mon. Site No. INF-01	G	Sample Measurement			71			MG/L	0	Every Two Weeks	8-hour FPC
		Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended PARM Code 00530 Mon. Site No. INF-01	G	Sample Measurement			270			MG/L	0	Every Two Weeks	8-hour FPC
		Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
		Sample Measurement									
		Permit Requirement									

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Utilities, Inc

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P. 12

**DAILY SAMPLE RESULTS - PART B**

Permit Number: FLAD12801      Facility: Labrador/Forest Lake Estates WWTF  
 Monitoring Period: From: Dec 01, 2006      To: Dec 31, 2006      County: Pasco

	Flow (MGD) R001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	50,000				7.4		2.2			
2	47,000				7.4		2.0			
3	47,000									
4	44,000				7.4		2.2			
5	49,000	2.0	2.0	1.0	7.3		2.2		78	310
6	46,000				7.3		2.2			
7	46,000				7.3		2.2			
8	61,000				7.3		2.2			
9	44,000				7.3		2.2			
10	44,000									
11	54,000				7.3		2.2			
12	68,000				7.3		2.2			
13	70,000				7.4		2.2			
14	18,000				7.4		2.2			
15	54,000				7.3		2.2			
16	50,000									
17	50,000									
18	50,000				7.2		2.2	18750		
19	50,000	3.9	6.0	1.0	7.3		2.2		63	230
20	45,000				7.2		2.2			
21	54,000				7.2		2.2			
22	54,000				7.3		2.2			
23	54,000									
24	54,000									
25	48,000				7.2		2.2			
26	55,000				7.2		2.2			
27	48,000				7.2		2.2			
28	47,000				7.3		2.0			
29	50,000				7.3		1.9			
30	50,000				7.3		2.0			
31										
<b>Total</b>	<b>1,501,000</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>24</b>		<b>24</b>	<b>1</b>	<b>2</b>	<b>2</b>
<b>Mo. Avg.</b>	<b>50,000</b>	<b>3.0</b>	<b>4.0</b>	<b>1.0</b>	<b>7.3</b>		<b>2.2</b>	<b>18750</b>	<b>71</b>	<b>270</b>

**PLANT STAFFING:**

Day shift Operator      Class: C      Certificate No: 12294      Name: Shantavious S. Rainey  
 Evening Shift Operator      Class: C      Certificate No: 8040      Name: David E. Shoffstall  
 Night Shift Operator      Class: \_\_\_\_\_      Certificate No: \_\_\_\_\_      Name: \_\_\_\_\_  
 Lead Operator      Class: C      Certificate No: 12294      Name: Shantavious S. Rainey

PA File No. FLA012801-005-DW2P  
 DEP Form 62-820.910(10), Effective November 29, 1994



# LABRADOR/FOREST LAKES ESTATES (693) WWTF DAILY OPERATIONS & LABORATORY ANALYSIS LOG

Month: DECEMBER

Year: 2006

Date	Flow Meter		pH		Chlorine				Sprayfield		Effluent Pump				Sludge Judge AM/PM			Settleability			Rain Gauge	Operator						
	Total Volume	Interval Volume	Influent	Effluent	#1	#2	Usage	CL2 Residue	Meter	Run Hours	#1	Run Hours	#2	Run Hours	Clarifier #1	Clarifier #2	Clarifier #3	Plant/Train #1	Plant/Train #2	Plant/Train #3								
1	8148479	0.050	6.9	7.4				2.2																				
2	8178442	0.047	6.9	7.4				2.0			13530.1		18528.7															DES
3		0.047																										
4	8291758	0.044	6.9	7.4				2.2			13543.3		12530.5	6.0	3.0	0.5		450	320	180	0.0							
5	8335971	0.049	7.0	7.3				2.2			13542.1		12535.2	5.0	3.0	1.0		430	300	150	0.0							
6	8384549	0.046	6.9	7.3				2.2	421396		13549.9		12537.3	6.0	3.0	1.0		450	320	150	0.0							
7		0.046	6.9	7.3				2.2			13552.1		12540.0	5.0	4.0	3.5		450	320	180	0.0							
8	8476823	0.061	6.9	7.3				2.2	422412		13555.7		12546.3	4.0	4.0	3.5												
9	8537642	0.044	6.9	7.3				2.2			13562.0		12547.8														DES	
10		0.044																										
11	8625274	0.054	6.9	7.3				2.2	423787		13568.6		12557.0	4.0	3.0	1.0		250	200	100								
12	8678220	0.068	6.9	7.3				2.2			13573.7		12557.2	4.0	3.0	1.0												
13	8746589	0.070	6.9	7.4				2.2	424359		13580.1		12557.2	3.5	3.5	4.5		250	200	90	0.1							
14	8816738	0.068	6.9	7.4				2.2			13582.2		12561.9	2.0	1.5	4.5		250	180	90	0.1							
15	8835091	0.054	6.9	7.3				2.2	424457		13586.4		12565.3	3.0	2.0	1.5		200	200	180								
16	8889199	0.050																										
17		0.050																										
18	8928742	0.050	6.9	7.2				2.2	426714		13598.4		12572.8	3.5	1.0	1.5		300	2100	200								
19	8935820	0.050	6.8	7.3				2.2			13598.4		12578.9	3.5	1.5	2.0		300	2100	210								
20	8989003	0.045	6.8	7.2				2.2	427967		13598.4		12579.9	3.0	1.5	2.0		360	2100	210								
21	9134288	0.054	6.8	7.2				2.2			13598.4		12587.4	3.0	2.0	2.0		360	120	220								
22	9189102	0.054	6.8	7.3				2.2			13598.4		12604.6	3.5	2.5	2.5		360	120	220								
23	9259925	0.054																										
24		0.054																										
25	9328824	0.044	6.9	7.2				2.2			13607.2		12620.8	3.5	3.0	3.0		360	200	200								
26	9416369	0.055	6.9	7.2				2.2						3.5	2.0	3.0		360	200	200								
27	9471234	0.048	6.9	7.2				2.2			13619.9		12621.0	3.5	2.0	3.0		360	200	200								
28	9519189	0.047	7.0	7.3				1.9			13619.9		12628.4	6.0	2.0	3.0		380	200	200								
29	9565905	0.050	6.9	7.3				1.9			13619.9		12635.0	5.0	2.5	3.0		380	200	210								
30	9571167	0.050	7.0	7.3				2.0			13619.9		12644															
31																												
Total		1.601																										
Ma. Avg.		0.050																										

1/1/07 9577905 | 7.0 7.3 | 1.8 436004 | 13628.2 | 126504

**2007**

**MONTHLY OPERATION REPORTS**

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

071

FILE COPY



P.1

8137807364

Utilities, Inc

Feb 05 07 11:04a

**I. General Information** *January/2007*

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

PWS Name:	Labrador Utilities Inc.	PWS Identification Number:	6514842
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:	1178	Total Population Served at End of Month:	2,356
PWS Owner:	Utilities Inc. of Florida	Contact Person's Title:	Regional Director
Contact Person:	Patrick Flynn	Contact Person's Title:	Regional Director
Contact Person's Mailing Address:	200 Weathersfield	City:	Altamont Springs
Contact Person's Telephone Number:	407-869-1919	State:	Florida
Contact Person's E-Mail Address:	PFY@LABLORUTILITIESINC.COM	Zip Code:	32714
		Contact Person's Fax Number:	407-869-6961

**B. Water Treatment Plant Information**

Plant Name:	Forest Lake Estates	Plant Telephone Number:	813-780-7364
Plant Address:	41511 Paquette Way	City:	Zephyrhills
		State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	Zip Code:	33540
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	564,000		
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:	Shantavious Rainey	C	14160	Days 1st Shift
Other Operators:	Eave Shoffstall	C	7799	Days 1st Shift

**II. Certification**

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]* 2/5/07  
Signature and Date

Shantavious Rainey  
Printed or Typed Name

C-14160  
License Number

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

PWS Identification Number: 6514842 Plant Name: Labrador/Forest Lakes Estates

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

Mean 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 Demonstrate Four-Log Virus Inactivation, if Applicable*											
				CT Calculations					UV Dose						
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours in Plant Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Residual Disinfection Concentration (C) Before or at First Customer Peak Flow, mg/L	Disinfection Contact Time (T) at C Measurement Point During Peak Flow, minutes	Provided Before or at First Customer Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required, mg/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2	Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water Components Out of Operation	
1	x	24	63000		1.1								0.6		
2	x	24	88000		1.0								0.6		
3	x	24	114000		1.1								0.6		
4	x	24	108000		1.3								0.6		
5	x	24	111000		1.0								0.6		
6	x	24	83000		1.1								0.6		
7		24	93000												
8	x	24	130000		1.1								0.6		
9	x	24	78000		1.1								0.6		
10	x	24	93000		1.1								0.5		
11	x	24	123000		1.1								0.6		
12	x	24	144000		1.0								0.5		
13	x	24	81000		1.0								0.5		
14		24	91000												
15	x	24	163000		1.0								0.5		
16	x	24	67000		0.8								0.6		
17	x	24	111000		0.9								0.6		
18	x	24	148000		0.9								0.6		
19	x	24	110000		1.0								0.6		
20	x	24	116000		1.0								0.5		
21		24	118000												
22	x	24	67000		1.0								0.5		
23	x	24	110000		1.0								0.5		
24	x	24	78000		1.0								0.5		
25	x	24	118000		1.0								0.6		
26	x	24	133000		0.9								0.7		
27	x	24	78000		1.0								0.6		
28		24	78000												
29	x	24	112000		0.8								0.7		
30	x	24	129000		1.2								0.6		
31	x	24	126000		1.0								0.5		
Total			3259000												
Average			105000												
Maximum			153000												

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

P. 2  
8137807364  
Utilities, Inc  
Feb 05 07 11:04a

# LABRADOR/FOREST LAKE ESTATES (693) WTP DAILY OPERATIONS LOG

MONTH: January

YEAR: 2007

P.4

8137807364

Utilities, Inc

Feb 05 07 11:05a

Date	Well Meter Readings				Total Flow	RV Park Meter		CL2 Readings		Electric Meter	KWH Used	Operator
	Well #1 Meter Reading	Interval Volume	Well #2 Meter Reading	Interval Volume		Total Volume	Interval Volume	Point of Entry	Remote Tap			
1	55657	15000	148904	48000	83000			1.1	0.5	98726		C7899 DES
2	55672	15000	148952	6000	89000			1.0	0.5	98827		C14160 BR
3	55690	18000	14913	5000	114000			1.1	0.6	98966		C14160(SH)
4	55729	25000	14979.8	83000	169000			1.3	0.6	99130		C14160(SH)
5	55748	26000	14982	85000	111000			1.0	0.5	99130		C14160(SH)
6	55774	30000	149867	62000	93000			1.1	0.5	99425		C-7755 DES
7		30000		62000	93000							
8	55710	30000	149739	100000	130000			1.1	0.6	99739		C14160
9	55840	17000	149749	59000	76000			1.1	0.6	99997		C14160
10	55857	28000	149550	65000	93000			1.1	0.5	66		C14160
11	55855	28000	149700	95000	123000			1.1	0.6	20 X		C14160
12	55913	28000	149710	114000	144000			1.0	0.5	411		C14160
13	55943	30000	149824	69000	91000			1.0	0.5	65 X		C14160
14		30000		69000	91000							
15	55989	30000	149863	118000	153000	1354		1.0	0.5	950		C14160
16	56022	30000	149080	44000	57000			0.8	0.5	1197		C14160
17	56035	30000	148134	79000	111000			0.9	0.5	1289		C14160
18	56067	34000	149203	115000	149000			0.9	0.5	1458		C14160 SH
19	56101	35000	148318	85000	110000			1.0	0.6	1695		C14160
20	56136	26000	148403	92000	118000			1.0	0.5	1876		C-7755
21		22000		92000	119000			1				
22	56179	11000	14850	51000	67000			1.0	0.5	2257		C14160
23	56195	20000	148639	85000	110000			1.0	0.5	2372		C14160 SH
24	56320	23000	148723	52000	75000			1.0	0.5	2551		C13067
25	56343	21000	148795	90000	116000			1.0	0.4	2658		C13067 D14
26	56262	30000	148465	103000	131000		0.9	0.7	2898		C14160	
27	56349	15000	148908	80000	78000			1.0	0.5	3063		C13067 D10
28		18000		10000	78000							
28	56335	30000	149088	87000	112000			0.8	0.7	3311		C14160
30	56360	38000	149175	91000	129000			1.2	0.8	3168		C14160
31	56308	29000	149260	97000	126000			1.0	0.5	3655		C14160
Total												
Mo. Avg.	56427		149763									

56427

149763

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



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P.2

8137807364

Utilities, Inc

Mar 02 07 02:13P

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

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

PWS Name:	Labrador Utilities Inc.	PWS Identification Number:	6514842
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:	1178	Total Population Served at End of Month:	2,356
PWS Owner:	Utilities Inc. of Florida		
Contact Person:	Patrick Flynn	Contact Person's Title:	Regional Director
Contact Person's Mailing Address:	200 Weathersfield	City:	Altamont Sprin
Contact Person's Telephone Number:	407-869-1919	State:	Florida
Contact Person's E-Mail Address:	p.c.flynn@utilitiesinc-usa.com	Zip Code:	32714
		Contact Person's Fax Number:	407-869-6961

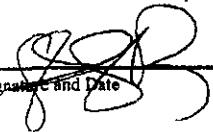
**B. Water Treatment Plant Information**

Plant Name:	Forest Lake Estates	Plant Telephone Number:	813-780-7364
Plant Address:	41311 Paquette Way	City:	Zephyrhills
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:	564,000	Zip Code:	33540
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:	Shantavious Rainey	C	14160	Days 1st Shift
Other Operators:	Dave Shoffstall	C	7799	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.


3/2/07
Shantavious Rainey
C-14160  
 Signature and Date Printed or Typed Name License Number

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

PWS Identification Number: 6514842 Plant Name: Labrador/Forest Lakes Estates

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

Mean 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 Demonstrate Four-Log Virus Inactivation, if Applicable\*

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Plant Hours in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations				UV Dose				Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water Components Out of Operation
				Peak Flow Rate, gpd.	Residual Disinfection Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfection Contact Time (T) at Measurement Point During Peak Flow, minutes	Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum of CT Required, mg/L	Lowest Operating UV Dose, mW-sec/cm2		
1	X	24	119000		1.2							0.5	
2	X	24	109000		1.0							0.5	
3	X	24	75000		1.1							0.5	
4		24	74000										
5	X	24	108000		1.0							0.5	
6	X	24	131000		1.5							0.9	
7	X	24	172000		1.2							0.5	
8	X	24	51000		1.5							0.7	
9	X	24	75000		1.0							0.8	
10	X	24	77000		1.3							0.7	
11		24	78000										
12	X	24	107000		1.2							0.7	
13	X	24	152000		1.2							0.6	
14	X	24	120000		1.0							0.5	
15	X	24	87000		1.2							0.6	
16	X	24	171000		1.1							0.5	
17	X	24	84000		1.0							0.6	
18		24	100000										
19	X	24	168000		1.0							0.5	
20	X	24	73000		2.0							1.2	
21	X	24	113000		1.0							0.6	
22	X	24	119000		1.5							1.0	
23	X	24	217000		2.8							2.0	
24	X	24	79000		1.2							0.6	
25		24	78000										
26	X	24	109000		1.5							0.6	
27	X	24	109000		1.9							0.8	
28	X	24	112000		1.6							0.8	
29													
30													
31													
Total			2742000										
Average			109680										
Maximum			217000										

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

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Utilities, Inc  
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# LABRADOR/FOREST LAKE ESTATES (693) WTP DAILY OPERATIONS LOG

MONTH: *FEB*

YEAR: *2007*

Date	Well Meter Readings				Total Flow	RV Park Meter		CL2 Readings		Electric Meter	KWH Used	Operator
	Well #1 Meter Reading	Interval Volume	Well #2 Meter Reading	Interval Volume		Total Volume	Interval Volume	Point of Entry	Remote Tap			
Pervolus Day	<i>56398</i>		<i>149266</i>									
1	<i>56427</i>	<i>22000</i>	<i>149363</i>	<i>47000</i>	<i>119000</i>			<i>1.2</i>	<i>0.5</i>	<i>3889</i>		<i>RCM160</i>
2	<i>56449</i>	<i>25000</i>	<i>149438</i>	<i>84000</i>	<i>109000</i>			<i>1.0</i>	<i>0.5</i>	<i>4057</i>		<i>RCM160</i>
3	<i>56474</i>	<i>17000</i>	<i>149522</i>	<i>58000</i>	<i>75000</i>			<i>1.1</i>	<i>0.5</i>	<i>4226</i>		<i>RCM160</i>
4		<i>17000</i>		<i>57000</i>	<i>74000</i>							
5	<i>56508</i>	<i>24000</i>	<i>149637</i>	<i>84000</i>	<i>108000</i>			<i>1.0</i>	<i>0.5</i>	<i>4471</i>		<i>RCM160</i>
6	<i>56532</i>	<i>31000</i>	<i>149721</i>	<i>100000</i>	<i>131000</i>			<i>1.5</i>	<i>0.7</i>	<i>4647</i>		<i>RCM160</i>
7	<i>56561</i>	<i>49000</i>	<i>149921</i>	<i>123000</i>	<i>172000</i>			<i>1.2</i>	<i>0.5</i>	<i>4861</i>		<i>RCM160</i>
8	<i>56576</i>	<i>16000</i>	<i>149944</i>	<i>40000</i>	<i>51000</i>			<i>1.5</i>	<i>0.7</i>	<i>5121</i>		<i>RCM160</i>
9	<i>56621</i>	<i>40000</i>	<i>149984</i>	<i>35000</i>	<i>75000</i>			<i>1.0</i>	<i>0.8</i>	<i>5208</i>		<i>RCM160</i>
10	<i>56661</i>	<i>18000</i>	<i>150119</i>	<i>57000</i>	<i>77000</i>			<i>1.3</i>	<i>0.7</i>	<i>5445</i>		<i>RCM160</i>
11		<i>17000</i>		<i>59000</i>	<i>76000</i>							
12	<i>56696</i>	<i>24000</i>	<i>150237</i>	<i>83000</i>	<i>167000</i>	<i>1721</i>		<i>1.2</i>	<i>0.7</i>	<i>5748</i>		<i>RCM160</i>
13	<i>56720</i>	<i>35000</i>	<i>150320</i>	<i>117000</i>	<i>152000</i>			<i>1.2</i>	<i>0.6</i>	<i>5926</i>		<i>RCM160</i>
14	<i>56755</i>	<i>27000</i>	<i>150437</i>	<i>93000</i>	<i>120000</i>			<i>1.0</i>	<i>0.5</i>	<i>6177</i>		<i>RCM160</i>
15	<i>56782</i>	<i>15000</i>	<i>150530</i>	<i>52000</i>	<i>67000</i>			<i>1.2</i>	<i>0.6</i>	<i>6376</i>		<i>RCM160</i>
16	<i>56797</i>	<i>39000</i>	<i>150582</i>	<i>132000</i>	<i>171000</i>			<i>1.1</i>	<i>0.5</i>	<i>6469</i>		<i>RCM160</i>
17	<i>56836</i>	<i>19000</i>	<i>150714</i>	<i>65000</i>	<i>84000</i>			<i>1.0</i>	<i>0.6</i>	<i>6765</i>		<i>RCM160</i>
18		<i>18000</i>		<i>64000</i>	<i>100000</i>							
19	<i>56873</i>	<i>39000</i>	<i>150843</i>	<i>129000</i>	<i>168000</i>			<i>1.0</i>	<i>0.5</i>	<i>7043</i>		<i>RCM160</i>
20	<i>56912</i>	<i>160000</i>	<i>150972</i>	<i>57000</i>	<i>73000</i>			<i>2.0</i>	<i>1.2</i>	<i>7221</i>		<i>RCM160</i>
21	<i>56928</i>	<i>26000</i>	<i>151029</i>	<i>87000</i>	<i>113000</i>			<i>1.0</i>	<i>0.6</i>	<i>7446</i>		<i>RCM160</i>
22	<i>56954</i>	<i>27000</i>	<i>151116</i>	<i>92000</i>	<i>119000</i>			<i>1.5</i>	<i>1.0</i>	<i>7632</i>		<i>RCM160</i>
23	<i>56981</i>	<i>49000</i>	<i>151208</i>	<i>168000</i>	<i>217000</i>			<i>2.8</i>	<i>2.0</i>	<i>7839</i>		<i>RCM160</i>
24	<i>57030</i>	<i>17000</i>	<i>151376</i>	<i>162000</i>	<i>79000</i>			<i>1.2</i>	<i>0.6</i>	<i>8144</i>		<i>RCM160</i>
25		<i>16000</i>		<i>162000</i>	<i>78000</i>							
26	<i>57063</i>	<i>26000</i>	<i>151500</i>	<i>83000</i>	<i>109000</i>			<i>1.5</i>	<i>0.6</i>	<i>8459</i>		<i>RCM160</i>
27	<i>57089</i>	<i>21000</i>	<i>151583</i>	<i>83000</i>	<i>109000</i>			<i>1.9</i>	<i>0.8</i>	<i>8632</i>		<i>RCM160</i>
28	<i>57115</i>	<i>340000</i>	<i>151666</i>	<i>78000</i>	<i>112000</i>			<i>1.6</i>	<i>0.8</i>	<i>8816</i>		<i>RCM160</i>
29	<i>57149</i>		<i>151744</i>					<i>1.8</i>	<i>0.8</i>	<i>8976</i>		<i>RCM160</i>
30												
31												
Total												
Mo. Avg.												

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Utilities, Inc

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(17)

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



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P.2

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Utilities, Inc

Apr 09 07 10:33a

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

A. Public Water System (PWS) Information

Form with fields: PWS Name: Labrador Utilities Inc., PWS Identification Number: 6514842, PWS Type: Community, Number of Service Connections at End of Month: 1178, Total Population Served at End of Month: 2,356, PWS Owner: Utilities Inc. of Florida, Contact Person: Patrick Flynn, Contact Person's Title: Regional Director, Contact Person's Mailing Address: 200 Weathersfield, City: Altamont Sprin, State: Florida, Zip Code: 32714, Contact Person's Telephone Number: 407-869-1919, Contact Person's Fax Number: 407-869-6961, Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com

B. Water Treatment Plant Information

Form with fields: Plant Name: Forest Lake Estates, Plant Telephone Number: 813-780-7364, Plant Address: 41311 Paquette Way, City: Zephyrhills, State: Florida, Zip Code: 33540, Type of Water Treatment by Plant: Raw Ground Water, Permitted Maximum Day Operating Capacity of Plant, gallons per day: 564,000, Plant Category (per subsection 62-699.310(4), F.A.C.): IV, Plant Class (per subsection 62-699.310(4), F.A.C.): C. Includes a table for Licensed Operators with columns: Name, License Class, License Number, Day(s) / Shift(s) Worked. Operators listed: Shantavious Rainey (License C, 14160), Dave Shoffstall (License C, 7799).

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: [Signature] 4/9/07

Shantavious Rainey  
Printed or Typed Name

C-14160  
License Number

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

PWS Identification Number: 8514842 Plant Name: Labrador/Forest Lakes Estates

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

Mean 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 Demonstrate Four-Log Virus Inactivation, if Applicable*											
				CT Calculations					UV Dose						
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Plant Hours in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd	Residual Disinfection Concentration (C) Before or at First Customer Peak Flow, mg/L	Disinfection Contact Time (T) at Measurement Point During Peak Flow, minutes	Provided Before or at First Customer Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum of CT Required, mg/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2	Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water Components Out of Operation	
1		24	112000				1.8					0.8			
2		24	155000				1.8					0.8			
3		24	78000				1.3					0.6			
4		24	79000												
5		24	115000				1.5					0.7			
6		24	112000				1.5					0.7			
7		24	118000				1.3					0.7			
8		24	126000				1.5					0.6			
9		24	149000				1.2					0.6			
10		24	85000				1.0					0.5			
11		24	85000												
12		24	134000				1.0					0.5			
13		24	126000				1.2					0.5			
14		24	126000				1.5					0.5			
15		24	118000				1.1					0.5			
16		24	145000				1.1					0.5			
17		24	88000				1.0					0.5			
18		24	88000												
19		24	128000				1.2					0.5			
20		24	156000				1.4					0.5			
21		24	131000				1.0					0.5			
22		24	57000				1.4					0.7			
23		24	198000				1.2					0.7			
24		24	116000				1.4					0.6			
25		24	104000												
26		24	142000				1.4					0.7			
27		24	125000				1.2					0.8			
28		24	158000				1.5					0.8			
29		24	97000				1.6					0.5			
30		24	183000				1.3					0.6			
31		24	180000				1.1					0.5			
Total			3784000												
Average			122000												
Maximum			198000												

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

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# LABRADOR/FOREST LAKE ESTATES (693) WTP DAILY OPERATIONS LOG

MONTH: **March**

YEAR: **2007**

Date	Well Meter Readings				Total Flow	RV Park Meter		CL2 Readings		Electric Meter	KWH Used	Operator
	Well #1 Meter Reading	Interval Volume	Well #2 Meter Reading	Interval Volume		Total Volume	Interval Volume	Point of Entry	Remote Tap			
Pervious Day	57115		151666									
1	57149	34000	151744	78000	112000			1.8	0.8	8976		sr
2	57180	31000	151830	124000	155000			1.8	0.8	9164		sr
3	57216	18000	151954	60000	78000			1.3	0.6	9455		dh
4		18000		61000	79000							
5	57252	26000	152075	89000	115000	202100		1.5	0.7			sr
6	57278	25000	152164	87000	112000	204300		1.5	0.7			sr
7	57303	37000	152251	81000	118000			1.3	0.7			sr
8	57340	28000	152332	98000	126000	206000		1.5	0.6			sr
9	57368	35000	152430	114000	149000	207800		1.2	0.6			sr
10	57403	19000	152544	68000	86000			1	0.5			dh
11		20000		65000	85000							
12	57442	30000	152675	104000	134000			1	0.5			sr
13	57472	28000	152779	96000	126000			1.2	0.5			sr
14	57500	32000	152875	94000	126000	214700		1.5	0.5			sr
15	57532	32000	152969	88000	118000			1.1	0.5			sr
16	57564	33000	152055	112000	145000			1.1	0.5			sr
17	57597	19000	153167	67000	86000			1	0.5			dh
18		20000		68000	86000							
19	57636	29000	153300	99000	128000	221800		1.2	0.5			sr
20	57665	44000	153399	112000	158000			1.4	0.5			sr
21	57709	37000	153511	94000	131000			1	0.5			sr
22	57736	13000	153605	44000	57000			1.4	0.7			sr
23	57749	45000	153649	153000	198000			1.2	0.7			sr
24	57794	18000	153802	88000	116000			1.4	0.6			dh
25		17000		87000	104000							
26	57829	45000	153977	97000	142000			1.4	0.7			sr
27	57874	28000	154074	97000	125000	234800		1.2	0.6			sr
28	57902	43000	154171	115000	158000	235300		1.5	0.8			sr
29	57945	21000	154286	70000	91000	238200		1.6	0.6			sr
30	57966	37000	154356	126000	163000			1.3	0.6			sr
31	58003	41000	154482	139000	180000			1.1	0.5			dh
Total					3784000							
Mo. Avg.					122000			1.3	0.6			

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Utilities, Inc

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# LABRADOR/FOREST LAKES ESTATES (693) EMERGENCY GENERATOR LOG

Month: **March**

Year: **2007**

Date	Generator Runtime Hours			Is Generator Underload? YES or NO	Generator and Engine Data								Operator			
	Start Hours	Stop Hours	Total Run Hours		Voltage	Phase	Amps	Battery	Water	Temp.	Oil P.S.I.	Hertz		Fuel	Fuel Tank Level	Comments
1																
2		7003.3														
3																
4																
5																
6																
7	7003.3	7004.6	1.3	yes	490		0		177	62	62		>1/2	Underload		
8		7004.6														
9																
10																
11																
12																
13		7004.6														
14	7004.8	7006.1	1.5	yes	490		0		175	62	63		>1/2	Underload		
15																
16																
17																
18																
19		7006.1														
20																
21	7006.1	7007.3	1.2	yes	490		0		140	62	62		>1/2	Underload		
22																
23																
24																
25																
26																
27																
28	7007.3	7008.5	1.2	yes	490		0		170	62	62		>1/2	Underload		
29																
30																
31																
<b>Total</b>			<b>5.2</b>													
<b>Mo. Avg.</b>																

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Utilities, Inc

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



FILE COPY

General Information for the Month/Year of: April/2007

A. Public Water System (PWS) Information

PWS Name: Labrador Utilities Inc. PWS Identification Number: 6514842
PWS Type: [X] Community [ ] Non-Transient Non-Community [ ] Transient Non-Community
Number of Service Connections at End of Month: 1178 Total Population Served at End of Month: 2,356
PWS Owner: Utilities Inc. of Florida
Contact Person: Patrick Flynn Contact Person's Title: Regional Director
Contact Person's Mailing Address: 200 Weathersfield City: Altamont Springs State: Florida Zip Code: 32714
Contact Person's Telephone Number: 407-869-1919 Contact Person's Fax Number: 407-869-6961
Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com

B. Water Treatment Plant Information

Plant Name: Forest Lake Estates Plant Telephone Number: 813-780-7364
Plant Address: 41311 Paquette Way City: Zephyrhills State: Florida Zip Code: 33540
Type of Water Treatment by Plant: [X] Raw Ground Water [ ] Purchased Finished Water
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 564,000
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 Table:
Lead/Chief Operator: Shantavious Rainey License Class: C License Number: 14160 Day(s) / Shift(s) Worked: Days 1st Shift
Other Operators: Dave Shoffstall License Class: C License Number: 7799 Day(s) / Shift(s) Worked: Days 1st Shift

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: [Signature] 5/03/2007

Shantavious Rainey
Printed or Typed Name

C-14160
License Number

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

PWS Identification Number: 6514842 Plant Name: Labrador/Forest Lakes Estates

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

Mean 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 Demonstrate Four-Log Virus Inactivation, if Applicable\*

CT Calculations      UV Dose

Day of the Month	Days Visited by Operator (Place "X")	Plant Staffed or by Operator	Hours in Plant Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Residual Disinfection Concentration (C) Before or at First Customer Peak Flow, mg/L.	Disinfection Contact Time (T) at C Measurement Point During Peak Flow, minutes	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/L.	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2	Residual Disinfectant Concentration at Remote Distribution Point, mg/L.	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that involves Taking Water Components Out of Operation	
1			24	70000												
2	x		24	127000				2.2						0.8		
3	x		24	127000				1.6						0.8		
4	x		24	117000				1.2						0.5		
5	x		24	101000				1.5						0.8		
6	x		24	158000				1.6						0.7		
7	x		24	71000				1.2						0.5		
8			24	71000												
9	x		24	125000				1.1						0.8		
10	x		24	51000				1.2						0.8		
11	x		24	95000				1.2						0.6		
12	x		24	91000				1.4						0.8		
13	x		24	135000				1.2						0.8		
14	x		24	82000				1.2						0.8		
15			24	83000												
16	x		24	77000				1.1						0.5		
17	x		24	55000				1.0						0.6		
18	x		24	59000				0.8						0.6		
19	x		24	84000				1.5						0.8		
20	x		24	130000				1.6						0.7		
21	x		24	67000				1.1						0.5		
22			24	67000												
23	x		24	75000				1.2						0.6		
24	x		24	88000				1.1						0.6		
25	x		24	103000				1.6						0.6		
26	x		24	70000				1.4						0.8		
27	x		24	114000				1.6						0.8		
28	x		24	75000				1.1						0.6		
29			24	75000												
30	x		24	76000				1.1						0.6		
31			24													
<b>Total</b>				2719000												
<b>Average</b>				91000												
<b>Maximum</b>				158000												

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

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Utilities, Inc  
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# LABRADOR/FOREST LAKE ESTATES (693) WTP DAILY OPERATIONS LOG

MONTH: April

YEAR: 2007

Date	Well Meter Readings				Total Flow	RV Park Meter		CL2 Readings		Electric Meter	KWH Used	Operator
	Well #1 Meter Reading	Interval Volume	Well #2 Meter Reading	Interval Volume		Total Volume	Interval Volume	Point of Entry	Remote Tap			
Previous Day	58003		154482									
1		21000			70000							
2	58044	32000	154621	85000	127000	2423		2.2	0.6	15219		sr
3	58076	28000	154736	99000	127000			1.6	0.8	15464		sr
4	58104	34000	154835	83000	117000			1.2	0.5	15674		sr
5	58138	23000	154918	78000	101000	2474		1.5	0.8	15856		sr
6	58161	36000	154996	122000	158000	2482		1.6	0.7	16024		sr
7	58197	16000	155118	55000	71000			1.2	0.5	16288		dh
8		16000		55000	71000							
9	58229	28000	155228	97000	125000	2515		1.1	0.8	16335		sr
10	58257	12000	155325	39000	51000			1.2	0.8	16478		sr
11	58269	28000	155364	67000	95000			1.2	0.6	16836		sr
12	58297	20000	155431	71000	91000	2544		1.4	0.8	16985		sr
13	58317	31000	155602	104000	135000	2554		1.2	0.8	17137		sr
14	58348	18000	155606	64000	82000			1.2	0.6	17366		dh
15		19000		64000	83000							
16	58385	18000	155734	59000	77000	2581		1.1	0.5	17649		sr
17	58403	20000	155793	35000	55000			1	0.6	17780		sr
18	58423	24000	155863	35000	59000	2598		0.8	0.6	17935		sr
19	58447	19000	155920	65000	84000			1.5	0.8	18084		sr
20	58486	30000	155985	100000	130000			1.6	0.7	18211		sr
21	58496	15000	156085	52000	67000			1.1	0.5	18432		dh
22		15000		52000	67000							
23	58526	18000	156189	59000	75000			1.2	0.6	18660		sr
24	58542	21000	156248	67000	86000			1.1	0.6	18799		sr
25	58563	25000	156315	78000	103000			1.6	0.6	18950		sr
26	58588	16000	156393	54000	70000			1.4	0.8	19112		sr
27	58604	26000	156447	88000	114000			1.6	0.8	19240		sr
28	58630	17000	156535	58000	75000			1.1	0.6	19442		dh
29		17000		58000	75000							
30	58664	17000	156651	59000	76000			1.1	0.6	19707		sr
31												
Total					2719000							
Mo. Avg.					91000							

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Utilities, Inc

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# LABRADOR/FOREST LAKES ESTATES (693) EMERGENCY GENERATOR LOG

Month: **April**

Year: **2007**

Date	Generator Runtime Hours			Is Generator Underload? YES or NO	Generator and Engine Data										Operator	
	Start Hours	Stop Hours	Total Run Hours		Voltage	Phase	Amps	Battery	Water	Temp.	Oil P.S.I.	Hertz	Fuel	Fuel Tank Level		Comments
1																
2																
3		7008.6														
4		7008.6														
5	7008.6	7009.7	1.1	Yes	490		0			175	62		63	>1/2	Underload	
6		7009.7														
7																
8																
9																
10																
11	7009.7	7010.9	1.2	Yes	490		0			140	62		62	>1/2	Underload	
12		7010.9														
13																
14																
15																
16																
17		7010.9														
18	7010.9	7012.1	1.2	Yes	490		0			177	62		62	>1/2	Underload	
19		7012.1														
20																
21																
22																
23																
24																
25	7012.2	7013.4	1.2	Yes	490		0			140	62		62	>1/2	Underload	
26	7013.4															
27																
28																
29																
30																
31																
<b>Total</b>			<b>4.5</b>													
<b>Mo. Avg.</b>																

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



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Utilities, Inc

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P. 2

General Information for the Month/Year of: May 2007

**Public Water System (PWS) Information**

PWS Name:	Labrador Utilities Inc.	PWS Identification Number:	6514842
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:	1178	Total Population Served at End of Month:	2,356
PWS Owner:	Utilities Inc. of Florida		
Contact Person:	Patrick Flynn	Contact Person's Title:	Regional Director
Contact Person's Mailing Address:	200 Weathersfield	City:	Altamont Sprin State: Florida Zip Code: 32714
Contact Person's Telephone Number:	407-869-1919	Contact Person's Fax Number:	407-869-6961
Contact Person's E-Mail Address:	p.c.flynn@utilitiesinc-usa.com		

**Water Treatment Plant Information**

Plant Name:	Forest Lake Estates	Plant Telephone Number:	813-780-7364
Plant Address:	41311 Paquette Way	City:	Zephyrhills State: Florida Zip Code: 33540
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: 564,000

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:	Shantavious Rainey	C	14160	Days 1st Shift
Other Operators:	Dave Shoffstal	C	7799	Days 1st Shift

**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.

SR 6/6/07  
Signature and Date

Shantavious Rainey  
Printed or Typed Name

C-14160  
License Number

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

PWS Identification Number: 6514842 Plant Name: Labrador/Forest Lakes Estates

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

Mean 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 Demonstrate Four-Log Virus Inactivation, if Applicable*												
				CT Calculations						UV Dose						
Day of the Month	Days Staffed or Visited by Operator (Place "X")	Plant or Hours in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Residual Disinfection Concentration (C) Before or at First Customer Point During Peak Flow, mg/L	Disinfection Contact Time (T) at Measurement Point During Peak Flow, minutes	Provided Before or at First Customer Point During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required, mg/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2	Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water Components Out of Operation		
1	X	24	63000				1.2						0.6			
2	X	24	87000				1.2						0.6			
3	X	24	88000				1.2						0.6			
4	X	24	69000				1.2						0.6			
5	X	24	59000				1.2						0.6			
6		24	59000													
7	X	24	57000				1.1						0.6			
8	X	24	57000				1.1						2.6			
9	X	24	59000				1.1						0.6			
10	X	24	55000				1.2						0.6			
11	X	24	49000				1.0						0.5			
12	X	24	85000				1.0						0.6			
13		24	85000													
14	X	24	51000				0.8						0.5			
15	X	24	57000				0.9						0.5			
16	X	24	62000				1.0						0.5			
17	X	24	70000				0.8						0.5			
18	X	24	63000				0.9						0.6			
19	X	24	68000				0.8						0.5			
20		24	67000													
21	X	24	62000				1.6						0.7			
22	X	24	48000				1.6						0.8			
23	X	24	83000				1.6						0.8			
24	X	24	88000				1.6						0.8			
25	X	24	63000				1.6						0.8			
26	X	24	84000				1.0						0.7			
27		24	65000													
28	X	24	52000				0.8						0.5			
29	X	24	68000				0.8						0.6			
30	X	24	54000				1.0						0.5			
31	X	24	57000				1.0						0.8			
Total			1928000													
Average			62200													
Maximum			87000													

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

# LABRADOR/FOREST LAKE ESTATES (693) WTP DAILY OPERATIONS LOG

MONTH: **MAY**

YEAR: **2007**

**2007**

Date	Well Meter Readings				RV Park Meter		CL2 Readings		Electric Meter	KWH Used	Operator	
	Well #1 Meter Reading	Interval Volume	Well #2 Meter Reading	Interval Volume	Total Flow	Total Volume	Interval Volume	Point of Entry				Remote Tap
Previous Day												
1	58681	14000	156710	49000	63000			1.2	0.6	19846		SR14160C
2	58695	22000	156759	65000	87000	2720		1.2	0.6	19947		SR14160C
3	58717	15000	156824	53000	68000			1.2	0.8	20150		SR14160C
4	58732	16000	156877	53000	69000			1.2	0.6	20228		SR14160C
5	58748	13000	156930	46000	69000			1.2	0.5	20354		DH13062C
6		13000		46000	59000							
7	58774	14000	157022	43000	57000			1.1	0.6	20569		SR14160C
8	58788	14000	157065	43000	57000			1.1	0.6			DH13062C
9	58802	15000	157109	44000	59000			1.1	0.6			SR14160C
10	58817	13000	157152	42000	55000			1.2	0.6	20883		SR14160C
11	58830	11000	157194	38000	49000			1.0	0.5	20986		SR14160C
12	58841	15000	157232	50000	65000			1.0	0.5	21074		DS7999C
13		14000		51000	65000							
14	58870	12000	157333	39000	51000			0.8	0.5	21316		SR14160C
15	58882	17000	157372	40000	57000			0.9	0.5	21412		SR14160C
16	58899	14000	157412	48000	62000			1.0	0.5	21509		SR14160C
17	58913	16000	157460	54000	70000			0.8	0.5	21627		SR14160C
18	58929	14000	157514	49000	63000			0.9	0.5	21761		SR14160C
19	58943	15000	157563	51000	66000			0.8	0.5	21870		DH13062C
20		15000		52000	67000							
21	58973	14000	157666	48000	62000			1.5	0.7	22113		SR14160C
22	58987	11000	157714	35000	46000			1.6	0.6	22229		SR14160C
23	58998	23000	157749	60000	83000			1.6	0.8	22316		DS7999C
24	59021	15000	157809	51000	66000			1.6	0.6	22459		SR14160C
25	59036	14000	157860	49000	63000			1.6	0.6	22581		SR14160C
26	59050	14000	157909	50000	64000			1.0	0.7	22701		DH13062C
27		15000		50000	65000							
28	59079	12000	158009	40000	52000			0.8	0.5	22999		SR14160C
29	59091	20000	158049	48000	68000			0.8	0.6	23041		SR14160C
30	59111	12000	158097	42000	54000			1.0	0.5	23163		SR14160C
31	59123	13000	158139	44000	57000			1.0	0.8	23266		SR14160C
Total					1928000							
Mo. Avg.					62200							

# LABRADOR/FOREST LAKE ESTATES (693) WTP DAILY OPERATIONS LOG

MONTH: **June**

YEAR:

**2007**

Date	Well Meter Readings				RV Park Meter		CL2 Readings		Electric Meter	KWH Used	Operator	
	Well #1 Meter Reading	Interval Volume	Well #2 Meter Reading	Interval Volume	Total Flow	Total Volume	Interval Volume	Point of Entry				Remote Tap
Pervious Day												
1	59136	9000	158183	3000	39000			1.0	0.8	23373		SR
2	59145		158183					1.0	0.8	23455		DH
3												
4	59176		158183					1.0	0.6	23705		SR
5								1.0	0.6			SR
6								1.0	0.6			SR
7	59212	8000	158423	29000	37000			1.0	0.8	24041		SR
8	59220		158423					1.0	0.8	24122		SR
9	59222		158491	81000	81000			0.7	0.5	24210		DH
10												
11	59222		158572	39000	39000			0.8	0.5	24372		SR
12	O/S							1.0	0.5	24611		SR
13	O/S	0										
14	O/S							1.0	0.6	24680		SR
15	O/S	0	158723	66000	66000			0.8	0.5	24700		SR
16	O/S							0.8	0.5	24836		DH
17	O/S	0										
18	O/S							0.7	0.5	25071		DH
19	O/S	0	158943	25000	25000			0.8	0.6			LN
20	O/S							0.8	0.5	25242		DS
21	O/S	0	159022	50000	50000			0.8	0.5	25369		DH
22	O/S							0.7	0.5	25492		DH
23	59235	13000	159121	109000	122000			0.9	0.5	25643		DS
24												
25	59258	23000	159203	48000	71000			0.8	0.5			LN
26	59271							0.8	0.4			LN
27	59279	8000	159279	28000	36000			0.8	0.4	26243		LN
28	59288		159279					1.5	0.4			LN
29	59296	9000	159337	36000	45000			1.2	0.5	26380		LN
30	59305		159337					1.1	0.5	26461		DS
31												
Total												
Mo. Avg.												

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# LABRADOR/FOREST LAKE ESTATES (693) WTP DAILY OPERATIONS LOG

693

MONTH: **JULY**

YEAR: **2007**

Date	Well Meter Readings				Total Flow	RV Park Meter		CL2 Readings		Electric Meter	KWH Used	Operator
	Well #1 Meter Reading	Interval Volume	Well #2 Meter Reading	Interval Volume		Total Volume	Interval Volume	Point of Entry	Remote Tap			
Pervious Day												
1												
2	59324	9000	159437	30000	39000			1.2	0.5	26606		
3	59333	11000	159467	32000	43000			1.8	0.8			
4	59344	16000	159499	33000	45000			1.7	0.8	26755		
5	59360	11000	159532	42000	53000			2.1	1.2	26831		DH
6	59371	10000	159574	33000	43000			1.7	0.9	26925		DH
7	59381	25000	159607	83000	108000			1.8	1.0	27003		DH
8												
9	59406	9000	159690	33000	40000			1.2	0.9	27187		DH
10	59415	11000	159723	34000	47000			1.4	1.1			LN
11	59426	12000	159757	41000	53000			1.4	1.1	27341		LN
12	59438	9000	159798	31000	40000			1.8	1.1	27435		DH
13	59447	13000	159829	45000	58000			1.8	1.0	27505		DH
14	59460	20000	159874	67000	87000			1.5	0.8	27604		DH
15												
16	59480	9000	159941	31000	40000			1.8	1.0	27754		DH
17	59489	9000	159972	33000	42000			1.5	1.2			LN
18	59498	9000	160005	30000	39000			1.8	1.0			LN
19	59507	13000	160035	28000	41000			1.7	1.0	27971		DH
20	59520	9000	160063	30000	39000			1.8	1.0	28036		DH
21	59529	18000	160093	60000	78000			1.8	1.1	28108		DH
22												
23	59547	6000	160153	23000	29000			1.7	0.9	28243		DH
24	59553	10000	160176	34000	44000			1.5				LN
25	59563	9000	160210	30000	39000			1.5	1.0	28373		LN
26	59572	13000	160240	45000	58000			1.5	0.8	28438		LN
27	59585	16000	160285	51000	67000			1.7	1.0	28536		LN
28	59601	26000	160336	89000	115000			1.4	0.8	28614		JK
29												
30	59627	11000	160425	37000	48000			1.8	1.1	28852		DH
31	59638	13000	160462	45000	58000			1.8	1.0			LN
Total		327000		1070000	1393000							
Mo. Avg.		12576.9231		41153.8462	53576.9231							





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

See page 4 for instructions.

<b>I. General Information for the Month/Year of:</b> August 2007				
<b>A. Public Water System (PWS) Information</b>				
PWS Name: Labrador/Forest Lake Estate			PWS Identification Number: 6514842	
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: 913			Total Population Served at End of Month: 2,356	
PWS Owner: Forest Lake Estates.				
Contact Person: Patrick Flynn			Contact Person's Title: Regional Director	
Contact Person's Mailing Address: 200 Weatherfield Ave.			City: Altamonte Springs	State: FL Zip Code: 32714
Contact Person's Telephone Number: 407 869-1919			Contact Person's Fax Number: 407 869-6961	
Contact Person's E-Mail Address:				
<b>B. Water Treatment Plant Information</b>				
Plant Name: Labbrador Utilities			Plant Telephone Number: 1 800 272-1919	
Plant Address: 6429 Forest Lake Drive			City: Zephyrhills	State: FL Zip Code: 33540
Type of Water Treated 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: 564,000				
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:	Lee Neal	C	14571	1, 14, 28, & 29
Other Operators:	Don Hamilton	C	13062	Mon, Thur, Fri, Sat
	Rob Buono	C	14426	22 & 23
	Dave Shoffstall	C	7799	7, 8, 20, 21, & 24

**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	Printed or Typed Name	License Number
--------------------	-----------------------	----------------

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

PWS Identification Number: 6514842

Plant Name: Labrador Utilities

**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 for Disinfectant Four-Log Virus Inactivation, if Applicable				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 First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at Minimum Contact Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	Minimum CT Required, mg-min/L		
1	X	24	62,000		1.80					1.40	
2	X	24	39,000		2.00					1.20	
3	X	24	62,000		2.00					1.20	
4	X	24	49,000		2.00					1.20	
5		24	49,000								
6	X	24	41,000		1.90					1.20	
7	X	24	51,000		1.50					1.00	
8	X	24	45,000		1.40					0.80	
9	X	24	49,000		2.20					1.30	
10	X	24	58,000		2.30					1.40	
11	X	24	51,000		2.00					1.10	
12		24	51,000								
13	X	24	33,000		2.20					1.30	
14	X	24	46,000		1.60					1.10	
15	X	24	61,000		2.80					2.00	
16	X	24	44,000		2.10					1.20	
17	X	24	46,000		2.00					1.10	
18	X	24	57,000		1.90					1.00	
19		24	57,000								
20	X	24	44,000		1.70					0.90	
21	X	24	41,000		1.80					0.90	
22	X	24	56,000		2.00					1.70	
23	X	24	56,000		2.00					1.00	
24	X	24	53,000		2.00					1.00	
25	X	24	32,500		2.00					1.10	
26		24	32,500								
27	X	24	43,000		2.00					1.40	
28	X	24	58,000		3.00					1.00	
29	X	24	31,000		3.00					3.20	
30	X	24	49,000		2.20					1.40	
31	X	24	52,000		2.60					1.60	
Total			1,499,000								
Average			48,354								
Maximum			62,000								

\* 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**

PWS Identification Number: 6514842      Plant Name: Labbrador Utilities

**IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: \* August 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>†</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, etc., 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.





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

PWS Identification Number: **6514842** Plant Name: **Labrador/Forest Lakes Estates**

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

Mean 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 Demonstrate Four-Log Virus Inactivation, if Applicable*											
				CT Calculations					UV Dose						
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours in Plant Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Residual Disinfection Concentration (C) Before or at First Customer	Disinfection Contact Time (T) at C Measurement Point During	Provided Before or at First Customer During	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required, mg/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2	Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water Components Out of Operation	
1	x	24	57000			1.6							1.0		
2	x	24	44000		1.9								1.1		
3	x	24	44000		1.5								1.0		
4	x	24	44000		1.9								1.2		
5	x	24	61000		2.0								1.2		
6	x	24	37500		1.8								1.1		
7		24	37500												
8	x	24	61000		0.8								0.6		
9	x	24	68000		2.0								1.2		
10	x	24	50000		2.2								1.6		
11	x	24	60000		1.8								1.6		
12	x	24	71000		1.8								1.4		
13	x	24	47500		1.7								1.2		
14		24	47500												
15	x	24	53000		1.8								1.1		
16	x	24	54000		1.8								1.1		
17	x	24	55000		1.8								1.2		
18	x	24	68000		1.8								1.2		
19	x	24	67000		1.7								1.1		
20	x	24	43500		1.7								1.1		
21		24	43500												
22	x	24	64000		1.8								1.2		
23	x	24	64000		1.6								1.2		
24	x	24	48000		2.0								1.2		
25	x	24	79000		1.8								1.2		
26	x	24	73000		1.8								1.0		
27	x	24	54500		1.8								1.0		
28		24	54500												
29	x	24	75000		1.8								1.0		
30	x	24	80000		1.8								1.2		
31	x	24	55000		1.8								1.0		

Total	1781000
Average	56806.452
Maximum	80000

12-7-07

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

# LABRADOR/FOREST LAKE ESTATES (693) WTP DAILY OPERATIONS LOG

MONTH: **October**

YEAR: **2007**

Date	Well Meter Readings				Total Flow	RV Park Meter		CL2 Readings		Electric Meter	KWH Used	Operator
	Well #1 Meter Reading	Interval Volume	Well #2 Meter Reading	Interval Volume		Total Volume	Interval Volume	Point of Entry	Remote Tap			
Previous Day												
1	60341	13000	162602	44000	57000			1.8	1.0	33923		DH
2	60354	10000	162646	34000	44000			1.9	1.1	34026		DES
3	60364	14000	162680	30000	44000			1.5	1.0	34105		LN
4	60378	10000	162710	34000	44000			1.9	1.2	34175		DH
5	60388	14000	162744	47000	61000			2.0	1.2	34258		DH
6	60402	17000	162791	58000	37500			1.8	1.1	34363		DH
7					37500							
8	60419	11000	162849	50000	61000			0.8	0.6	34497		DH
9	60430	15000	162899	53000	68000			2.0	1.2	34607		DES
10	60445	16000	162952	34000	50000			2.2	1.6	34730		LN
11	60461	14000	162986	46000	60000			1.8	1.6			DH
12	60475	16000	163032	55000	71000			1.8	1.4	34919		DH
13	60491	22000	163087	73000	47500			1.7	1.2	35047		DH
14					47500							
15	60513	12000	163160	41000	53000			1.8	1.1	35223		DH
16	60525	12000	163201	42000	54000			1.6	1.1	35317		DES
17	60537	17000	163243	38000	55000			1.8	1.2	35416		LN
18	60554	18000	163281	52000	68000			1.8	1.2	35507		DH
19	60570	15000	163333	52000	67000			1.7	1.1	35629		DH
20	60585	20000	163385	67000	43500			1.7	1.1	35752		DH
21					43500							
22	60605	15000	163452	49000	64000			1.8	1.2	36911		DH
23	60620	14000	163501	50000	64000			1.8	1.2	36024		LN
24	60634	11000	163551	37000	48000			2.0	1.2	36139		JB
25	60645	18000	163588	61000	79000			1.8	1.2	36220		DH
26	60663	17000	163649	56000	73000			1.8	1.0	36363		DH
27	60680	25000	163705	84000	54500			1.6	1.0	36491		DH
28					54500							
29	60705	17000	163789	58000	75000			1.8	1.0	36686		DH
30	60722	23000	163847	57000	80000			1.6	1.2	36814		DES
31	60745	13000	163904	42000	55000			1.8	1.0	36942		DES
Total		417000		1344000	1761000							
Mo. Avg.		15444.4444		49777.7778	56806.4516							





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

See page 4 for instructions.

**I. General Information for the Month Year of:**

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

PWS Name: Forest Lake Estates PWS Identification Number: 6514842  
PWS Type:  Community  Non-Transient Non-Community  Transient Non-Community  Consecutive  
Number of Service Connections at End of Month: 1178 Total Population Served at End of Month: 2,356  
PWS Owner: Labrador/Forest Lake Estates  
Contact Person: Patrick Flynn Contact Person's Title: Regional Director  
Contact Person's Mailing Address: 200 Weatherfield Ave. City: Altamonte Springs State: FL Zip Code: 32714  
Contact Person's Telephone Number: 407 869-1919 Contact Person's Fax Number: 407 869-6961  
Contact Person's E-Mail Address:

**B. Water Treatment Plant Information**

Plant Name: Forest Lake Estates Plant Telephone Number: 1 800 272-1919  
Plant Address: 6429 Forest Lake Drive City: Zephyrhills State: FL Zip Code: 33540  
Type of Water Treated by Plant:  Raw Ground Water  Purchased Finished Water  
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 564,000  
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:	William Neal	C	14571	
Other Operators:	Don Hamilton	C	13062	1 <sup>st</sup> shift days
	Dave Shofstal	C	7799	
	Joe Kuhns	C	6754	

**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 Printed or Typed Name License Number

Dec 07 07 01:01P Utilities, Inc 8137807364 P.10

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

PWS Identification Number: **6514842** Plant Name: **Labrador/Forest Lakes Estates**

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

				CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*											
				CT Calculations					UV Dose						
Day of the Month	Days Plant Staffed or Operator (Place "X")	Hours in Plant Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Residual Disinfection Concentration (C) Before or at First Customer Flow, mg/L	Disinfection Contact Time (T) at C Measurement Point During Peak Flow, minutes	Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum of CT Required, mg/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2	Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water Components Out of Operation	
1	X	24	70000		1.8							1.8			
2	X	24	98000		1.8							1.4			
3	X	24	115000		1.5							1.0			
4		24	57500												
5	X	24	97000		1.5							1.0			
6	X	24	83000		1.8							1.2			
7	X	24	70000		2.0							1.2			
8	X	24	78000		1.8							1.2			
9	X	24	122000		1.5							1.0			
10	X	24	68000		1.5							1.0			
11		24	68000												
12	X	24	105500		1.5							1.0			
13	X	24	98000		1.8							0.9			
14	X	24	119000		1.5							0.7			
15	X	24	54000		1.6							0.9			
16	X	24	122000		1.7							1.0			
17	X	24	87500		1.8							1.0			
18		24	67500												
19	X	24	132000		1.7							1.0			
20	X	24	113000		1.8							1.1			
21	X	24	78000		1.6							1.0			
22	X	24	99000		1.8							1.1			
23	X	24	94000		1.5							0.9			
24	X	24	75500		1.8							1.0			
25		24	75500												
26	X	24	112000		1.5							1.0			
27	X	24	102000		1.8							1.2			
28	X	24	89000		1.6							1.2			
29	X	24	52000		2.0							1.2			
30	X	24	121000		2.0							1.3			
31		24													
<b>Total</b>			<b>2697000</b>												
<b>Average</b>			<b>89900</b>												
<b>Maximum</b>			<b>132000</b>												

12-12-07 MOR

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

Dec 07 07 01:02p Utilities, Inc B137807364 P. 11



# LABRADOR/FOREST LAKES ESTATES (693) EMERGENCY GENERATOR LOG

Month: **November**

Year: **2007**

Date	Generator Runtime Hours			Is Generator Underload? YES or NO	Generator and Engine Data										Operator	
	Start Hours	Stop Hours	Total Run Hours		Voltage	Phase	Amps	Battery	Water	Temp.	Oil P.S.I.	Hertz	Fuel	Fuel Tank Level		Comments
1																
2																
3																
4																
5																
6																
7	7053.9	7055.1	1.2	y	240	3	0	14.8		188	60	60	ok			DH
8																
9																
10																
11																
12																
13																
14	7055.1	7056.3	1.2	y	241	3	0	14.9		181	59	61	ok			JF
15																
16																
17																
18																
19																
20																
21	7056.3	7057.5	1.2	y	240	3	0	14.9		183	60	60	ok			DH
22																
23																
24																
25																
26																
27																
28	7057.5	7058.7	1.2	y	240	3	0	14.8		181	61	62	ok			JF
29																
30																
31																
Total			4.8													
Mo. Avg.			1.2													

# LABRADOR/FOREST LAKE ESTATES (693) WTP DAILY OPERATIONS LOG

MONTH: **November**

YEAR: **2007**

Dec 07 07 01:03p

Utilities, Inc

8137807364

P.13

Date	Well Meter Readings				RV Park Meter		CL2 Readings		Electric Meter	KWH Used	Operator	
	Well #1 Meter Reading		Well #2 Meter Reading		Total Volume	Interval Volume	Point Entry	Remote Tap				
	Previous Day	Interval Volume	Interval Volume	Total Flow								
1	60758	16000	163946	54000	70000			1.6	1.6	37043		DH
2	60774	22000	164000	76000	98000			1.6	1.4	37168		DH
3	60796	13000	164076	44500	115000			1.5	1.0	37337		DH
4		13000		44500	57500							
5	60822	23000	164165	74000	97000			1.5	1.0	37542		DH
6	60845	20000	164239	63000	83000			1.8	1.2	37709		LN
7	60865	22000	164302	48000	70000			2.0	1.2	37855		LN
8	60887	17000	164350	61000	78000			1.8	1.2	37955		DH
9	60904	28000	164411	94000	122000			1.5	1.0	38101		DH
10	60932	15000	164505	51000	68000			1.5	1.0	38315		DH
11		15000		51000	66000							
12	60962	24000	164607	81000	105500			1.5	1.0	38550		DH
13	60986	22000	164688	74000	96000			1.6	0.9			LN
14	61008	34000	164762	85000	119000			1.5	0.7	38896		LN
15	61042	12000	164847	42000	54000			1.6	0.9	39089		LN
16	61054	28000	164889	94000	122000			1.7	1.0	39180		DH
17	61082	15500	164983	52000	67500			1.6	1.0	39390		DH
18		15500		52000	67500							
19	61113	30000	165087	102000	132000			1.7	1.0	39624		DH
20	61143	35000	165189	78000	113000			1.6	1.1	39851		LN
21	61176	17000	165267	61000	78000			1.6	1.0	40026		DES
22	61195	22000	165328	77000	99000			1.6	1.1	40165		DES
23	61217	21000	165405	73000	94000			1.5	0.9	40329		DH
24	61238	17500	165478	58500	75500			1.6	1.0	40495		DH
25		17500		58500	75500							
26	61273	25000	165595	87000	112000			1.5	1.0	40765		DH
27	61296	29000	165682	73000	102000			1.8	1.2	40944		DH
28	61327	13000	165755	76000	89000			1.6	1.2	41107		LN
29	61350	12000	165831	40000	52000			2.0	1.2	41277		JK
30	61362	27000	165871	94000	121000			2.0	1.3	41365		DH
31												
Total		621000		2019000	2697000							
Mo. Avg.		20700		67300	89900							

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

PWS Identification Number: 6514842 Plant Name: Labrador/Forest Lakes Estates

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

Mean 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 Demonstrate Four-Log Virus Inactivation, if Applicable\*

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Plant Hours in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations						UV Dose		Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water Components Out of Operation
				Peak Flow Rate, gpd.	Residual Disinfection Concentration (C) Before or at First Customer Peak Flow, mg/L	Disinfection Contact Time (T) at C Measurement Point During Peak Flow, minutes	Provided Before or at First Customer Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required, mg/L	Lowest Operating UV Dose, mW-sec/cm2		
1	x	24	84000		1.9							1.4	
2		24	84000									1.4	
3	x	24	94000		1.8							1.2	
4	x	24	98000		1.8							1.2	
5	x	24	60000		1.6							1.1	
6	x	24	82000		1.6							1.1	
7	x	24	13500		1.8							1.3	
8	x	24	78500		1.6							1.1	
9		24	78500										
10	x	24	81000		1.6							1.0	failed monthly Bac-ti (T.N.T.C.)
11	x	24	117000		1.8							1.0	pulled re-check sample
12	x	24	66000		1.6							1.0	samples passed
13	x	24	106000		1.5							1.0	
14	x	24	99000		1.4							1.0	
15	x	24	61000		1.4							1.0	
16		24	61000										
17	x	24	84000		1.8							1.0	power loss to H.V park, emergency generator
18	x	24	128000		1.6							1.0	did not start, dispatched contractor fixed
19	x	24	50000		2.0							1.2	
20	x	24	87000		1.5							1.0	flushed 25000 gallons
21	x	24	120000		1.9							1.1	pulled two bac-ti's on
22	x	24	75000		1.5							1.0	consecutive days & passed
23		24	75000										
24	x	24	93000		1.4							1.0	
25	x	24	81000		1.5							1.0	
26	x	24	109000		1.4							1.0	
27	x	24	86000		1.4							1.0	
28	x	24	111000		1.4							1.2	
29	x	24	73500		1.2							0.9	
30		24	73500										
31	x	24	119000		1.4							0.9	

Total	2626500
Average	84725.806
Maximum	128000

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

# LABRADOR/FOREST LAKE ESTATES (693) WTP DAILY OPERATIONS LOG

MONTH: **December**

YEAR: **2007**

Date	Well Meter Readings				RV Park Meter		CL2 Readings		Electric Meter	KWH Used	Operator	
	Well #1 Meter Reading	Interval Volume	Well #2 Meter Reading	Interval Volume	Total Flow	Total Volume	Interval Volume	Point of Entry				Remote Tap
Pervious Day												
1	61389	19500	165965	64500	84000			1.9	1.4	41575		DH
2		19500		64500	84000							
3	61428	21000	166094	73000	94000			1.8	1.4	41863		DH
4	61449	28000	166167	68000	96000			1.8	1.2	42023		DES
5	61477	14000	166235	46000	60000			1.6	1.2	42176		DES
6	61491	18000	166281	64000	82000			1.6	1.1	42282		DH
7	61509	31000	166345	104000	13500			1.8	1.3	42425		DH
8	61540	17500	166449	61000	78500			1.6	1.1	42655		DH
9		17500		61000	78500							
10	61575	19000	166571	62000	81000			1.6	1.0	42922		DH
11	61594	27000	166633	90000	117000			1.8	1.0	43063		DES
12	61621	15000	166723	51000	66000			1.6	1.0	43268		DES
13	61636	24000	166774	82000	106000			1.5	1.0	43385		DH
14	61660	23000	166856	76000	99000			1.4	1.0	43566		DH
15	61683	13500	166932	47500	61000			1.4	1.0	43735		DH
16		13500		47500	61000							
17	61710	20000	167027	64000	84000			1.6	1.0	43948		DH
18	61730	35000	167091	93000	128000			1.6	1.0	44090		DES
19	61765	11000	167184	39000	50000			2.0	1.2	44299		DES
20	61776	20000	167223	67000	87000			1.5	1.0	44391		DH
21	61796	27000	167290	93000	120000			1.9	1.1	44544		DES
22	61823	17000	167383	58000	75000			1.5	1.0	44758		DH
23		17000		58000	75000							
24	61857	21000	167499	72000	93000			1.4	1.0	45028		DH
25	61878	20000	167571	61000	81000			1.5	1.0	45182		KS
26	61898	30000	167632	75000	109000			1.4	1.0	45331		DES
27	61928	19000	167707	67000	86000			1.4	1.0	45508		LN
28	61947	26000	167774	85000	111000			1.4	1.2	45666		DH
29	61973	17000	167859	56500	73500			1.2	0.9	45867		DH
30		17000		56500	73500							
31	62007	27000	167972	92000	119000			1.4	0.9	46132		DH
Total		645000		2099000	2626500							
Mo. Avg.		20806.4516		67709.6774	84725.8065							

2007

**DISCHARGE MONITORING REPORTS**

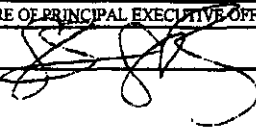
## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

PERMITTEE NAME:	Labrador Utilities Inc.	PERMIT NUMBER:	FLA012801
MAILING ADDRESS:	200 Weathersfield Avenue Altamonte Springs, FL 32714	LIMIT:	Final
		CLASS SIZE:	N/A
FACILITY:	Forest Lake Estates WWTF	MONITORING GROUP NUMBER:	R-001
LOCATION:	41311 Paquette Way Zephyrhills, FL 33540	MONITORING GROUP DESC:	R-001, including Influent
COUNTY:	Pasco	NO DISCHARGE FROM SITE:	
		MONITORING PERIOD	From: Jan 01, 2007 To: Jan 31, 2007

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	<b>0.093</b>	<b>MGD</b>			<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 50050 Y	Permit Requirement	0.216 (AADF)	MGD				Monthly	Calculation
Mon. Site No. FLW-01								
Flow, to R-001	Sample Measurement	<b>0.088</b>	<b>MGD</b>			<b>0</b>	<b>5 Days/Week</b>	<b>Flow Meter and totalizers</b>
PARM Code 50050 1	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow Meter and totalizers
Mon. Site No. FLW-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			<b>4.5</b>		<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
Mon. Site No. EFA-01	Permit Requirement			20.0 (An. Avg.)			Monthly	Calculation
PARM Code 50050 1								
Mon. Site No. FLW-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			<b>5.9</b>	<b>9.0</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
PARM Code 80082 Y								
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			<b>4.1</b>		<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 00530 Y	Permit Requirement			20.0 (An. Avg.)			Monthly	Calculation
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			<b>3.0</b>	<b>4.0</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
PARM Code 00530 A	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01								

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

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Shantavious Rainey/Lead Operator		407 948-9832	2007/02/26

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

p.2  
 8137807364  
 Utilities, Inc  
 Feb 28 07 03:03p

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Forest Lake Estates WWTF  
 COUNTY: Pasco

MONITORING GROUP NUMBER:  
 MONITORING PERIOD

R-001  
 From: Jan 01, 2007 To: Jan 31, 2007  
 PERMIT NUMBER: FLA012801

P.3  
8137807364  
Utilities, Inc  
Feb 28 07 03:03p

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement			<b>6.9</b>	<b>7.3</b>		<b>SU</b>	<b>0</b>	<b>5 Days/Week</b>	<b>Grab</b>
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			<b>1.5</b>			<b>#/100ML</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 74055 Y Mon. Site No. FLW-01	Permit Requirement			200 (An. Avg.)			#/100ML		Monthly	Calculation
Coliform, Fecal	Sample Measurement			<b>1.0</b>	<b>100</b>	<b>1.0</b>	<b>#/100ML</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>Grab</b>
PARM Code 74055 A Mon. Site No. FLW-01	Permit Requirement			Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			<b>2.0</b>			<b>MG/L</b>	<b>0</b>	<b>5 Days/Week</b>	<b>Grab</b>
PARM Code 50060 A Mon. Site No. FLW-01	Permit Requirement			0.5 (Min.)			MG/L		5 Days/Week	Grab
Sludge Production, Total	Sample Measurement	<b>25000</b>					<b>Gallons</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 49019 P Mon. Site No. OTH-01	Permit Requirement	Report (Mo. Total.)					Gallons		Monthly	Calculation
Flow, total plant	Sample Measurement	<b>0.051</b>	<b>MGD</b>					<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 50050 P Mon. Site No. EFA-01	Permit Requirement	0.216 (3MADF)	MGD						Monthly	Calculation
Percentage Capacity, (3MADF/Permitted Capacity) x 100	Sample Measurement			<b>33</b>			<b>%</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 00180 I Mon. Site No. FLW-01	Permit Requirement			Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			<b>119</b>			<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			<b>237</b>			<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
	Sample Measurement									
	Permit Requirement									

**DAILY SAMPLE RESULTS - PART B**

Permit Number:  
Monitoring Period

FLA012801  
From Jan 01, 2007

To: Jan 31, 2007

Facility: Labrador/Forest Lake Estates WWTF  
County: Pasco

	Flow (MGD) R001	CBO05 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBO05 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	88,000				7.0		1.8			
2	88,000				6.9		1.6			
3	88,000	9.0	4.0	1.0	7.0		1.0		220	220
4	88,000				7.0		1.0			
5	88,000				7.0		2.2			
6	88,000				6.9		1.8			
7	88,000									
8	88,000				6.9		2.2			
9	88,000				6.9		2.2			
10	88,000				6.9		2.2			
11	88,000				6.9		2.2			
12	88,000				6.9		2.2			
13	88,000									
14	88,000									
15	88,000				6.9		2.2			
16	88,000	5.0	1.0	1.0	6.9		2.2		60	350
17	88,000				6.9		2.2			
18	62,000				6.9		2.2			
19	94,000				6.9		2.2			
20	123,000				7.0		2.2			
21	123,000									
22	124,000				7.0		2.2			
23	69,000				6.9		2.2			
24	60,000				6.9		2.2			
25	83,000				7.0		2.2			
26	101,000				7.0		2.2			
27	62,000				7.0		1.9			
28	62,000									
29	100,000				7.0		2.1			
30	92,000	3.6	4.0	1.0	7.0		2.0		77	140
31	77,000				7.0		2.1			
Total	2,728,000	3	3	3	26		26		3	3
Mo. Avg.	88,000	5.9	3.0	1.0	6.9		2.0		119	237

**PLANT STAFFING:**

Day shift Operator      Class: C      Certificate No:12294      Name:Shantavious S. Rainey  
 Evening Shift Operator      Class:C      Certificate No:8040      Name:David E. Shoffstall  
 Night Shift Operator      Class:\_\_\_\_\_      Certificate No:\_\_\_\_\_      Name:\_\_\_\_\_  
 Lead Operator      Class: C      Certificate No:12294      Name:Shantavious S. Rainey



693

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

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

PERMITTEE NAME: Labrador Utilities Inc.  
 MAILING ADDRESS: 200 Weathersfield Avenue  
 Altamonte Springs, Fl 32714

PERMIT NUMBER: FLA012801

LIMIT: Final  
 CLASS SIZE: N/A

REPORT GROUP: **FFLTC**  
 Domestic

FACILITY: Forest Lake Estates WWTF  
 LOCATION: 41311 Paquette Way  
 Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: R-001, including Influent

COUNTY: Pasco

NO DISCHARGE FROM SITE:  
 MONITORING PERIOD From: Feb 28, 2007 To: Feb 28, 2007

P.2

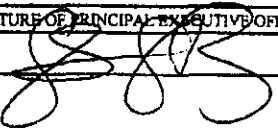
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Utilities, Inc

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Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	<b>0.081</b>		<b>MGD</b>				<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 50050 Y	Permit Requirement	0.216	(AADF)	MGD					Monthly	Calculation
Mon. Site No. FLW-01										
Flow, to R-001	Sample Measurement	<b>0.083</b>		<b>MGD</b>				<b>0</b>	<b>5 Days/Week</b>	<b>Flow Meter and totalizers</b>
PARM Code 50050 1	Permit Requirement	Report	(Mo. Avg.)	MGD					5 Days/Week	Flow Meter and totalizers
Mon. Site No. FLW-01										
BOD, Carbonaceous 5 day,20C	Sample Measurement				<b>5.0</b>		<b>MG/L</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
Mon. Site No. EFA-01										
PARM Code 50050 1	Permit Requirement				20.0		MG/L		Monthly	Calculation
Mon. Site No. FLW-01					(An. Avg.)					
BOD, Carbonaceous 5 day,20C	Sample Measurement				<b>3.6</b>	<b>5.1</b>	<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
Mon. Site No. EFA-01										
PARM Code 80082 Y	Permit Requirement				30.0	60.0	MG/L		Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01					(Mo. Avg.)	(Max)				
Solids, Total Suspended	Sample Measurement				<b>3.7</b>		<b>MG/L</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 00530 Y	Permit Requirement				20.0		MG/L		Monthly	Calculation
Mon. Site No. EFA-01					(An. Avg.)					
Solids, Total Suspended	Sample Measurement				<b>3.6</b>	<b>5.2</b>	<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
PARM Code 00530 A	Permit Requirement				30.0	60.0	MG/L		Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01					(Mo. Avg.)	(Max)				

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

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Shantavious Rainey/Lead Operator		407 948-9832	2007/02/26

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

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Forest Lake Estates WWTF  
 COUNTY: Pasco

MONITORING GROUP NUMBER:  
 MONITORING PERIOD

R-001  
 From: Feb 01, 2007

PERMIT NUMBER: FLA012801  
 To: Feb 28, 2007

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH PARM Code 00400 A Mon. Site No. EFA-01	Sample Measurement			7.1	7.3		SU	0	5 Days/Week	Grab
	Permit Requirement			6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
Coliform, Fecal PARM Code 74055 Y Mon. Site No. FLW-01	Sample Measurement			1.4			#/100ML	0	Monthly	Calculation
	Permit Requirement			200 (An. Avg.)			#/100ML		Monthly	Calculation
Coliform, Fecal PARM Code 74055 A Mon. Site No. FLW-01	Sample Measurement			1.0	100	1.0	#/100ML	0	Every Two Weeks	Grab
	Permit Requirement			Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disfection) PARM Code 50060 A Mon. Site No. FLW-01	Sample Measurement			2.2			MG/L	0	5 Days/Week	Grab
	Permit Requirement			0.5 (Min.)			MG/L		5 Days/Week	Grab
Sludge Production, Total PARM Code 49019 P Mon. Site No. OTH-01	Sample Measurement	0					Gallons	0	Monthly	Calculation
	Permit Requirement	Report (Mo. Total.)					Gallons		Monthly	Calculation
Flow, total plant PARM Code 50050 P Mon. Site No. EFA-01	Sample Measurement	0.078	MGD					0	Monthly	Calculation
	Permit Requirement	0.216 (3MADE)	MGD						Monthly	Calculation
Percentage Capacity, (3MADE/Permitted Capacity) x 100 PARM Code 00180 I Mon. Site No. FLW-01	Sample Measurement			36			%	0	Monthly	Calculation
	Permit Requirement			Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C PARM Code 80082 G Mon. Site No. INF-01	Sample Measurement			85			MG/L	0	Every Two Weeks	8-hour FPC
	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended PARM Code 00530 O Mon. Site No. INF-01	Sample Measurement			260			MG/L	0	Every Two Weeks	8-hour FPC
	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
	Sample Measurement									
	Permit Requirement									

P.3

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Utilities, Inc

Mar 23 07 02:12p

**DAILY SAMPLE RESULTS - PART B**

Permit Number:  
Monitoring Period

FLA012801  
From Feb 01, 2007

To: Feb 28, 2007

Facility: Labrador/Forest Lake Estates WWTF  
County: Pasco

	Flow (MGD) R001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	58,000				7.3		2.2			
2	103,000				7.2		2.2			
3	63,000				7.2		2.2			
4	63,000									
5	81,000				7.3		2.2			
6	103,000				7.2		2.2			
7	83,000				7.2		2.2			
8	100,000				7.2		2.2			
9	146,000				7.3		2.2			
10	87,000				7.2		2.2			
11	87,000									
12	78,000				7.3		2.2			
13	90,000	2.0	5.2	1.0	7.3		2.2		60	190
14	89,000				7.2		2.2			
15	64,000				7.1		2.2			
16	91,000				7.1		2.2			
17	68,000				7.2		2.2			
18	68,000									
19	84,000				7.1		2.2			
20	72,000				7.2		2.2			
21	73,000				7.2		2.2			
22	67,000				7.2		2.2			
23	75,000				7.1		2.2			
24	82,000				7.1		2.2			
25	82,000									
26	82,000				7.2		2.2			
27	82,000	5.1	2.0	1.0	7.2		2.2		110	330
28	82,000				7.3		2.2			
29										
30										
31										
Total	2,303,000	2	2	2	27		24		2	2
Mo. Avg.	82,000	3.6	3.6	1.0	7.2		2.2		85	260

**PLANT STAFFING:**

Day shift Operator      Class: C                      Certificate No: 12294                      Name: Shantavious S. Rainey

Evening Shift Operator      Class: C                      Certificate No: 8040                      Name: David E. Shoffstall

Night Shift Operator      Class: \_\_\_\_\_                      Certificate No: \_\_\_\_\_                      Name: \_\_\_\_\_

Lead Operator              Class: C                      Certificate No: 12294                      Name: Shantavious S. Rainey





**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

1093

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

PERMITTEE NAME: Labrador Utilities Inc.  
 MAILING ADDRESS: 200 Weathersfield Avenue  
 Altamonte Springs, FL 32714  
 FACILITY: Forest Lake Estates WWTF  
 LOCATION: 41311 Paquette Way  
 Zephyrhills, FL 33540  
 COUNTY: Pasco

PERMIT NUMBER: FLA012801  
 LIMIT: Final  
 CLASS SIZE: N/A  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: R-001, including Influent  
 NO DISCHARGE FROM SITE:  
 MONITORING PERIOD: From: Mar 1, 2007 To: Mar 31, 2007

**FILE COPY**  
 REPORT: Monthly  
 GROUP: Domestic

P.2

8137807364

Utilities, Inc

Apr 24 07 09:39a

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.081	MGD			0	Monthly	Calculation
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.216 (AADF)	MGD				Monthly	Calculation
Flow, to R-001	Sample Measurement	0.084	MGD			0	5 Days/Week	Flow Meter and totalizers
PARM Code 50050 I Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow Meter and totalizers
BOD, Carbonaceous 5 day, 20C Mon. Site No. EFA-01	Sample Measurement			5.8	MG/L	0	Monthly	Calculation
PARM Code 50050 I Mon. Site No. FLW-01	Permit Requirement			20.0 (An.Avg.)	MG/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C Mon. Site No. EFA-01	Sample Measurement			17.0 31.0	MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.) 60.0 (Max)	MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			3.6	MG/L	0	Monthly	Calculation
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)	MG/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			10.0 16.0	MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.) 60.0 (Max)	MG/L		Every Two Weeks	8-hour FPC

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

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YYMM/DD)
Shantavious Rainey/Lead Operator		407 948-9832	2007/04/22

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

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Forest Lake Estates WWTF  
 COUNTY: Pasco

MONITORING GROUP NUMBER:  
 MONITORING PERIOD

R-001  
 From: Mar 01, 2007

PERMIT NUMBER: FLA012801  
 To: Mar 31, 2007

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement			<b>7.2</b>	<b>7.3</b>		<b>SU</b>	<b>0</b>	<b>5 Days/Week</b>	<b>Grab</b>
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement						<b>#/100ML</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 74055 Y Mon. Site No. FLW-01	Permit Requirement			200 (An. Avg.)			#/100ML		Monthly	Calculation
Coliform, Fecal	Sample Measurement			<b>1.0</b>	<b>100</b>	<b>1.0</b>	<b>#/100ML</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>Grab</b>
PARM Code 74055 A Mon. Site No. FLW-01	Permit Requirement			Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			<b>1.0</b>			<b>MG/L</b>	<b>0</b>	<b>5 Days/Week</b>	<b>Grab</b>
PARM Code 50060 A Mon. Site No. FLW-01	Permit Requirement			0.5 (Min.)			MG/L		5 Days/Week	Grab
Sludge Production, Total	Sample Measurement	<b>25000</b>					<b>Gallons</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 49019 P Mon. Site No. OTH-01	Permit Requirement	Report (Mo. Total)					Gallons		Monthly	Calculation
Flow, total plant	Sample Measurement	<b>0.090</b>	<b>MGD</b>					<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 50050 P Mon. Site No. EFA-01	Permit Requirement	0.216 (3MADF)	MGD						Monthly	Calculation
Percentage Capacity, (3MADF/Permitted Capacity) x 100	Sample Measurement			<b>41</b>			<b>%</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 00180 I Mon. Site No. FLW-01	Permit Requirement			Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			<b>135</b>			<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			<b>345</b>			<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
	Sample Measurement									
	Permit Requirement									

P.3

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Utilities, Inc

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**DAILY SAMPLE RESULTS - PART B**

Permit Number:  
Monitoring Period

FLA012801  
From Mar 01, 2007 To: Mar 31, 2007

Facility: Labrador/Forest Lake Estates WWTF  
County: Pasco

Code	Flow (MGD) R001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	82,000				7.3		2.2	25000		
2	84,000				7.2		2.2			
3	84,000				7.2		2.2			
4	84,000									
5	84,000				7.3		2.2			
6	93,000				7.2		2.2			
7	101,000				7.3		2.2			
8	101,000				7.3		2.2			
9	108,000				7.3		2.2			
10	76,000				7.2		2.2			
11	76,000									
12	84,000				7.3		2.2			
13	87,000	2.0	3.0	1.0	7.2		2.2		100	300
14	89,000				7.3		2.2			
15	88,000				7.3		2.2			
16	114,000				7.3		2.2			
17	78,000				7.2		2.2			
18	78,000									
19	109,000				7.2		2.2			
20	87,000				7.2		2.2			
21	94,000				7.2		2.2			
22	91,000				7.2		2.2			
23	75,000				7.3		2.2			
24	68,000				7.2		2.2			
25	68,000									
26	69,000				7.2		1.0			
27	76,000	31.0	16.0		7.2		1.2		170	390
28	82,000				7.2		1.8			
29	48,000				7.2		2.2			
30	75,000			1.0	7.2		2.2			
31	66,000				7.2		2.2			
Total	2,599,000	2	2	2	27		27	4	2	2
Mo. Avg.	84,000	17.0	10.0	1.0	7.2		2.1	25000	135	345

PLANT STAFFING:

Day shift Operator      Class: C      Certificate No: 12294      Name: Shantavious S. Rainey  
 Evening Shift Operator      Class: C      Certificate No: 8040      Name: David E. Shoffstall  
 Night Shift Operator      Class: \_\_\_\_\_      Certificate No: \_\_\_\_\_      Name: \_\_\_\_\_  
 Lead Operator      Class: C      Certificate No: 12294      Name: Shantavious S. Rainey







693

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

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

PERMITTEE NAME: Labrador Utilities Inc.  
 MAILING ADDRESS: 200 Weathersfield Avenue  
 Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012801

LIMIT:  
 CLASS SIZE:

Final  
 N/A

**FILE COPY**

REPORT: Monthly  
 GROUP: Domestic

FACILITY: Forest Lake Estates WWTF  
 LOCATION: 41311 Paquette Way  
 Zephyrhills, FL 33540

MONITORING GROUP NUMBER:  
 MONITORING GROUP DESC:

R-001  
 R-001, including Influent

COUNTY: Pasco

NO DISCHARGE FROM SITE:  
 MONITORING PERIOD

From: Apr 01, 2007 To: Apr 30, 2007

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.060	MGD			0	Monthly	Calculation
PARM Code 50050 Y	Permit Requirement	0.216 (AADF)	MGD				Monthly	Calculation
Mon. Site No. FLW-01								
Flow, to R-001	Sample Measurement	0.068	MGD			0	5 Days/Week	Flow Meter and totalizers
PARM Code 50050 1	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow Meter and totalizers
Mon. Site No. FLW-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.9	MG/L	0	Monthly	Calculation
Mon. Site No. EFA-01	Permit Requirement			20.0 (An. Avg.)	MG/L		Monthly	Calculation
PARM Code 50050 1								
Mon. Site No. FLW-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.0 2.0	MG/L	0	Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.) 60.0 (Max)	MG/L		Every Two Weeks	8-hour FPC
PARM Code 80082 Y								
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			3.2	MG/L	0	Monthly	Calculation
PARM Code 00530 Y	Permit Requirement			20.0 (An. Avg.)	MG/L		Monthly	Calculation
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			3.0 5.0	MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 A	Permit Requirement			30.0 (Mo. Avg.) 60.0 (Max)	MG/L		Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01								

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

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Shantavious Rainey/Lead Operator		407 948-9832	2007/05/24

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

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Utilities, Inc

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**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Forest Lake Estates WWTF  
 COUNTY: Pasco

MONITORING GROUP NUMBER:  
 MONITORING PERIOD

R-001  
 From: Apr 01, 2007 To: Apr 30, 2007  
 PERMIT NUMBER: FLA012801

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH PARM Code 00400 A Mon. Site No. EFA-01	Sample Measurement			<b>7.1</b>	<b>7.3</b>		<b>SU</b>	<b>0</b>	<b>5 Days/Week</b>	<b>Grab</b>
	Permit Requirement			6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
Coliform, Fecal PARM Code 74055 Y Mon. Site No. FLW-01	Sample Measurement			<b>1.5</b>			<b>#/100ML</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
	Permit Requirement			200 (An. Avg.)			#/100ML		Monthly	Calculation
Coliform, Fecal PARM Code 74055 A Mon. Site No. FLW-01	Sample Measurement			<b>1.0</b>	<b>100</b>	<b>1.0</b>	<b>#/100ML</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>Grab</b>
	Permit Requirement			Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection) PARM Code 50060 A Mon. Site No. FLW-01	Sample Measurement			<b>2.0</b>			<b>MG/L</b>	<b>0</b>	<b>5 Days/Week</b>	<b>Grab</b>
	Permit Requirement			0.5 (Min.)			MG/L		5 Days/Week	Grab
Sludge Production, Total PARM Code 49019 P Mon. Site No. OTH-01	Sample Measurement	<b>25000</b>					<b>Gallons</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
	Permit Requirement	Report (Mo. Total.)					Gallons		Monthly	Calculation
Flow, total plant PARM Code 50050 P Mon. Site No. EFA-01	Sample Measurement	<b>0.062</b>	<b>MGD</b>					<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
	Permit Requirement	0.216 (3MADF)	MGD						Monthly	Calculation
Percentage Capacity, (3MADF/Permitted Capacity) x 100 PARM Code 00180 I Mon. Site No. FLW-01	Sample Measurement			<b>29</b>			<b>%</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
	Permit Requirement			Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C PARM Code 80082 G Mon. Site No. INF-01	Sample Measurement			<b>125</b>			<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended PARM Code 00530 G Mon. Site No. INF-01	Sample Measurement			<b>245</b>			<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
	Sample Measurement									
	Permit Requirement									

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Utilities, Inc

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**DAILY SAMPLE RESULTS - PART B**

Permit Number:  
Monitoring Period

FLA012801  
From Apr 01, 2007 To: Apr 30, 2007

Facility: Labrador/Forest Lake Estates WWTF  
County: Pasco

	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	66000									
2	66000				7.3		2.2			
3	58000				7.3		2.2			
4	75000				7.3		2.2			
5	62000				7.2		2.2			
6	84000				7.2		2.2	12500		
7	43000				7.2		2.2			
8	43000									
9	76000				7.2		2.2	12500		
10	88000				7.2		2.2			
11	82000				7.2		2.2			
12	97000	2.0	1.0	1.0	7.3		2.2		190	260
13	105000				7.2		2.2			
14	47000				7.2		2.2			
15	47000									
16	76000				7.3		2.2			
17	73000				7.3		2.0			
18	23000				7.2		2.2			
19	56000				7.1		2.2			
20	97000				7.2		2.2			
21	63000				7.1		2.2			
22	63000									
23	68000				7.3		2.2			
24	68000	2.0	5.0	1.0	7.3		3.0		60	230
25	68000				7.3		3.0			
26	68000				7.3		3.0			
27	68000				7.3		3.0			
28	68000				7.3		2.2			
29	68000									
30	68000				7.3		3.0			
31										
Total	2,034,000	2	2	2	25		25	2	2	2
Mo. Avg.	68,000	2.0	3.0	1.0	7.2		2.3	25000	125	245

**PLANT STAFFING:**

Day shift Operator	Class: C	Certificate No: 12294	Name: Shantavious S. Rainey
Evening Shift Operator	Class: C	Certificate No: 8040	Name: David E. Shoffstall
Night Shift Operator	Class: _____	Certificate No: _____	Name: _____
Lead Operator	Class: C	Certificate No: 12294	Name: Shantavious S. Rainey

# LABRADOR/FOREST LAKES ESTATES (693) WWTF DAILY OPERATIONS & LABORATORY ANALYSIS LOG

Month: **April**

Year: **2007**

Date	Flow Meter			pH		Chlorine				Sprayfield		Effluent Pump				Sludge Judge AM/PM			Settleability			Rain Gauge	Operator	
	Total	Volume	Interval Volume	Influent	Effluent	#1	#2	Usage	CL2 Residue	Meter	Run Hours	#1	Run Hours	#2	Run Hours	Clarifier #1	Clarifier #2	Clarifier #3	Plant/Train #1	Plant/Train #2	Plant/Train #3			
1			0.066																				0.0	
2	out of service		0.066	6.9	7.3				2.2	510323		14219.1		13135.2		3.0	3.0	3.5	400	380	310	0.0	sr	
3		2441769	0.058	6.9	7.3				2.2			14222.7		13138.2		3.0	3.0	3.5	400	370	300	0.0	sr	
4		2500201	0.075	6.9	7.3				2.2			14225.8		13141.4		2.0	5.0	3.0	400	370	300	0.0	sr	
5		2575200	0.062	6.9	7.2				2.2	512231		14229.7		13145.3		2.0	4.5	3.0	380	350	290	0.3	sr	
6		2636879	0.064	7.0	7.2				2.2			14233.1		13148.8		3.0	4.0	3.0	400	370	300		sr	
7		2720509	0.043	7.0	7.2				2.2			14237.6		13153.4									dh	
8			0.043																				0.3	
9		2806580	0.076	7.0	7.2				2.2	514800						3.0	3.0	3.0	400	380	320	0.3	sr	
10		2882593	0.088	7.0	7.2				2.2							3.0	3.5	3.0	400	390	350	0.5	sr	
11		2970429	0.082	7.0	7.2				2.2	516213						3.5	3.0	3.5	410	420	320	0.4	sr	
12		3052453	0.097	6.9	7.3				2.2			14254.9		13171.2		2.0	3.5	2.0	420	430	330	0.1	sr	
13		3149265	0.105	6.9	7.2				2.2	517689		14258.7		13175.0		3.0	4.0	2.5	420	450	320	0.0	sr	
14		3254390	0.047	7.0	7.2				2.2			14263.5		13179.9									dh	
15			0.047																				0.0	
16		3347735	0.076	7.0	7.3				2.2	519855		14268.7		13185.3		3.5	3.0	3.0	350	500	350	0.0	sr	
17		3424150	0.073	7.0	7.3				2.0			14272.9		13189.6		No Test			No Test			0.0	sr	
18		3496798	0.023	6.9	7.2				2.2			14275.9		13192.7		4.0	4.5	3.5	380	500	400	0.0	sr	
19		3519706	0.056	6.9	7.1				2.2			14277.2		13194.9		2.5	3.5	3.0	320	410	380	0.0	sr	
20		3575745	0.097	6.9	7.2				2.2			14280.2		13197.0		6.0	4.0	3.0	300	400	350	0.0	sr	
21		3672528	0.063	7.0	7.1				2.2			14284.8		13201.7									dh	
22			0.063																				0.0	
23		3797994	0.068	7.0	7.3				2.2	523425		14289.2		13206.1		2.5	6.0	3.0	300	350	350	0.0	sr	
24	meter issues		0.068	6.9	7.3				3.0			14292.1		13209.1		3	5	2.5	450	350	350	0.0	sr	
25	meter issues		0.068	6.9	7.3				3.0			14294.9		13211.9		3	3	2.5	400	400	340	0.0	sr	
26	meter issues		0.068	7.0	7.3				3.0							3.0	3.0	2.5	380	350	320	0.0	sr	
27	meter issues		0.068	7.0	7.3				3.0							3.0	2.0	2.0	300	320	300	0.0	sr	
28	meter issues		0.068	6.9	7.3				2.2			14303.7		13220.8									dh	
29	meter issues		0.068																				0.0	
30	meter issues		0.068	6.9	7.3				3.0			14306.7		13233.9		3.0	2.0	2.0	340	350	320		sr	
31																								
Total			2.034	25	25				25															
Mo. Avg.			0.068	6.9	7.2				2.3															

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Utilities, Inc

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P.S

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

693

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

PERMITTEE NAME: Labrador Utilities Inc.  
 MAILING ADDRESS: 200 Weathersfeild Avenue  
 Altamonte Springs, Fl 32714

PERMIT NUMBER: FLA012801

LIMIT: Final  
 CLASS SIZE: N/A

**FILE COPY**

PERMIT GROUP: Monthly Domestic

FACILITY: Forest Lake Estates WWTF  
 LOCATION: 41311 Paquette Way  
 Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: R-001, including Influent

COUNTY: Pasco

NO DISCHARGE FROM SITE:  
 MONITORING PERIOD From: May 01, 2007 To: May 31, 2007

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.055	MGD			0	Monthly	Calculation
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.216 (A.A.D.)	MGD				Monthly	Calculation
Flow, to R-001	Sample Measurement	0.020	MGD			0	5 Days/Week	Flow Meter and totalizers
PARM Code 50050 I Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow Meter and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.96		0	Monthly	Calculation
Mon. Site No. EFA-01 PARM Code 50050 I Mon. Site No. FLW-01	Permit Requirement			20.0 (Mo. Avg.)			Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.4	2.0	0	Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01 PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			3.60		0	Monthly	Calculation
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (Mo. Avg.)			Monthly	Calculation
Solids, Total Suspended	Sample Measurement			3.0	5.0	0	Every Two Weeks	8-hour FPC
PARM Code 00530 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC

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

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
W. Lee Neal		407 948-9863	2007/06/26

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

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY:  
COUNTY:

Forest Lake Estates WWTF  
Pasco

MONITORING GROUP NUMBER:  
MONITORING PERIOD

R-001  
From: May 01, 2007

PERMIT NUMBER: FLA012801  
To: May 31, 2007

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				7.1	7.3		SU	0	5 Days/Week	Grab
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement				6.0 (Min)	8.5 (Max)		SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1.25			#/100ML	0	Monthly	Calculation
PARM Code 74055 Y Mon. Site No. FLW-01	Permit Requirement				300 (Max)			#/100ML		Monthly	Calculation
Coliform, Fecal	Sample Measurement				1.0	100	1.0	#/100ML	0	Every Two Weeks	Grab
PARM Code 74055 A Mon. Site No. FLW-01	Permit Requirement				Report (Min)	400 (Max)	200 (Avg)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				2.0			MG/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon. Site No. FLW-01	Permit Requirement				0			MG/L		5 Days/Week	Grab
Sludge Production, Total	Sample Measurement	0						Gallons	0	Monthly	Calculation
PARM Code 49019 P Mon. Site No. OTH-01	Permit Requirement	Report (Mo. Total)						Gallons		Monthly	Calculation
Flow, total plant	Sample Measurement	0.057		MGD					0	Monthly	Calculation
PARM Code 50050 P Mon. Site No. EFA-01	Permit Requirement	0.216 (3MADF)		MGD						Monthly	Calculation
Percentage Capacity, (3MADF/Permitted Capacity) x 100	Sample Measurement				26.3			%	0	Monthly	Calculation
PARM Code 00180 I Mon. Site No. FLW-01	Permit Requirement				Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement				85			MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement				Report			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				270			MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement				Report (MG/L)			MG/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										



### DAILY SAMPLE RESULTS - PART B

Permit Number: FLA012801

Facility: Labrador/Forest Lake Estates WWTF

Monitoring Period: From May 01, 2007

To: May 31, 2007

County: Pasco

	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	43000				7.3		3.0			
2	43000				7.2		3.1			
3	43000				7.3		3.0			
4	37000				7.2		3.0			
5	22000				7.1		2.2			
6	22000									
7	28000				7.2		3.0			
8	16000				7.2		3.1			
9	11000	2.0	1.0		7.3		3.3		60	340
10	9000				7.3		3.0			
11	10000				7.3		3.0			
12	8000				7.3		3.2			
13	7000									
14	32000				7.3		3.0			
15	4000				7.2		3.1			
16	8000				7.3		3.0			
17	29000				7.3		2.8			
18	26000				7.3		3.0			
19	13000				7.2		3.5			
20	13000									
21	23000				7.2		3.0			
22	21000	2.8	5.0		7.2		3.1		110	200
23	20000				7.2		2.8			
24	9000				7.3		3.0			
25	28000				7.2		2.8			
26	19000				7.2		3.0			
27	19000									
28	18000				7.2		2.8			
29	18000				7.2		2.8			
30	18000				7.3		3.0			
31	17,000				7.3		3.0			
Total	634,000				27		27			
Mo. Avg.	20,452	2.40	3.00		7.2		3.0		85	270

**PLANT STAFFING:**

Day shift Operator      Class: C      Certificate No:12294      Name:Shantavious S. Rainey

Evening Shift Operator      Class:C      Certificate No:8040      Name:David E. Shoffstall

Night Shift Operator      Class: \_\_\_\_\_      Certificate No: \_\_\_\_\_      Name: \_\_\_\_\_

Lead Operator      Class: C      Certificate No:12294      Name:Shantavious S. Rainey



## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

PERMITTEE NAME: Labrador Utilities Inc.	PERMIT NUMBER: FLA012801	
MAILING ADDRESS: 200 Weathersfield Avenue Altamonte Springs, FL 32714	LIMIT: Final	REPORT: Montly
	CLASS SIZE: N/A	GROUP: Domestic
FACILITY: Forest Lake Estates WWTF	MONITORING GROUP NUMBER: R-001	
LOCATION: 41311 Paquette Way Zephyrhills, FL 33540	MONITORING GROUP DESC: R-001, including influent	
COUNTY: Pasco	NO DISCHARGE FROM SITE:	
	MONITORING PERIOD	From: June 01, 2007 To: June 30, 2007

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	<b>0.053</b>		<b>MGD</b>				<b>0</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.216 (AADT)		MGD						Monthly	Calculation
Flow, to R-001	Sample Measurement	<b>0.020</b>		<b>MGD</b>				<b>0</b>	<b>0</b>	<b>5 Days/Week</b>	<b>Flow Meter and totalizers</b>
PARM Code 50050 I Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)		MGD						5 Days/Week	Flow Meter and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<b>4.66</b>			<b>MG/L</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
Mon. Site No. EFA-01 PARM Code 50050 I Mon. Site No. FLW-01	Permit Requirement									Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<b>2.0</b>	<b>2.0</b>		<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
Mon. Site No. EFA-01 PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement									Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				<b>3.52</b>			<b>MG/L</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement									Monthly	Calculation
Solids, Total Suspended	Sample Measurement				<b>1.5</b>	<b>2.0</b>		<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
PARM Code 00530 A Mon. Site No. EFA-01	Permit Requirement									Every Two Weeks	8-hour FPC

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

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
W. Lee Neal		407 948-9863	2007/07/24

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

*12-7-07 Entered on DMR PA*

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY:  
COUNTY:

Forest Lake Estates WWTF  
Pasco

MONITORING GROUP NUMBER:  
MONITORING PERIOD

R-001  
From: June 01, 2007 To: June 30, 2007

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				<b>7.2</b>	<b>7.5</b>		<b>SU</b>	<b>0</b>	<b>5 Days/Week</b>	<b>Grab</b>
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement										Grab
Coliform, Fecal	Sample Measurement				<b>1.25</b>			<b>#/100ML</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 74055 Y Mon. Site No. FLW-01	Permit Requirement										Calculation
Coliform, Fecal	Sample Measurement				<b>1.0</b>	<b>100</b>	<b>1.0</b>	<b>#/100ML</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>Grab</b>
PARM Code 74055 A Mon. Site No. FLW-01	Permit Requirement										Grab
Total Residual Chlorine (For Disfection)	Sample Measurement				<b>1.7</b>			<b>MG/L</b>	<b>0</b>	<b>5 Days/Week</b>	<b>Grab</b>
PARM Code 50060 A Mon. Site No. FLW-01	Permit Requirement										Grab
Sludge Production, Total	Sample Measurement	<b>0</b>						<b>Gallons</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 49019 P Mon. Site No. OTH-01	Permit Requirement	Report (Mo. Total)									Calculation
Flow, total plant	Sample Measurement	<b>0.036</b>		<b>MGD</b>					<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 50050 P Mon. Site No. EFA-01	Permit Requirement	0.216 (3MADF)		MGD							Calculation
Percentage Capacity, (3MADF/Permitted Capacity) x 100	Sample Measurement				<b>16.6</b>			<b>%</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 00180 I Mon. Site No. FLW-01	Permit Requirement										Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<b>170</b>			<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement										8-hour FPC
Solids, Total Suspended	Sample Measurement				<b>150</b>			<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement										8-hour FPC
	Sample Measurement										
	Permit Requirement										

### DAILY SAMPLE RESULTS - PART B

Permit Number: FLA012801      Facility: Labrador/Forest Lake Estates WWTF  
 Monitoring Period: From June 01, 2007 To: June 30, 2007      County: Pasco

	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	0.011				7.3		3.0			
2	0.010				7.2		2.7			
3	0.010									
4	0.008				7.2		2.6			
5	0.023				7.3		2.8			
6	0.025	2.0	1.0	1.0	7.2		3.0		60	180
7	0.017				7.3		3.0			
8	0.040				7.3		3.0			
9	0.049				7.2		3.5			
10	0.049									
11	0.009				7.2		2.0			
12	0.003				7.3		3.2			
13	0.004				7.2		2.9			
14	0.003				7.3		2.0			
15	0.022				7.4		2.8			
16	0.010									
17	0.016									
18	0.027									
19	0.018	2.0	2.0	1.0	7.3		2.8		280	120
20										
21	0.014				7.3		1.7			
22										
23	0.016				7.3		3.0			
24										
25	0.028				7.5		2.8			
26										
27	0.030				7.2		3.5			
28										
29	0.021				7.2		3.5			
30										
31										
Total	0.599				26		73.900			
Mo. Avg.	0.020	1.40	2.50		7.3		2.84		170	150

**PLANT STAFFING:**

Day shift Operator      Class: C      Certificate No: 14405      Name: Don Hamilton  
 Evening Shift Operator      Class: C      Certificate No: 8040      Name: David E. Shoffstall  
 Night Shift Operator      Class: \_\_\_\_\_      Certificate No: \_\_\_\_\_      Name: \_\_\_\_\_  
 Lead Operator      Class: C      Certificate No: 9151      Name: W. Lee Neal





DMR LAB TOTALS

Month/Year	Flow	Annual Average Total	CBOD EFF	Annual Average Total	TSS EFF	Annual Average Total	Fecal	Annual Average Total
January-05	185,000		2.0		2.0			
February-05	202,000		2.0		2.0			
March-05	200,000		2.0		2.0			
April-05	119,000		2.6		2.0			
May-05	58,000		3.6		2.0			
June-05	103,000		2.2		2.0			
July-05	80,000		2.0		2.0			
August-05	35,000		2.0		2.0			
September-05	54,000		2.0		2.0			
October-05	37,000				2.0			
November-05	153,000		2.0		2.0			
December-05	168,000	116000	3.4	2.5	2.0	2.0		
Average	116,167				2.0			
Month/Year	Flow	Annual Average Total	CBOD EFF	Annual Average Total	TSS EFF	Annual Average Total	Fecal	Annual Average Total
January-06	220,000	119000	2.3	2.5	2.0	2.0		
February-06	230,000	119000	2.0	2.5	10.0	2.7		
March-06	239,000	125000	4.2	2.7	11.3	3.4		
April-06	158,000	128000	2.3	2.6	3.0	3.5	3.0	1.2
May-06	87,000	130000	12.5	3.4	3.0	3.6	1.0	2.0
June-06	35,000	125000	4.6	3.6	2.0	3.6	1.0	1.5
July-06	37,000	121000	3.9	3.7	2.0	3.6	1.0	1.5
August-06	33,000	120000	7.5	6.8	3.0	3.7	1.0	1.4
September-06	39,000	119000	3.6	4.3	2.0	3.7	1.0	1.3
October-06	45,000	120000	2.5	4.2	3.0	3.8	1.0	1.3
November-06	59,000	113000	2.0	4.0	3.0	3.7	4.0	1.6
December-06	50,000	103000	3.0	4.2	4.0	4.0	1.0	1.6
Average	102,667							
Month/Year	Monthly avg. Flow	Annual Average Total	CBOD EFF	Annual Average Total	TSS EFF	Annual Average Total	Fecal	Annual Average Total
January-07	103,000	93000	5.90	4.50	3.00	4.10	1.0	1.50
February-07	83,000	81000	5.20	5.00	5.20	3.70	1.0	1.40
March-07	84,000	81000	17.00	5.80	10.00	3.60	1.0	1.40
April-07	68,000	60300	2.00	4.90	3.00	3.20	1.0	1.30
May-07	20,452	54704	1.40	4.88	2.50	3.56	1.0	1.25
June-07	20,000	53454	2.0	4.66	1.5	3.52	1.0	1.25



## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

PERMITTEE NAME: Labrador Utilities Inc.	PERMIT NUMBER: FLA012801	
MAILING ADDRESS: 200 Weathersfeild Avenue Altamonte Springs, FL 32714	LIMIT: Final	REPORT: Montly
	CLASS SIZE: N/A	GROUP: Domestic
FACILITY: Forest Lake Estates WWTF	MONITORING GROUP NUMBER: R-001	
LOCATION: 41311 Paquette Way Zephyrhills, FL 33540	MONITORING GROUP DESC: R-001, including Influent	
COUNTY: Pasco	NO DISCHARGE FROM SITE:	
	MONITORING PERIOD	From: July 01, 2007 To: July 31, 2007, 2007

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	<b>0.052</b>		<b>MGD</b>					<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 50050 Y	Permit Requirement	0.216 (AADP)		MGD							Calculation
Mon. Site No. FLW-01											
Flow, to R-001	Sample Measurement	<b>0.023</b>		<b>MGD</b>					<b>0</b>	<b>5 Days/Week</b>	<b>Flow Meter and totalizers</b>
PARM Code 50050 I	Permit Requirement	Report (Mo. Avg.)		MGD							Flow Meter and totalizers
Mon. Site No. FLW-01											
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<b>4.8</b>			<b>MG/L</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
Mon. Site No. EFA-01	Permit Requirement				20.0 (An. Avg.)						Calculation
PARM Code 50050 I											
Mon. Site No. FLW-01											
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<b>5.9</b>	<b>13.0</b>		<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
Mon. Site No. EFA-01	Permit Requirement				30.0 (Mo. Avg.)	60.0 (Max)					8-hour FPC
PARM Code 80082 Y											
Mon. Site No. EFA-01											
Solids, Total Suspended	Sample Measurement				<b>3.6</b>			<b>MG/L</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 00530 Y	Permit Requirement				20.0 (An. Avg.)						Calculation
Mon. Site No. EFA-01											
Solids, Total Suspended	Sample Measurement				<b>3.3</b>	<b>6.0</b>		<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
PARM Code 00530 A	Permit Requirement				30.0 (Mo. Avg.)	60.0 (Max)					8-hour FPC
Mon. Site No. EFA-01											

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

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
<b>William Neal</b>		<b>407 948-9863</b>	<b>2007/08/24</b>

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

693

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Forest Lake Estates WWTF  
 COUNTY: Pasco

MONITORING GROUP NUMBER:  
 MONITORING PERIOD:

R-001  
 From: May 01, 2007

PERMIT NUMBER: FLA012801  
 To: May 31, 2007

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement			7.1	7.3		SU	0	5 Days/Week	Grab
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)				5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.3			#/100ML	0	Monthly	Calculation
PARM Code 74055 Y Mon. Site No. FLW-01	Permit Requirement			200 (Ar. Avg.)					Monthly	Calculation
Coliform, Fecal	Sample Measurement			1.0	100	1.0	#/100ML	0	Every Two Weeks	Grab
PARM Code 74055 A Mon. Site No. FLW-01	Permit Requirement			Report (Mo. Geo. Mean)	400 (95%)					Grab
Total Residual Chlorine (For Disfection)	Sample Measurement			1.5			MG/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon. Site No. FLW-01	Permit Requirement			0.5 (Min.)					5 Days/Week	Grab
Sludge Production, Total	Sample Measurement	0.025					Gallons	0	Monthly	Calculation
PARM Code 49019 P Mon. Site No. OTH-01	Permit Requirement	Report (Mo. Total.)							Monthly	Calculation
Flow, total plant	Sample Measurement	0.021	MGD					0	Monthly	Calculation
PARM Code 50050 P Mon. Site No. EFA-01	Permit Requirement	0.216 (3MADF)	MGD						Monthly	Calculation
Percentage Capacity, (3MADF/Permitted Capacity) x 100	Sample Measurement			9.7			%	0	Monthly	Calculation
PARM Code 00180 I Mon. Site No. FLW-01	Permit Requirement			Report					Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			430			MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Mo. Avg.)					Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			640			MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Mo. Avg.)					Every Two Weeks	8-hour FPC
	Sample Measurement									
	Permit Requirement									

### DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA012801  
From July 01, 2007

To: July 31, 2007

Facility: Labrador/Forest Lake Estates WWTF  
County: Pasco

	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1										
2	0.003				7.3		2.8	<b>25000</b>		
3	0.009	<b>13.0</b>	<b>2.0</b>		7.3		2.8+		<b>810</b>	<b>1300</b>
4	0.000				7.3		2.5			
5	0.016				7.2		3.5+			
6	0.023				7.2		3.5+			
7	0.035				7.2		3.5+			
8										
9	0.017				7.3		3.5+			
10	0.014				7.3		3.5+			
11	0.008				7.2		3.5+			
12	0.023				7.2		3.5+			
13	0.023				7.2		3.6+			
14	0.047				7.3		3.5+			
15										
16	0.020				7.3		3.5+			
17	0.036	<b>2.8</b>	<b>2.0</b>		7.3		3.5		<b>280</b>	<b>370</b>
18	0.027				7.3		3.5+			
19	0.013				7.2		3.5+			
20	0.021				7.3		3.5+			
21	0.032				7.3		3.5+			
22										
23	0.040				7.2		3.5+			
24	0.038				7.2		3.5+			
25	0.022				7.2		3.5+			
26	0.019				7.3		3.5+			
27	0.022				7.2		3.5+			
28	0.037				7.2		1.6			
29										
30	0.015				7.1		1.5			
31	0.040	<b>2.0</b>	<b>6.0</b>		7.1		2.8		<b>200</b>	<b>250</b>
<b>Total</b>	<b>0.600</b>	<b>17.8</b>	<b>10</b>		<b>188.200</b>		<b>14.700</b>	<b>25,000</b>	<b>1,290</b>	<b>1,920</b>
<b>Mo. Avg.</b>	<b>0.023</b>				<b>7.2</b>		<b>2.5</b>			

**PLANT STAFFING:**

Day shift Operator	Class: C	Certificate No 14405	Name: Don Hamilton
Evening Shift Operator	Class: C	Certificate No: 8040	Name: David E. Shoffstall
Night Shift Operator	Class: _____	Certificate No: _____	Name: _____
Lead Operator	Class: C	Certificate No: 9151	Name: William Neal





MR LAB TOTALS

Month/Year	Flow	Annual Avarage Total	CBOD EFF	Annual Avarage Total	TSS EFF	Annual Avarage Total	Fecal	Annual Avarage Total
January-05	185,000		2.0		2.0			
February-05	202,000		2.0		2.0			
March-05	200,000		2.0		2.0			
April-05	119,000		2.6		2.0			
May-05	58,000		3.6		2.0			
June-05	103,000		2.2		2.0			
July-05	80,000		2.0		2.0			
August-05	35,000		2.0		2.0			
September-05	54,000		2.0		2.0			
October-05	37,000				2.0			
November-05	153,000		2.0		2.0			
December-05	168,000	116000	3.4	2.5	2.0	2.0		
Average	116,167				2.0			
<hr/>								
Month/Year	Flow	Annual Avarage Total	CBOD EFF	Annual Avarage Total	TSS EFF	Annual Avarage Total	Fecal	Annual Avarage Total
January-06	220,000	119000	2.3	2.5	2.0	2.0		
February-06	230,000	119000	2.0	2.5	10.0	2.7		
March-06	239,000	125000	4.2	2.7	11.3	3.4		
April-06	158,000	128000	2.3	2.6	3.0	3.5	3.0	1.2
May-06	87,000	130000	12.5	3.4	3.0	3.6	1.0	2.0
June-06	35,000	125000	4.6	3.6	2.0	3.6	1.0	1.5
July-06	37,000	121000	3.9	3.7	2.0	3.6	1.0	1.5
August-06	33,000	120000	7.5	6.8	3.0	3.7	1.0	1.4
September-06	39,000	119000	3.6	4.3	2.0	3.7	1.0	1.3
October-06	45,000	120000	2.5	4.2	3.0	3.8	1.0	1.3
November-06	59,000	113000	2.0	4.0	3.0	3.7	4.0	1.6
December-06	50,000	103000	3.0	4.2	4.0	4.0	1.0	1.6
Average	102,667							
<hr/>								
Month/Year	Flow	Annual Avarage Total	CBOD EFF	Annual Avarage Total	TSS EFF	Annual Avarage Total	Fecal	Annual Avarage Total
January-07	103,000	93000	5.9	4.5	3.0	4.1	1.0	1.5
February-07	83,000	81000	5.2	5.0	5.2	3.7	1.0	1.4
March-07	84,000	81000	17.0	5.8	10.0	3.6	1.0	1.4
April-07	68,000	60300	2.0	4.9	3.0	3.2	1.0	1.3
May-07	20,452	54704	1.40	4.88	2.50	3.56	1.0	1.25
June-07	20,000	53454	2.0	4.66	1.5	3.52	1.0	1.25
July-07	23,000	52204	5.9	4.8	3.3	3.6	1.0	1.25

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

PERMITTEE NAME:	Labrador Utilities Inc.	PERMIT NUMBER:	FLA012801
MAILING ADDRESS:	200 Weathersfield Avenue Altamonte Springs, FL 32714	LIMIT:	Final
		CLASS SIZE:	N/A
FACILITY:	Forest Lake Estates WWTF	REPORT:	Monthly
LOCATION:	41311 Paquette Way Zephyrhills, FL 33540	MONITORING GROUP NUMBER:	R-001
		MONITORING GROUP DESC:	R-001, including Influent
COUNTY:	Pasco	NO DISCHARGE FROM SITE:	
		MONITORING PERIOD	From: Aug 01, 2007 To: Aug 31, 2007

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.052	MGD			0	Monthly	Calculation
PARM Code 50050 Y	Permit Requirement	0.216 (AADF)	MGD					Calculation
Mon. Site No. FLW-01								
Flow, to R-001	Sample Measurement	0.029	MGD			0	5 Days/Week	Flow Meter and totalizers
PARM Code 50050 I	Permit Requirement	Report (Mo. Avg.)	MGD					Flow Meter and totalizers
Mon. Site No. FLW-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.5		0	Monthly	Calculation
Mon. Site No. EFA-01	Permit Requirement			20.0			Monthly	Calculation
PARM Code 50050 I								
Mon. Site No. FLW-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.2	3.8	0	Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01	Permit Requirement			30.0	60.0		Every Two Weeks	8-hour FPC
PARM Code 80082 Y								
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			3.5		0	Monthly	Calculation
PARM Code 00530 Y	Permit Requirement			20.0			Monthly	Calculation
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			1.5	2.0	0	Every Two Weeks	8-hour FPC
PARM Code 00530 A	Permit Requirement			30.0	60.0		Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01								

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

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Jeff Finehirsh		407 402-2737	2007/09/24

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

*12-7-07 Entered in DMR*

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY:  
COUNTY:

Forest Lake Estates WWTF  
Pasco

MONITORING GROUP NUMBER:  
MONITORING PERIOD

R-001  
From: Aug 01, 2007

PERMIT NUMBER: FLA012801  
To: Aug 31, 2007

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				6.8	7.2		SU	0	5 Days/Week	Grab
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement										Grab
Coliform, Fecal	Sample Measurement				1.5			#/100ML	0	Monthly	Calculation
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement										Calculation
Coliform, Fecal	Sample Measurement				1.0	1	1.0	#/100ML	0	Every Two Weeks	Grab
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement									Every Two Weeks	Grab
Total Residual Chlorine (For Disfection)	Sample Measurement				0.7			MG/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement									5 Days/Week	Grab
Sludge Production, Total	Sample Measurement	0						Gallons	0	Monthly	Calculation
PARM Code 49019 P Mon. Site No. OTH-01	Permit Requirement	Report (Mo. Total)						Gallons		Monthly	Calculation
Flow, total plant	Sample Measurement	0.024		MGD					0	Monthly	Calculation
PARM Code 50050 P Mon. Site No. EFA-01	Permit Requirement	0.216 (3MADF)		MGD						Monthly	Calculation
Percentage Capacity, (3MADF/Permitted Capacity) x 100	Sample Measurement				11%			%	0	Monthly	Calculation
PARM Code 00180 I Mon. Site No. FLW-01	Permit Requirement									Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement				226			MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement									Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				535			MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement									Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										



**DAILY SAMPLE RESULTS - PART B**

Permit Number:  
Monitoring Period

FLA012801  
From Aug 01, 2007 To: Aug 31, 2007

Facility: Labrador/Forest Lake Estates WWTF  
County: Pasco

	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	0.054				7.2		3.8			
2	0.046				7.1		3.5			
3	0.118				7.2		3.4			
4										
5										
6	0.026				7.2		2.4			
7	0.028				7.1		2.8			
8	0.024				7.2		3			
9	0.018				7.2		2.2			
10	0.018				7.1		2.2			
11	0.050				7.2		2			
12										
13	0.019				7.2		3.4			
14	0.019	<b>2.6</b>	<b>2.0</b>	<b>1.0</b>	7.2		3.5		<b>82</b>	<b>170</b>
15	0.019				7.2		4.2			
16	0.019				7.1		5			
17	0.032				7.1		5			
18	0.032				7.1		5			
19										
20	0.019				7.1		4.5			
21	0.015				7.1		5			
22	0.019				7.1		8.8			
23	0.019				7.2		8.8			
24	0.041				7.1		5.5			
25	0.034				7.1		5			
26										
27	0.018				7.1		1.3			
28	0.016	<b>3.8</b>	<b>1.0</b>	<b>1.0</b>	7.1		1.5		<b>370</b>	<b>900</b>
29	0.018				7.1		0.55			
30	0.019				7.0		0.85			
31	0.026				6.8		0.65			
Total	<b>0.766</b>				<b>26</b>		<b>27</b>			
Mo. Avg.	<b>0.029</b>	<b>3.2</b>	<b>1.5</b>	<b>1.0</b>	<b>7.1</b>		<b>3.6</b>		<b>226</b>	<b>535</b>

*12-7-07 Entrodsmr*

**PLANT STAFFING:**

Day shift Operator	Class: C	Certificate No: 14405	Name: Don Hamilton
	Class: A	Certificate No: 9151	Name: William Neal
Evening Shift Operator	Class: C	Certificate No: 8040	Name: David E. Shoffstall
Night Shift Operator	Class: C	Certificate No: 13840	Name: Robert Buono
Lead Operator	Class: C	Certificate No: 14129	Name: Jeff Finehirsh



MR LAB TOTALS

Month/Year	Flow	Annual Average Total	CBOD EFF	Annual Average Total	TSS EFF	Annual Average Total	Fecal	Annual Average Total
January-05	185,000		2.0		2.0			
February-05	202,000		2.0		2.0			
March-05	200,000		2.0		2.0			
April-05	119,000		2.6		2.0			
May-05	58,000		3.6		2.0			
June-05	103,000		2.2		2.0			
July-05	80,000		2.0		2.0			
August-05	35,000		2.0		2.0			
September-05	54,000		2.0		2.0			
October-05	37,000				2.0			
November-05	153,000		2.0		2.0			
December-05	168,000	116000	3.4	2.5	2.0	2.0		
Average	116,167				2.0			

Month/Year	Flow	Annual Average Total	CBOD EFF	Annual Average Total	TSS EFF	Annual Average Total	Fecal	Annual Average Total
January-06	220,000	119000	2.3	2.5	2.0	2.0		
February-06	230,000	119000	2.0	2.5	10.0	2.7		
March-06	239,000	125000	4.2	2.7	11.3	3.4		
April-06	158,000	128000	2.3	2.6	3.0	3.5	3.0	1.2
May-06	87,000	130000	12.5	3.4	3.0	3.6	1.0	2.0
June-06	35,000	125000	4.6	3.6	2.0	3.6	1.0	1.5
July-06	37,000	121000	3.9	3.7	2.0	3.6	1.0	1.5
August-06	33,000	120000	7.5	6.8	3.0	3.7	1.0	1.4
September-06	39,000	119000	3.6	4.3	2.0	3.7	1.0	1.3
October-06	45,000	120000	2.5	4.2	3.0	3.8	1.0	1.3
November-06	59,000	113000	2.0	4.0	3.0	3.7	4.0	1.6
December-06	50,000	103000	3.0	4.2	4.0	4.0	1.0	1.6
Average	102,667							

Month/Year	Average Daily Flow	Annual Average Total	CBOD EFF	Annual Average Total	TSS EFF	Annual Average Total	Fecal	Annual Average Total
January-07	103,000	93000	5.9	4.5	3.0	4.1	1.0	1.5
February-07	83,000	81000	5.2	5.0	5.2	3.7	1.0	1.4
March-07	84,000	81000	17.0	5.8	10.0	3.6	1.0	1.4
April-07	68,000	60300	2.0	4.9	3.0	3.2	1.0	1.3
May-07	20,452	54704	1.40	4.88	2.50	3.56	1.0	1.25
June-07	20,000	53454	2.0	4.66	1.5	3.52	1.0	1.25
July-07	23,000	52204	5.9	4.8	3.3	3.6	1.0	1.25
August-07	29,000	51954	3.2	4.5	1.5	3.5	1.0	1.25

693  
Sept-07

Sept

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

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

**PERMITTEE NAME:** Labrador Utilities Inc. **PERMIT NUMBER:** FLA012801  
**MAILING ADDRESS:** 200 Weathersfield Avenue **LIMIT:** Final **REPORT:** Monthly  
 Altamonte Springs, FL 32714 **CLASS SIZE:** N/A **GROUP:** Domestic  
**FACILITY:** Forest Lake Estates WWTP **MONITORING GROUP NUMBER:** R-001  
**LOCATION:** 41311 Pagoda Way **MONITORING GROUP DESC:** R-001, including Influent  
 Zephyrhills, FL 33540  
**COUNTY:** Pasco **NO DISCHARGE FROM SITE:**  
**MONITORING PERIOD:** From: Sept 01, 2007 To: Sept 30, 2007

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.051	MGD			0	Monthly	Calculation
PARM Code 50050 Y	Permit Requirement	0.216 (AADF)	MGD				Monthly	Calculation
Mon. Site No. FLW-01								
Flow, to R-001	Sample Measurement	0.020	MGD			0	5 Days/Week	Flow Meter and totalizers
PARM Code 50050 I	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow Meter and totalizers
Mon. Site No. FLW-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.4	MG/L	0	Monthly	Calculation
Mon. Site No. EFA-01	Permit Requirement			20.0 (An. Avg.)	MG/L		Monthly	Calculation
PARM Code 50050 I								
Mon. Site No. FLW-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.0 4.0	MG/L	0	Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01	Permit Requirement			30.0 60.0 (Mo. Avg.) (Max)	MG/L		Every Two Weeks	8-hour FPC
PARM Code #0082 Y								
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			3.5	MG/L	0	Monthly	Calculation
PARM Code 00530 Y	Permit Requirement			20.0 (An. Avg.)	MG/L		Monthly	Calculation
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			4.8 6.0	MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 A	Permit Requirement			30.0 60.0 (Mo. Avg.) (Max)	MG/L		Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01								

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

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Jeff Finehirsh		407-402-2737	2007/10/24

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

12-10-07  
Entered PA

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:  
COUNTY:

Forest Lake Estates WWTF  
Pasco

MONITORING GROUP NUMBER:  
MONITORING PERIOD

R-001  
From: Sept 01, 2007

PERMIT NUMBER: FLA012801  
To: Sept 30, 2007

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH		Sample Measurement			6.9	7.4		SU	0	5 Days/Week	Grab
PARM Code 00400	A	Permit Requirement			6.0	8.3		SU		5 Days/Week	Grab
Mon. Site No. EFA-01		Sample Measurement			(Min.)	(Max.)					
Coliform, Fecal		Sample Measurement			1.3			#/100ML	0	Monthly	Calculation
PARM Code 74055	Y	Permit Requirement			200			#/100ML		Monthly	Calculation
Mon. Site No. FLW-01		Sample Measurement			(An. Avg.)						
Coliform, Fecal		Sample Measurement			1.0	1	1.0	#/100ML	0	Every Two Weeks	Grab
PARM Code 74055	A	Permit Requirement			Report	400	800	#/100ML		Every Two Weeks	Grab
Mon. Site No. FLW-01		Sample Measurement			(Mo. Geo. Mean)	(90%)	(Max.)				
Total Residual Chlorine (For Disinfection)		Sample Measurement			0.5			MG/L	0	5 Days/Week	Grab
PARM Code 50060	A	Permit Requirement			0.5			MG/L		5 Days/Week	Grab
Mon. Site No. FLW-01		Sample Measurement			(Min.)						
Sludge Production, Total		Sample Measurement	25000					Gallons	0	Monthly	Calculation
PARM Code 49019	P	Permit Requirement	Report					Gallons		Monthly	Calculation
Mon. Site No. OTH-01		Sample Measurement	(Mo. Total)								
Flow, total plant		Sample Measurement	0.027	MGD					0	Monthly	Calculation
PARM Code 50050	P	Permit Requirement	0.216	MGD						Monthly	Calculation
Mon. Site No. EFA-01		Sample Measurement	(3MADF)								
Percentage Capacity, (3MADF/Permitted Capacity) x 100		Sample Measurement			12.5			%	0	Monthly	Calculation
PARM Code 00180	I	Permit Requirement			Report			%		Monthly	Calculation
Mon. Site No. FLW-01		Sample Measurement									
BOD, Carbonaceous 5 day, 20C		Sample Measurement			180			MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 80042	G	Permit Requirement			Report			MG/L		Every Two Weeks	8-hour FPC
Mon. Site No. INF-01		Sample Measurement			(Mo. Avg.)						
Solids, Total Suspended		Sample Measurement			236			MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530	G	Permit Requirement			Report			MG/L		Every Two Weeks	8-hour FPC
Mon. Site No. INF-01		Sample Measurement			(Mo. Avg.)						
		Permit Requirement									



**DAILY SAMPLE RESULTS - PART B**

Permit Number:  
Monitoring Period

FLA012801  
From September 01, 2007 To: September 30, 2007

Facility: Labrador/Forest Lake Estates WWTF  
County: Pasco

	Flow (MGD) R-001	CBO05 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gall)	CBO05 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	0.018				7.0		6.0			
2	0.018									
3	0.021				7.0		1.5			
4	0.017	2.0	3.2	1.0	7.4		0.7		60	250
5	0.02				6.9		0.5			
6	0.013				7.0		2.1			
7	0.025				6.9		0.8			
8	0.016				7.1		1.4			
9	0.016									
10	0.028				7.0		0.6			
11	0.027				7.1		0.7			
12	0.031				7.3		3.3			
13	0.051				7.3		3.8			
14	0.037				7.2		3.7			
15	0.028				7.0		1.2			
16	0.028									
17	0.038				7.1		3.9			
18	0.026				7.0		2.8			
19	0.031				7.1		3.0			
20	0.038				7.1		1.1			
21	0.061				7.0		4.3			
22	0.03				7.0		3.5			
23	0.025									
24	0.043				7.3		3.2			
25	0.025	4.0	6.0	1.0	7.2		2.2		260	220
26	0.031				7.0		1.9			
27	0.018				7.1		1.8	25000		
28	0.048				7.2		2.7			
29	0.026				7.1		4.0			
30	0.026									
31										
Total	0.840				25		60.5			
Mo. Avg.	0.029				7.1		2.4			

**PLANT STAFFING:**

Day shift Operator      Class: C      Certificate No:14405      Name: Don L. Hamilton  
 Evening Shift Operator      Class: C      Certificate No:8040      Name: David E. Shoffstall  
 Night Shift Operator      Class: A      Certificate No:9151      Name: William Neal  
 Lead Operator      Class: C      Certificate No:14129      Name: Jeffrey S. Finchirsh





693 DMR-oct-07

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

PERMITTEE NAME: Labrador Utilities Inc.  
 MAILING ADDRESS: 200 Weathersfield Avenue  
 Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012801

LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Montly  
 GROUP: Domestic

FACILITY: Forest Lake Estates WWTF  
 LOCATION: 41311 Paquette Way  
 Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: R-001, including Influent

COUNTY: Pasco

NO DISCHARGE FROM SITE:  
 MONITORING PERIOD: From: October 01, 2007 October 31, 2007

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	0.051	MGD			0	Monthly	Calculation
PARAM Code 50050 Y	Permit Requirement	0.216 (AADF)	MGD				Monthly	Calculation
Mon. Site No. FLW-01								
Flow, to R-001	Sample Measurement	0.047	MGD			0	5 Days/Week	Flow Meter and totalizers
PARAM Code 50050 I	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow Meter and totalizers
Mon. Site No. FLW-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.5	MG/L	0	Monthly	Calculation
Mon. Site No. EFA-01	Permit Requirement			20.0 (An. Avg.)	MG/L		Monthly	Calculation
PARAM Code 80082 Y Mon.								
Site No. EFA-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.8	MG/L	0	Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.)	MG/L		Every Two Weeks	8-hour FPC
PARAM Code 80082 Y				60.0 (Max)				
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			3.6	MG/L	0	Monthly	Calculation
PARAM Code 00530 Y	Permit Requirement			20.0 (An. Avg.)	MG/L		Monthly	Calculation
Mon. Site No. EFA-01								
Solids, Total Suspended	Sample Measurement			1.5	MG/L	0	Every Two Weeks	8-hour FPC
PARAM Code 00530 A	Permit Requirement			30.0 (Mo. Avg.)	MG/L		Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01				60.0 (Max)				

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

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Jeff Finehirsh		407 402-2737	2007/05/24

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

*12-7-07 Entered DMR*

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Forest Lake Estates WWTF  
 COUNTY: Pasco

MONITORING GROUP NUMBER:  
 MONITORING PERIOD

R-001 PERMIT NUMBER: FLA012801  
 From: October 01, 2007 To: October 31, 2007

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH PARM Code 00400 Mon. Site No. EFA-01	Sample Measurement				7.0	7.3		SU	0	5 Days/Week	Grab
	Permit Requirement				6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
Coliform, Fecal PARM Code 74055 Mon. Site No. EFA-01	Sample Measurement				1.3			#/100ML	0	Monthly	Calculation
	Permit Requirement				200 (An. Avg.)			#/100ML		Monthly	Calculation
Coliform, Fecal PARM Code 74055 Mon. Site No. EFA-01	Sample Measurement				1.0	100	1.0	#/100ML	0	Every Two Weeks	Grab
	Permit Requirement				Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disfection) PARM Code 50060 Mon. Site No. EFA-01	Sample Measurement				0.6			MG/L	0	5 Days/Week	Grab
	Permit Requirement				0.5 (Min.)			MG/L		5 Days/Week	Grab
Sludge Production, Total PARM Code 49019 Mon. Site No. OTH-01	Sample Measurement	0						Gallons	0	Monthly	Calculation
	Permit Requirement	Report (Mo. Total)						Gallons		Monthly	Calculation
Flow, total plant PARM Code 50050 Mon. Site No. FLW-01	Sample Measurement	0.035		MGD					0	Monthly	Calculation
	Permit Requirement	0.216 (3MADF)		MGD						Monthly	Calculation
Percentage Capacity, (3MADF/Permitted Capacity) x 100 PARM Code 00180 Mon. Site No. FLW-01	Sample Measurement				16			%	0	Monthly	Calculation
	Permit Requirement				Report			%		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C PARM Code 80082 Mon. Site No. INF-01	Sample Measurement				470			MG/L	0	Every Two Weeks	8-hour FPC
	Permit Requirement				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended PARM Code 00530 Mon. Site No. INF-01	Sample Measurement				1170			MG/L	0	Every Two Weeks	8-hour FPC
	Permit Requirement				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										

**DAILY SAMPLE RESULTS - PART B**

Permit Number:  
Monitoring Period

FLA012801  
From October 01, 2007 To: October 31, 2007

Facility: Labrador/Forest Lake Estates WWTF  
County: Pasco

	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	00406	50060	49019	80082	00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	0.052				7.3		3.9			
2	0.046				7.3		3.3			
3	0.032				7.3		1.5			
4	0.048				7.3		4			
5	0.094				7.3		2.8			
6	0.039				7.2		2			
7	0.039									
8	0.044				7.0		0.8			
9	0.045	3.6	2.0	1.0	7.0		0.6		330	640
10	0.041				7.1		0.65			
11	0.040				7.0		1.45			
12	0.047				7.0		5.5			
13	0.034				7.1		3			
14	0.034									
15	0.039				7.0		2.5			
16	0.039				7.0		1.3			
17	0.043				7.1		0.7			
18	0.053				7.0		1.2			
19	0.061				7.0		1			
20	0.040				7.1		1			
21	0.040									
22	0.047				7.1		1.3			
23	0.042	2.0	1.0	1.0	7.0		6.6		610	1700
24	0.066				7.0		0.9			
25	0.056				7.2		4.7			
26	0.057				7.0		3.6			
27	0.042				7.0		0.7			
28	0.042									
29	0.053				7.2		0.8			
30	0.059				7.2		0.8			
31	0.048				7.0		0.8			
<b>Total</b>	<b>1.462</b>	<b>6</b>	<b>3</b>	<b>2</b>	<b>27</b>		<b>57</b>	<b>0</b>	<b>940</b>	<b>2,340</b>
<b>Mo. Avg.</b>	<b>0.047</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>7.1</b>		<b>2.1</b>		<b>470</b>	<b>1,170</b>

*Entered 12-7-07*

**PLANT STAFFING:**

Day shift Operator      Class: C      Certificate No: 14405      Name: Don Hamilton  
 Evening Shift Operator      Class:      Certificate No:      Name:  
 Night Shift Operator      Class: \_\_\_\_\_      Certificate No: \_\_\_\_\_      Name: \_\_\_\_\_  
 Lead Operator      Class: C      Certificate No: 14129      Name: Jeff Finehirsh

PA File No. FLA012801-005-DW2P  
 DEP Form 62-620.910(10), Effective November 29, 1994

## LABRADOR/FOREST LAKES ESTATES (693) EMERGENCY GENERATOR LOG

LABRADOR

Month: **October**

Year: **2007**

Month: C

Date	Flow Meter		Interval Volume
	Total	Volume	
1	86719.57	0.052	
2	87244.41	0.048	
3	87712.28	0.032	
4	88040.76	0.048	
5	88522.42	0.084	
6	89487.18	0.039	
7		0.039	
8	90266.81	0.044	
9	907111.1	0.045	
10	91166.29	0.041	
11	91594.93	0.040	
12	91985.03	0.047	
13	92484.51	0.034	
14		0.034	
15	93152.72	0.039	
16	93543.08	0.039	
17	93940.82	0.043	
18	94379.93	0.053	
19	94715.21	0.081	
20	95327.06	0.040	
21		0.040	
22	96138.8	0.047	
23	96612.02	0.042	
24	97033.28	0.068	
25	97699.36	0.056	
26	98266.75	0.057	
27	98842.19	0.042	
28		0.042	
29	99882.58	0.053	
30	100213.5	0.059	
31	100809	0.048	
<b>Total</b>		<b>1.462</b>	
<b>Mo. Avg.</b>		<b>0.047</b>	

Date	Generator Runtime Hours			Is Generator Underload? YES or NO	Generator and Engine Data										Operator
	Start Hours	Stop Hours	Total Run Hours		Voltage	Phase	Amps	Battery	Water	Temp.	Oil P.S.I.	Hertz	Fuel	Fuel Tank Level	
3rd	213.7	215.0	1.2	yes	121	3	0	14.2	183	61	60	ok			SH
10th	215.0	215.9	0.9	yes	241	3	0	14.2	186	53	59.2	ok			JF
17th	215.9	216.4	0.5	yes	241	3	0	14.2	187	63	59.2	ok			JF
24th	216.4	217.3	0.9	yes	242	3	0	14.2	183	53	59.2	ok			JF
31st	217.3	219.5	2.2	yes	240	3	0	14.3	184	56	60	ok			JF
<b>Total</b>			<b>6</b>												
<b>Mo. Avg.</b>															

D.M.R 11-2007

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

PERMITTEE NAME: Labrador Utilities Inc.
MAILING ADDRESS: 200 Weathersfield Avenue Altamonte Springs, FL 32714

PERMIT NUMBER: FLA012801

LIMIT: Fish
CLASS SIZE: N/A

REPORT: Monthly
GROUP: Domestic

FACILITY: Forest Lake Estates WWTF
LOCATION: 41311 Paquette Way Zephyrhills, FL 33540

MONITORING GROUP NUMBER: R-001
MONITORING GROUP DESC: R-001, including Inflow

COUNTY: Pasco

NO DISCHARGE FROM SITE:
MONITORING PERIOD From: November 1 To: November 30, 2007

FILE COPY

Table with columns: Parameter, Quantity or Loading, Units, Quality or Concentration, Units, No. Ex, Frequency of Analysis, Sample Type. Rows include parameters like Flow, to R-001, BOD, Carbonaceous 5 day, 20C, Solids, Total Suspended.

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

Table with 4 columns: NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT, SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT, TELEPHONE NO., DATE (YY/MM/DD). Includes name Jeff Etnelirsh and date 2007/05/24.

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

12-02-07

PAGE 06

P.1

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Utilities, Inc

8136261030

12/31/2007 12:15

Dec 31 07 11:05a

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Forest Lake Estates WWTF  
 COUNTY: Pasco

MONITORING GROUP NUMBER:  
 MONITORING PERIOD:

R-001  
 From: November 1

PERMIT NUMBER: FLA012801  
 To: November 30, 2007

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement			6.9	7.3		SU	0	5 Days/Week	Grab
PARM Code 00400 A	Permit Requirement			6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
Mon. Site No. EFA-01										
Coliform, Fecal	Sample Measurement			1.0			#/100ML	0	Monthly	Calculation
PARM Code 74055 Y	Permit Requirement			200 (Ar. Ave.)			#/100ML		Monthly	Calculation
Mon. Site No. EFA-01										
Coliform, Fecal	Sample Measurement			1.0	1	1.0	#/100ML	0	Every Two Weeks	Grab
PARM Code 74055 A	Permit Requirement			Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Mon. Site No. EFA-01										
Total Residual Chlorine (Por Disfection)	Sample Measurement			1.0			MG/L	0	5 Days/Week	Grab
PARM Code 50060 A	Permit Requirement			0.5 (Min.)			MG/L		5 Days/Week	Grab
Mon. Site No. EFA-01										
Sludge Production, Total	Sample Measurement	50000					Gallons	0	Monthly	Calculation
PARM Code 49019 P	Permit Requirement	Report (Mo. Total)					Gallons		Monthly	Calculation
Mon. Site No. OTH-01										
Flow, total plant	Sample Measurement	0.047	MGD					0	Monthly	Calculation
PARM Code 50050 P	Permit Requirement	0.216 (3MADE)	MGD						Monthly	Calculation
Mon. Site No. FLW-01										
Percentage Capacity, (3MADE/Permitted Capacity) x 100	Sample Measurement			21.7			%	0	Monthly	Calculation
PARM Code 00180 I	Permit Requirement			Report			%		Monthly	Calculation
Mon. Site No. FLW-01										
BOD, Carbonaceous 5 day, 20C	Sample Measurement			640			MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Mon. Site No. INF-01										
Solids, Total Suspended	Sample Measurement			3650			MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G	Permit Requirement			Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Mon. Site No. INF-01										
	Sample Measurement									
	Permit Requirement									

### LABRADOR/FOREST LAKES ESTATES (693) WWTF DAILY OPERATIONS & LABRATORY ANALYSIS LOG

Month: November

Year: 2007

P.4

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Utilities, Inc

Dec 31 07 11:06a

Date	Flow Meter			pH		Chlorine				Sprayfield		Effluent Pump				Sludge Judge AM/PM			Settleability			Rain Gauge	Operator
	Total	Volume	Interval Volume	Influent	Effluent	#1	#2	Usage	CL2 Residue	Meter	Total Flow	#1	Run Hours	#2	Run Hours	Clarifier #1	Clarifier #2	Clarifier #3	Plant/Train #1	Plant/Train #2	Plant/Train #3		
1	101290.5	0.048	7.3	7.2				5	583806	0.039	14661.6	2.5	13619.9	3.3		4.0				280	0.1	JF	
2	101771.4	0.071	7.1	7.0				4.8	584003	0.050	14684.1	3.0	13623.2	4.3		4.0				190	0.0	JF	
3	102484	0.047	7.0	7.1				1.2		0.050	14667.1	2.8	13627.5	3.3		5.0					0.0	DH	
4		0.047								0.050				3.3									
5	103441.9	0.047	7.1	7.0				5.6	585526	0.043	14672.7	2.9	13634.1	2.9		4.0				300	0.0	JF	
6	103916.6	0.055	7.3	7.1				1.6	585955	0.053	14675.8	3.1	13637.2	4		4.0				290	0.0	JF	
7	104467.1	0.051	7.4	7.1				2.2	586503	0.046	14679.1	3.3	13641.2	3.6		4.0				290	0.0	JF	
8	104879.4	0.056	7.2	7.1				2.8	586966	0.051	14681.2	2.1	13644.8	4.4		3.5				300	0.0	JF	
9	105538.8	0.078	7.0	7.0				2	587478	0.051	14684.6	3.4	13649.2	3.1		4.0				280	0.0	JF	
10	106272	0.051	7.1	7.0				4.6		0.051	14688.6	3.5	13652.3	3.9		2.0					0.0	DH	
11		0.051								0.051				3.9									
12	107282.2	0.065	7.6	7.0				6.4	588994	0.059	14695.5	6.9	13660.2	3.4		2.5				300	0.0	JF	
13	107936.7	0.062	7.0	7.1				2.2	589545	0.049	14697.5	2.0	13683.6	3.8		3.0				250	0.0	LN	
14	108563.7	0.064	7.2	6.9				1.45	590044	0.056	14700.9	4.2	13667.4	3.7		5.5				250	0.0	LN	
15	109211.7	0.063	7.3	7.1				8.5	590606	0.052	14705.1	3.8	13671.1	5.5		3.0				280	0.0	JF	
16	109850	0.075	7.5	6.9				7.3	591130	0.054	14709.3	3.9	13676.8	4.1		3.5				300	0.0	JF	
17	11060.3	0.052	7.0	7.1				1		0.054	14713.2	3.5	13680.7	2.9		2.0					0.0	DH	
18		0.052								0.054				2.9									
19	111864.3	0.138	7.1	7.3				8.6	592782	0.063	14720.2	4.3	13686.5	5.2		3.0				320	0.0	JF	
20	113030.6	0.061	6.9	7.1				2.2	593398	0.058	14724.5	4.1	13691.7	3.8		2.5				340	0.0	JF	
21	113646.5	0.074	7.0	7.1				4.3	593487	0.058	14728.9	6.2	13695.2	3.9		3.5				300	0.0	JF	
22	114388.6	0.074	7.2	7.0				2.2	594674	0.068	14734.8	4.2	13699.1	4.9		4.0				350	0.0	JF	
23	115136.7	0.088	7.0	7.2				1.2	595358	0.064	14739.0	4.7	13704.0	6.3		6.0				390	0.0	JF	
24	116024.6	0.060	7.0	7.1				1.1		0.064	14744.7	3.5	13710.3	4.9		6.5					0.0	DH	
25		0.060								0.064				4.9									
26	117228.8	0.059	6.6	7.2				3.9	597284	0.064	14762.1	3.6	13720.2	3.6		4.0				400	0.0	JF	
27	117825.4	0.080	7.0	6.9				8.6	597831	0.063	14754.8	2.7	13724.1	3.9		4.0				420	0.0	JF	
28	118629	0.043	7.1	7.0				8	598469	0.060	14758.3	3.6	13728.0	4.6		4.5				420	0	JF	
29	119088.5	0.07	6.8	7.0				1.2	598989	0.062	14765.0	6.7	13732.5	2.3		3				340	0	JF	
30	119774	0.078	7.0	7.1				1.4	599591	0.072	14768.4	4.6	13734.8	5.8		3.5				360	0	JF	
31																							
Total		1.912								1.7		112		120									###
Mo Avg.		0.064	7.1	7.1						0.06		3.7		4.0	###	3.6	#DIV/0!	###	###	###		0.0	





### DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA012801  
From: November 01

To: November 30, 2007

Labrador/Forest Lake Estates WWTF  
Pasco

Code	Flow (MGD) R-001	CBOD5 (mg/L) 80082	TSS (mg/L) 00530	Fecal Coliform Bacteria (#/100ml) 74055	pH (SU) 00406	TRC (For Disinfect.) (mg/L) 50060	Sludge Volume (Gal) 49019	CBOD5 (mg/L) 80082	TSS (mg/L) 00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	0.048				7.2	6			
2	0.071				7.0	4.8			
3	0.047				7.1	1.2			
4	0.047								
5	0.047				7.0	5.5			
6	0.055	2.0	2.0	1.0	7.1	1.6		1100	3800
7	0.051				7.1	2.2			
8	0.055				7.1	2.8			
9	0.073				7.0	2	18750		
10	0.051				7.0	4.6			
11	0.031								
12	0.065				7.0	6.4	6250		
13	0.062				7.1	2.2			
14	0.064				6.9	1.45			
15	0.063				7.1	6.5			
16	0.075				6.9	7.3			
17	0.062				7.1	1			
18	0.052								
19	0.136				7.3	6.6			
20	0.081	2.0	2.0	1.0	7.1	2.2		180	3500
21	0.074				7.1	4.3			
22	0.074				7.0	2.2			
23	0.069				7.2	1.2			
24	0.069				7.1	1.1			
25	0.063								
26	0.059				7.2	3.9			
27	0.080				6.9	8.5			
28	0.043				7.0	8	25000		
29	0.077				7.0	1.2			
30	0.071				7.1	1.4			
31									
<b>Total</b>	<b>1.912</b>	<b>4</b>	<b>4</b>	<b>2</b>	<b>26</b>	<b>95</b>	<b>50,000</b>	<b>1,280</b>	<b>7,300</b>
<b>Mo. Avg.</b>	<b>0.064</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>7.1</b>	<b>3.7</b>		<b>640</b>	<b>3,650</b>

**PLANT STAFFING:**

Day shift Operator      Class: C      Certificate No: 14405      Name: Don Hamilton  
 Evening Shift Operator      Class: A      Certificate No: 9151      Name: Lee Neal  
 Night Shift Operator      Class: \_\_\_\_\_      Certificate No: \_\_\_\_\_      Name: \_\_\_\_\_  
 Lead Operator      Class: C      Certificate No: 14128      Name: Jeff Finohirah

PA File No. FLA012801-005-DW2P  
 O&P Form 62-620,910(10), Effective November 29, 1994

DMR LAB TOTALS

Month/Year	Flow	Annual Average Total	CBOD EFF	Annual Average Total	TSS EFF	Annual Average Total	Fecal	Annual Average Total
January-05	185,000		2.0		2.0			
February-05	202,000		2.0		2.0			
March-05	200,000		2.0		2.0			
April-05	119,000		2.6		2.0			
May-05	58,000		3.6		2.0			
June-05	103,000		2.2		2.0			
July-05	80,000		2.0		2.0			
August-05	35,000		2.0		2.0			
September-05	54,000		2.0		2.0			
October-05	37,000				2.0			
November-05	153,000		2.0		2.0			
December-05	168,000	116000	3.4	2.5	2.0	2.0		
Average	116,167				2.0			
<hr/>								
Month/Year	Flow	Annual Average Total	CBOD EFF	Annual Average Total	TSS EFF	Annual Average Total	Fecal	Annual Average Total
January-06	220,000	119000	2.3	2.5	2.0	2.0		
February-06	230,000	119000	2.0	2.5	10.0	2.7		
March-06	239,000	125000	4.2	2.7	11.3	3.4		
April-06	158,000	128000	2.3	2.6	3.0	3.5	3.0	1.2
May-06	87,000	130000	12.5	3.4	3.0	3.8	1.0	2.0
June-06	35,000	125000	4.6	3.6	2.0	3.6	1.0	1.5
July-06	37,000	121000	3.9	3.7	2.0	3.6	1.0	1.5
August-06	33,000	120000	7.5	6.8	3.0	3.7	1.0	1.4
September-06	39,000	119000	3.6	4.3	2.0	3.7	1.0	1.3
October-06	45,000	120000	2.5	4.2	3.0	3.8	1.0	1.3
November-06	59,000	113000	2.0	4.0	3.0	3.7	4.0	1.6
December-06	50,000	103000	3.0	4.2	4.0	4.0	1.0	1.6
Average	102,667							
<hr/>								
Month/Year	Flow	Annual Average Total	CBOD EFF	Annual Average Total	TSS EFF	Annual Average Total	Fecal	Annual Average Total
January-07	103,000	93000	5.9	4.5	3.0	4.1	1.0	1.5
February-07	83,000	81000	5.2	5.0	5.2	3.7	1.0	1.4
March-07	84,000	81000	17.0	5.8	10.0	3.6	1.0	1.4
April-07	68,000	60300	2.0	4.9	3.0	3.2	1.0	1.3
May-07	20,452	54704	1.4	4.9	2.5	3.6	1.0	1.3
June-07	20,000	53454	2.0	4.7	1.5	3.5	1.0	1.3
July-07	23,000	52204	5.9	4.8	3.3	3.6	1.0	1.3
August-07	29,000	51954	3.2	4.5	1.5	3.5	1.0	1.3
September-07	30,000	51166	3.0	4.4	4.6	3.5	1.0	1.3
October-07	47,000	51371	2.8	4.6	1.5	3.6	1.0	1.3
November-07	64,000	62154	2	4.45	2	3.8	1	1

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

693

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

PERMITTEE NAME:	Labrador Utilities Inc.	PERMIT NUMBER:	FLA012801	
MAILING ADDRESS:	200 Weathersfield Avenue Altamonte Springs, FL 32714	LIMIT:	Final	REPORT: Monthly
		CLASS SIZE:	N/A	GROUP: Domestic
FACILITY:	Forest Lake Estates WWTF	MONITORING GROUP NUMBER:	R-001	
LOCATION:	41311 Paquette Way Zephyrhills, FL 33540	MONITORING GROUP DESC:	R-001, including Influent	
COUNTY:	Pasco	NO DISCHARGE FROM SITE:		
		MONITORING PERIOD	From: December 01, 2007 To: December 31, 2007	

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, to R-001	Sample Measurement	<b>0.065</b>		<b>MGD</b>				<b>0</b>		<b>Monthly</b>	<b>Calculation</b>
PARM Code 50050 Y	Permit Requirement	0.216		MGD						Monthly	Calculation
Mon. Site No. FLW-01		(AADF)									
Flow, to R-001	Sample Measurement	<b>0.053</b>		<b>MGD</b>				<b>0</b>		<b>5 Days/Week</b>	<b>Flow Meter and totalizers</b>
PARM Code 50050 1 Mon.	Permit Requirement	Report		MGD						5 Days/Week	Flow Meter and totalizers
Site No. FLW-01		(Mo. Avg.)									
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<b>4.4</b>			<b>MG/L</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
Mon. Site No. EFA-01	Permit Requirement				20.0			MG/L		Monthly	Calculation
PARM Code 80082 Y Mon.					(An. Avg.)						
Site No. EFA-01											
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<b>2.0</b>	<b>1.0</b>		<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
Mon. Site No. EFA-01	Permit Requirement				30.0	60.0		MG/L		Every Two Weeks	8-hour FPC
PARM Code 80082 Y					(Mo. Avg.)	(Max)					
Mon. Site No. EFA-01											
Solids, Total Suspended	Sample Measurement				<b>3.9</b>			<b>MG/L</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 00530 Y	Permit Requirement				20.0			MG/L		Monthly	Calculation
Mon. Site No. EFA-01					(An. Avg.)						
Solids, Total Suspended	Sample Measurement				<b>1.0</b>	<b>1.0</b>		<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
PARM Code 00530 A	Permit Requirement				30.0	60.0		MG/L		Every Two Weeks	8-hour FPC
Mon. Site No. EFA-01					(Mo. Avg.)	(Max)					

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

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Jeff Finehirsh		407 402-2737	2008/01/27

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

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY:   
 COUNTY:

Forest Lake Estates WWTF   
 Pasco

MONITORING GROUP NUMBER:   
 MONITORING PERIOD

R-001 PERMIT NUMBER: FLA012801   
 From: December 01, 2007 To: December 31, 2007

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				<b>6.9</b>	<b>7.3</b>		<b>SU</b>	<b>0</b>	<b>5 Days/Week</b>	<b>Grab</b>
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement				6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				<b>1.0</b>			<b>#/100ML</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement				200 (An. Avg.)			#/100ML		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<b>1.0</b>	<b>1</b>	<b>1.0</b>	<b>#/100ML</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>Grab</b>
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement				Report (Mo. Geo. Mean)	400 (90%)	800 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (for Disinfection)	Sample Measurement				<b>0.8</b>			<b>MG/L</b>	<b>0</b>	<b>5 Days/Week</b>	<b>Grab</b>
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement				0.5 (Min.)			MG/L		5 Days/Week	Grab
Sludge Production, Total	Sample Measurement	<b>0</b>						<b>Gallons</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 49019 P Mon. Site No. OTH-01	Permit Requirement	Report (Mo. Total)						Gallons		Monthly	Calculation
Flow, total plant	Sample Measurement	<b>0.055</b>		<b>MGD</b>					<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 50050 P Mon. Site No. FLW-01	Permit Requirement	0.216 (3MADF)		MGD						Monthly	Calculation
Percentage Capacity, (3MADF/Permitted Capacity) x 100	Sample Measurement				<b>25</b>			<b>%</b>	<b>0</b>	<b>Monthly</b>	<b>Calculation</b>
PARM Code 00180 I Mon. Site No. FLW-01	Permit Requirement				Report			%		Monthly	Calculation
BOD <sub>5</sub> , Carbonaceous 5 day, 20°C	Sample Measurement				<b>1000</b>			<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				<b>3900</b>			<b>MG/L</b>	<b>0</b>	<b>Every Two Weeks</b>	<b>8-hour FPC</b>
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement				Report (Mo. Avg.)			MG/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										

### DAILY SAMPLE RESULTS - PART B

Permit Number: FLA012801      Labrador/Forest Lake Estates WWTF  
 Monitoring Period: From: December 01, 2007      To: December 31, 2007      Pasco

	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	TRC (For Disinfect.) (mg/L)	Sludge Volume (Gal)	CBOD5 (mg/L)	TSS (mg/L)
Code	50050	80082	00530	74055	00406	50060	49019	80082	00530
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	OTH-01	INF-01	INF-01
1	0.059				7.1	1			
2	0.059								
3	0.066				7.2	1.6			
4	0.063		<b>1200.0</b>	<b>1.0</b>	7.1	8			<b>1</b>
5	0.061				7.2	6			
6	0.053				6.9	1			
7	0.078				7.1	1.4			
8	0.052				7.1	1			
9	0.052								
10	0.065				7.1	0.8			
11	0.062				7.2	4.5			
12	0.053				7.3	1			
13	0.067				7.1	1			
14	0.081				7.2	4.6			
15	0.053				7.1	1.2			
16	0.053								
17	0.063				7.2	6.6			
18	0.061	<b>2.0</b>	<b>1.0</b>	<b>1.0</b>	7.0	2		<b>1100</b>	<b>6600</b>
19	0.069				7.0	2			
20	0.062				7.0	8			
21	0.084				7.0	8			
22	0.056				7.1	3			
23	0.056								
24	0.078				7.0	2			
25	0.063				7.0	2.4			
26	0.075				7.1	1			
27	0.067				7.0	1			
28	0.090				7.1	1.2			
29	0.059				7.1	2			
30	0.059								
31	0.088				7.0	4.5			
<b>Total</b>	<b>2.007</b>	<b>2</b>	<b>1,201</b>	<b>2</b>	<b>26</b>	<b>77</b>	<b>0</b>	<b>1,100</b>	<b>6,601</b>
<b>Mo. Avg.</b>	<b>0.065</b>	<b>2</b>	<b>601</b>	<b>1</b>	<b>7.1</b>	<b>3.0</b>		<b>1,100</b>	<b>3,301</b>

**PLANT STAFFING:**

Day shift Operator	Class: C	Certificate No: 14405	Name: Don Hamilton
Evening Shift Operator	Class:	Certificate No:	Name: Keith Schneider
Night Shift Operator	Class: _____	Certificate No: _____	Name: _____
Lead Operator	Class: C	Certificate No: 14129	Name: Jeff Finehirsh

# LABRADOR/FOREST LAKES ESTATES (693) WWTF DAILY OPERATIONS & LABRATORY ANALYSIS LOG

Month: December

Year: 2007

Date	Flow Meter			pH		Chlorine				Sprayfield		Effluent Pump				Sludge Judge AM/PM			Settleability			Rain Gauge	
	Total	Volume	Interval Volume	Influent	Effluent	#1	#2	Usage	CL2 Residue	Meter	Total Flow	#1	Run Hours	#2	Run Hours	Clarifier #1	Clarifier #2	Clarifier #3	Plant/Train #1	Plant/Train #2	Plant/Train #3		
1	120559.9	0.059		6.9	7.1				1	600311	0.043	14773.0	4.0	13740.6	4.8	2.5	4.5		210	380		0.0	
2		0.059									0.043		4.0	4.8									0.0
3	121754.1	0.066		7.0	7.2				1.6	601174	0.047	14781.1	4.0	13760.2	4.8	3.0	4.0		210	380		0.0	
4	122419	0.063		7.3	7.1				8	601652	0.056	14785.1	3.1	13755.2	3.7	3.0	3.0		200	340		0.0	
5	123057.9	0.061		7.0	7.2				6	602216	0.053	14788.2	5.0	13758.9	3.6	3.5	3.5		200	360		0.0	
6	123675.1	0.053		6.9	6.9				1	602754	0.051	14793.3	3.0	13763.5	3.3	2.0	3.0		200	300		0.0	
7	124209.1	0.078		7.0	7.1				1.4	603265	0.075	14796.3	4.4	13766.8	5	1.5	4.0		210	320		0.0	
8	124996.3	0.052		7.0	7.1				1	604020	0.046	14800.7	3.5	13771.8	3.5	3.0	4.0						0.0
9		0.052									0.046		3.5	3.5									
10	126038.8	0.065		7.2	7.1				0.8	604945	0.059	14807.8	5.3	13778.8	6.6	2.0	3.0		250	340		0.0	
11	126695.8	0.062		6.9	7.2				4.5	605537	0.058	14813.1	4.3	13785.9	4.9	2.0	4.0		250	320		0.0	
12	127323.5	0.053		7.0	7.3				1	606120	0.047	14817.4	4.3	13790.8	4.7	3.5	3.0		260	340		0.0	
13	127859.1	0.067		7.0	7.1				1	606590	0.044	14821.7	2.6	13795.3	5.2	3.5	3.0		280	320		0.0	
14	128538.9	0.081		7.0	7.2				4.6	607030	0.061	14823.3	5.7	13798.5	5.1	1.5	7.0		290	100		0.0	
15	129350.4	0.053		6.9	7.1				1.2	607644	0.048	14829.0	4.4	13803.6	4.7	4.0	3.5						0.0
16		0.053									0.048		4.4	4.7									
17	130416.4	0.063		7.0	7.2				6.6	608567	0.052	14837.8	2.3	13813.1	2.5	3.0	3.0		280	300		0.7	
18	131050	0.061		6.9	7.0				2	609089	0.057	14840.1	5.1	13815.6	7.1	3.0	3.0		300	300		0.0	
19	131660.8	0.069		7.0	7.0				2	609668	0.064	14845.2	5.4	13822.7	5.4	2.5	3.0		320	300		0.0	
20	132351.2	0.062		7.1	7.0				8	610311	0.056	14850.2	2.5	13828.1	2.9	3.5	3.5		300	310		0.0	
21	132973.7	0.084		7.1	7.0				8	610880	0.072	14853.1	5.0	13831.0	1.8	3.0	2.5		300	300		0.5	
22	133815.7	0.056		7.0	7.1				3	611603	0.049	14858.1	3.7	13832.8	6.4	4.5	5.0						0.0
23		0.056									0.049		3.7	6.4									
24	134936.3	0.078		6.9	7.0				2	612594	0.070	14865.4	5.0	13845.7	7.1	2.5	2		360	390		0.0	
25	135721.3	0.063		6.9	7.0				2.4	613302	0.058	14870.4	3.4	13857.8	7.1	3	3		340	380		0.0	
26	136352.1	0.075		7.1	7.1				1	613890	0.069	14875.8	3.7	13859.9	2	2.0	3.0		320	350		0.0	
27	137108.2	0.067		6.8	7.0				1	614589	0.047	14879.5	4.9	13861.9	2.3	2.5	3.5		350	400		0.2	
28	137782	0.090		6.9	7.1				1.2	615059	0.059	14884.4	4.9	13864.2	8.3	3.0	3.5						0.5
29	138689.4	0.059		7.0	7.1				2	615655	0.049	14889.3	4.9	13872.5	8.6	5.5	5.5		360	380		0	
30		0.059									0.049		4.7	5.3									
31	139885.1	0.088		7.0	7.0				4.5	616635	0.072	14898.7	4.7	13883.1	5.3	3	3.5		350	400		0	
Total		<b>2.007</b>									<b>1.69</b>		<b>129</b>		<b>151</b>								<b>###</b>
Mo. Avg.		<b>0.065</b>		<b>7.0</b>	<b>7.1</b>						<b>0.05</b>		<b>4.2</b>		<b>4.9</b>	<b>2.9</b>	<b>3.6</b>	<b>#DIV/0!</b>	<b>###</b>	<b>###</b>	<b>###</b>		<b>0.1</b>

Operator
DH
JF
JF
JF
JF
JF
DH
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DH
JF

**Labrador Utilities, Inc.**

**Docket No.: 080249-WS**

**Pasco County**

**25.30.440 (5)  
INSPECTION REPORTS**

**Test Year Ended December 31, 2007**





# Florida Department of Environmental Protection

Southwest District Office  
13051 North Telecom Parkway  
Temple Terrace, Florida 33637-0926

February 13, 2008

To: NW 2-20-08  
LN  
SIT  
RECEIVED  
Charlie Crist  
Governor

FEB 15 2008  
Jeff Sessions  
Attorney General

Alvin W. State  
Secretary

Jan 12-20-8  
L. Hunt

Mr. Patrick Flynn  
Utilities, Inc.  
200 Weathersfield Avenue  
Altamonte Springs, FL 32714

Re: Sanitary Survey Report  
Labrador Utilities  
PWS-ID No. 651-4842  
Pasco County

Dear Mr. Flynn:

Enclosed please find a copy of the Sanitary Survey Report for the above-referenced potable water system. No deficiencies were noted during the recent inspection.

If you have any questions, please contact me at (813) 632-7600, extension 317.

Regards,

Margie DeBerry  
Environmental Specialist  
Drinking Water Section

MD/dsm

Enclosure

State of Florida  
 Department of Environmental Protection  
 Southwest District  
**SANITARY SURVEY REPORT**

Plant Name LABRADOR UTILITIES, INC. County Pasco PWS ID # 6514842  
 Plant Location Forest Lake Estates: 6420 Presidential Circle, Zephyrhills, FL 33540 Phone 813-783-7979  
 Owner Name Utilities, Inc. (Patrick Flynn) Phone 407-869-1919  
 Owner Address 200 Weathersfield Avenue, Altamonte Springs, FL 32714  
 Contact Person Lee Neal; Scotty Haws Title Operator Phone 800-272-1919  
 This Survey Date 1/30/08 Last Survey Date 4/14/06 Last C.I. Date 9/23/04

**PWS TYPE & CLASS**

- Community (SD)
- Non-transient Non-community
- Non-Community

**PWS STATUS**

- Approved system with approval number & date  
 \_\_\_\_\_
- Unapproved system

**SERVICE AREA CHARACTERISTICS**

Mobile Home Park

Food Service:  Yes  No  N/A

**OPERATION & MAINTENANCE**

Certified Operator:  Yes  No  Not required  
 Operator(s) & Certification Class-Number  
Lee Neal C-14571  
Don Hamilton C-13062

O & M Log:  Yes  No  Not required  
 Operator Visitation Frequency  
 Hrs/day: Required \_\_\_\_\_ Actual \_\_\_\_\_  
 Days/wk: Required 2 Actual 6  
 Non-consecutive Days?  Yes  No  N/A  
 MORs submitted regularly?  Yes  No  N/A  
 Data missing from MORs?  No  Yes  N/A

Number of Service Connections 1178  
 Population Served 2356 Basis December MOR  
 Average Day (from MORs) 84725 gpd  
 Max. Day (from MORs) 128000 gpd  
 Max-day Design Capacity 1368000 gpd  
 Comments Please make sure that MOR information is updated regularly.

COMET: SITE ID \_\_\_\_\_ PROJECT ID \_\_\_\_\_

**RAW WATER SOURCE**

- GROUND; Number of Wells 2
- SURFACE/UDI; Source \_\_\_\_\_
- PURCHASED from PWS ID # \_\_\_\_\_
- Emergency Water Source \_\_\_\_\_  
 Emergency Water Capacity \_\_\_\_\_

**AUXILIARY POWER SOURCE**

Yes  None  Not Required  
 Source Coleman Diesel Generator  
 Capacity of Standby (kW) 100 KW  
 Switchover:  Automatic  Manual  
 Standby Plan:  Yes  No  
 Hrs Operated Under Load 4 hrs/mo.  
 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 - Hypochlorination  
Sequestration - PO<sub>4</sub> (Orthophosphosphate (CP-734) - Sweetwater Technologies)  
 What additional treatment is needed?  
None  
 For control of what deficiencies?  
 \_\_\_\_\_

**DISTRIBUTION SYSTEM**

Flow Measuring Device Flow Meter  
 Meter Size & Type Water Specialties (6")  
 Backflow Prevention Devices:  Yes  No  
 Cross-connections None  
 Written Cross-connection Control Program: Yes  
 Coliform Sampling Plan:  Yes  No  N/A  
 Comments The system is flushed once monthly at 5 hydrants for 15 minutes each. Flushing plan submitted on 12/26/2007.

## GROUND WATER SOURCE

Well Number	AAC0163	AAC0164		
Year Drilled	1989	1982		
Depth Drilled	780'	530'		
Drilling Method	-	Cable		
Type of Grout	Cement	Cement		
Static Water Level	-	12'		
Pumping Water Level	-	-		
Design Well Yield	-	-		
Test Yield	-	-		
Actual Yield (if different than rated capacity)	-	-		
Strainer	-	-		
Length (outside casing)	100'	77'		
Diameter (outside casing)	10"	6"		
Material (outside casing)	Steel	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	-	-	
	Reuse Water	-	-	
	VW Plumbing	-	-	
	Other Sanitary Hazard	-	-	
PUMP	Type	Turbine	Submersible	
	Manufacturer Name	Goulds	-	
	Model Number	-	-	
	Rated Capacity (gpm)	-	-	
	Motor Horsepower	40	15	
Well casing 12" above grade?	Yes	No		
Well Casing Sanitary Seal	Yes	Yes		
Raw Water Sampling Tap	Yes	Yes		
Above Ground Check Valve	Yes	Yes		
Fence/Housing	Yes	Yes		
Well Vent Protection	Yes	Yes		

COMMENTS Please have available any missing information upon next inspection.

**CHLORINATION (Disinfection)**

Type:  Gas  Hypo  
 Make LMI Milton Roy Capacity 24 gpd  
 Chlorine Feed Rate Cl<sub>2</sub> solution strength - 12.5%  
 Avg. Amount of Cl<sub>2</sub> gas used N/A  
 Chlorine Residuals: Plant 0.72 Remote 0.87  
 Remote tap location 5749 Viau Way  
 DPD Test Kit:  On-site  With operator  
 None  Not Used Daily  
 Injection Points After check valve on Well #2  
 Booster Pump Info N/A  
 Comments PO<sub>4</sub> injection point is located upstream of chlorine injection point. This system is equipped with a pump monitor for the chlorine.

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	G-1		
Capacity (gal)	34000		
Material	Steel		
Gravity Drain	Yes		
By-pass Piping	Yes		
Pressure Gauge	No		
Sight Glass or Level Indicator	No		
Fittings for Sight Glass	No		
Protected Openings	Yes		
PRV/ARV	N/A		
On/Off Pressure	N/A		
Access Padlocked	Yes		
Height to Bottom of Elevated Tank	N/A		
Height to Max. Water Level	N/A		

Comments The storage tank was cleaned and inspected less than five years ago. The next inspection is due five years from last inspection date.

**HIGH SERVICE PUMPS**

Pump Number	HSP-1	HSP-2	HSP-3
Type	Centrif	Centrif	Centrif
Make	Baldor	Baldor	US Motor
Model			
Capacity (gpm)			
Motor HP	20	20	20
Date Installed			
Maintenance			

Comments Please have available any missing information upon next inspection.

**SANITARY SURVEY REPORT - COMPLIANCE MONITORING ADDENDUM**

PWS ID # 6514842  
 Date 1/30/08

COMPLIANCE MONITORING COMMUNITY PUBLIC WATER SYSTEMS					
CONTAMINANT	# Samples Required	Sampling Location	Frequency	Sample Date	Due Date
Microbiological (Bacte)	1	Each well	Monthly	Monthly	Monthly
	2	Distribution	Monthly	Monthly	Monthly
Volatile Organics	<i>(Note A)</i>	<i>(Note G)</i>	<i>(Notes A, 2)</i>	2009	2009
Synthetic Organics	<i>(Notes B, E)</i>	<i>(Note G)</i>	3 years <i>(Note 2)</i>	2009 or Waiver	2009
Nitrate & Nitrite (as N)	1	Each POE	Annually	2008	2008
Inorganics	1	Each POE	3 years <i>(Note 2)</i>	2009	2009
Asbestos	1 <i>(Note F)</i>	Distribution	9 years <i>(Note 4)</i>	2012 or Waiver	2012
Secondaries	1	Each POE	3 years <i>(Note 2)</i>	2009	2009
Radionuclides	<i>(Note C)</i>	Each POE	3, 6, or 9 years <i>(Note 2)</i>	2009	2009
Lead and Copper	<i>(Note D)</i>	Distribution	<i>Note 7</i>	Jun-Sept 2009	October 10, 2009
DBP (Stage 1)	1/plant	Max Res	Annually <i>Note 7</i>	Jul-Sept 2008	October 10, 2008

POE = Point of Entry (Samples shall be taken at each entry point to the distribution system that is representative of each source after treatment )

See Page 5 for description of italicized notes

**SANITARY SURVEY REPORT - COMPLIANCE MONITORING ADDENDUM**

PWS ID # 6514842  
Date 1/30/08

- Note A** See Rule 62-550.515(1), F.A.C. Each system shall take four consecutive quarterly samples during its assigned year in the system's first compliance period. If no contaminant is detected, the system shall monitor annually during the next three-year compliance period. If still no contaminants are detected, systems shall take one sample during each subsequent three-year compliance period.
- Note B** 4 consecutive quarterly samples for the first year of operation. Credit will be given for samples taken before January 1, 1993. After initial sampling may go to triennial sampling in 2<sup>nd</sup> year of a 3 year compliance period.
- Note C** See Rule 62-550.519, F.A.C
- Note D** Contact the Southwest District/County Drinking Water Program at (813) 632-7600 or contact the Florida Rural Water Association.
- Note E** Contact Margie DeBerry, Environmental Specialist of FDEP – Southwest District at (813) 632-7600, extension 317 to obtain an application for reduced monitoring or visit <http://www.dep.state.fl.us/water/drinkingwater/forms.htm>.
- Note F** See Rule 62-550.511(4), F.A.C. A system without asbestos-containing components shall certify to the Department in writing, using DEP Form No. 62-555.910(10), that it is asbestos free. Certification shall satisfy subsections (1), (2), and (3) of the referenced rule, and shall be submitted each nine-year compliance cycle during the specified year the system is required to monitor.
- Note G** First quarter samples shall be representative of each well. Subsequent samples shall be taken at each entry point to the distribution system that is representative of each source after treatment.
- Note 1** First year of each three-year compliance period (calendar years 2005, 2008, 2011, etc.)
- Note 2** Second year of each three-year compliance period (calendar years 2006, 2009, 2012, etc.)
- Note 3** First year of each nine-year compliance cycle (calendar years 2005, 2008, etc.)
- Note 4** Second year of each nine-year compliance cycle (calendar years 2006, 2009, etc.)
- Note 5** Third year of each 3-year compliance period (2007, 2010, 2013, etc)
- Note 6** Third year of each nine-year compliance cycle (2004, 2013, etc)
- Note 7** Requirements vary. Please contact your local District/County office for specific information.

MONITORING VIOLATIONS	MCL VIOLATIONS
Failure to sample (Coliform) - July 2007	NONE

**DEFICIENCIES:**

**NO DEFICIENCIES NOTED**

**Recommendations:**

- The next tank inspection is due five years from the last inspection date. Please submit to the Department a copy of the tank inspection report or have the inspection records available for review during the next inspection. Tank inspection records/reports must be available for review by August 2008.
- The following item(s) were not reviewed during the inspection. These items will be required during the next annual inspection. These items must be made available for reference at the plant or a convenient location near the plant.
  - Emergency Response Plan [62-355.350(15), F.A.C.]

For more information about these requirements, please visit the Florida Rural Water Association website under the Manual section (<http://www.frwa.net>).

**Reminders:**

**Nitrate/Nitrite Monitoring**

Nitrate/Nitrite analyses must be completed yearly on all public water systems, pursuant to Rule 62-550, Florida Administrative Code. Remember, these are treated samples representative of each source taken at the entry point(s) to the distribution system. The samples must be submitted to a State Certified Lab no later than December 31, 2008, as results must be received, in this office, no later than January 10, 2009, to receive credit and avoid a violation. Early sampling is recommended.

**Consumer Confidence Reports**

Your community water system is required to prepare and provide to your customers, an annual Consumer Confidence Report (CCR) in accordance with Rule 62-550.824, Florida Administrative Code. This report must be delivered, to both customers and the Department, by July 1, 2008, and must be based on analytical results obtained from monitoring performed during the calendar year 2007. Please be advised, however, that the Department will only commit to a timely review of all drafts received in our office no later than April 30, 2008. Failure to complete the report, before the aforementioned date, will result in violation of state and federal regulations and will likely result in enforcement. This report falls under the responsibility of the owner. Please do not assume that your certified operator will complete this requirement. Please inform the Department if arrangements have been made with your certified operator to complete the CCR.

Please visit the FRWA website ([www.frwa.net](http://www.frwa.net)) for directions/templates for completing your CCR.

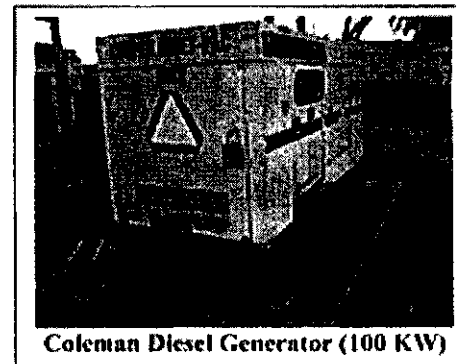
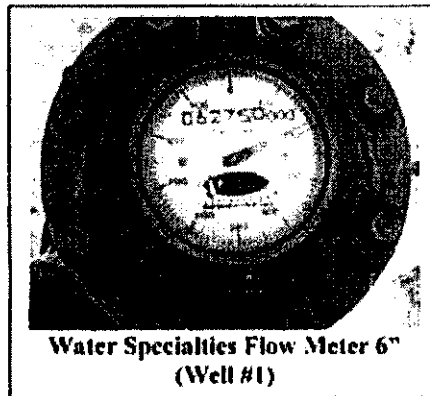
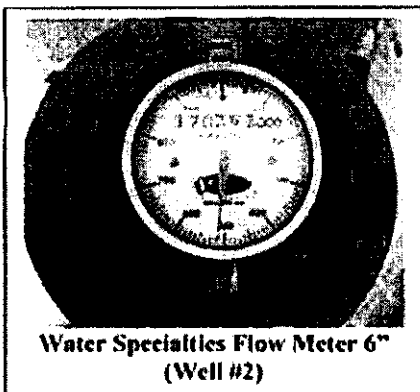
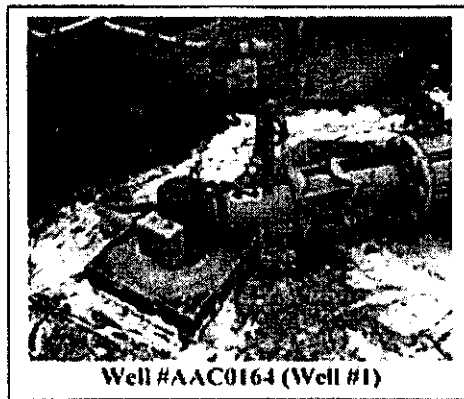
Inspector Margie DeBuss Title Env. Specialist I Date 2/12/08  
 Approved by Dorell S. [Signature] Title Env. Manager Date 2/11/08

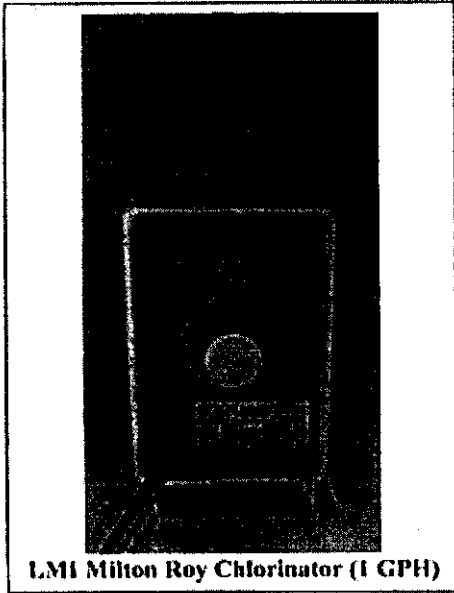




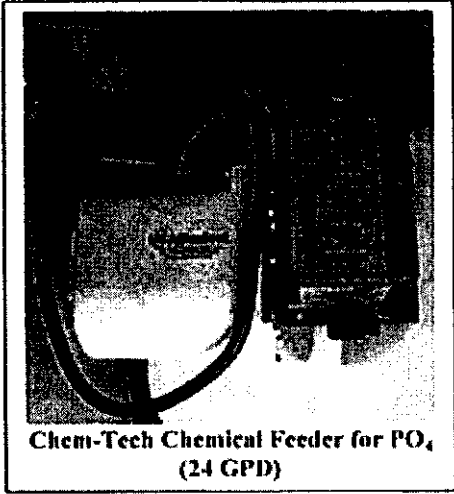
# DIGITAL PHOTOGRAPHIC LOG

1. Facility Name: Labrador Utilities
2. County / PWS ID#: Pasco/ 651-4842
3. Inspection Type: Sanitary Survey
4. Inspection Date: 1/30/2008
5. Type of Camera Used: Fujifilm FinePix A800 8.3 Megapixels
6. Digital Recording Media: Transcend 1 GB SD Card
7. All Digital Photos Were Copied To: Y:\Pasco\PASCO ACTIVE FILES\Labrador Utilities PWS 6514842\Photos\01-2008
8. Original Copy Is Stored In/On: C:\Documents and Settings\Deberry\_M\My Documents\East Pasco Active Files\Labrador Utilities PWS 6514842\Photos\01-2008
9. Were the photos altered?: NO YES X explain yes: Cropped
10. Photographer: Margie DeBerry
11. Signature of Photographer: *Margie DeBerry*

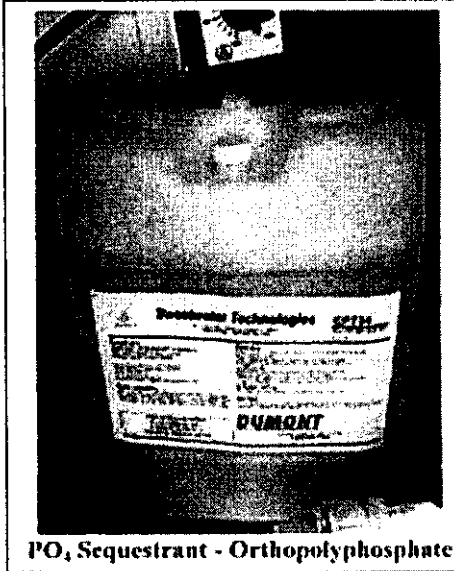




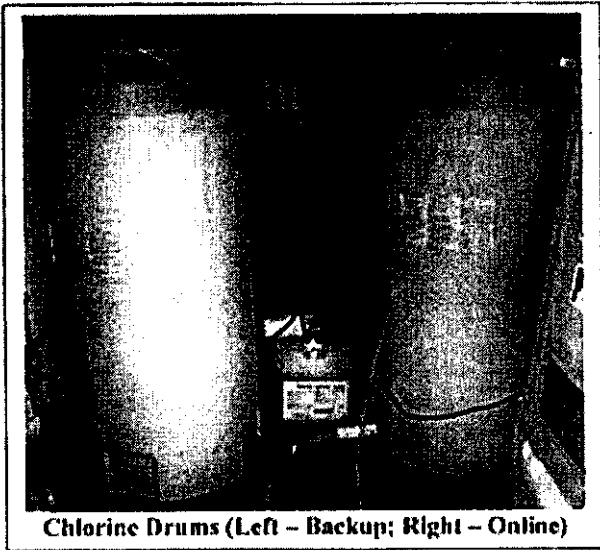
LMI Milton Roy Chlorinator (1 GPH)



Chem-Tech Chemical Feeder for PO<sub>4</sub>  
(24 GPD)



PO<sub>4</sub> Sequestrant - Orthopolyphosphate



Chlorine Drums (Left - Backup; Right - Online)



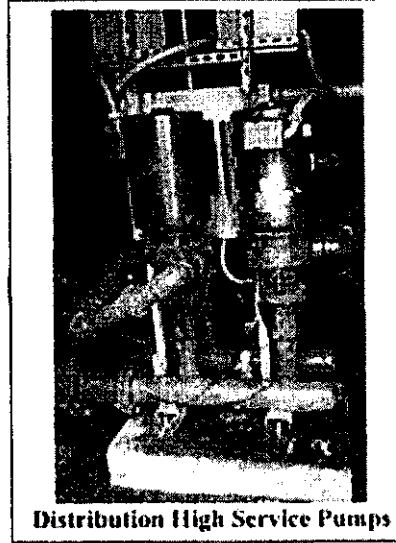
Chlorine Injection Point



PO<sub>4</sub> Injection Point



Fire Line and High Service Pump



Distribution High Service Pumps



# Florida Department of Environmental Protection

Southwest District Office  
13051 North Telecom Parkway  
Temple Terrace, Florida 33637-0926

Charlie Crist  
Governor

Bill Sinkamp  
Deputy Governor

Mark L. Scott  
Secretary

August 12, 2008

Mr. Patrick C. Flynn  
Labrador Utilities, Inc.  
200 Weathersfield Avenue  
Altamonte Springs, FL 32714-4027

Re: Compliance Evaluation Inspection  
Forest Lakes Estates WWTF  
Facility ID No. FLA012801  
Pasco County

Dear Mr. Flynn:

On July 29, 2008, the Florida Department of Environmental Protection (Department) conducted a Compliance Evaluation Inspection at the referenced facility to determine compliance with wastewater requirements and, overall, the facility was Out of Compliance. A copy of the inspection report is attached for your records.

You are requested to respond to this letter with the plans you have made to correct any noted deficiencies and to submit any requested information for those items indicated by an asterisk (\*). Your response is requested to be in writing and should include a time frame needed to achieve compliance. This response is due to the Department by September 15, 2008. Please direct any questions to the undersigned at (813) 632-7600, extension 411, or e-mail: [frank.fulghum@dep.state.fl.us](mailto:frank.fulghum@dep.state.fl.us).

Sincerely,

Frank L. Fulghum III  
Environmental Specialist  
Domestic Wastewater Program

Attachments

cc: Mr. Lee Neal, Utilities, Inc (via e-mail)  
Isabel King, P.E, FDEP (via e-mail)

RECEIVED

AUG 14 2008

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

**WASTEWATER COMPLIANCE INSPECTION REPORT**

FACILITY AND INSPECTION INFORMATION

⊗ = Optional

Name and Physical Location of Facility Forest Lake Estates WWTF 6249 Forest Lake Drive Zephyrhills, FL 33540	WAFR ID: FLA012801 Issued 01/24/05 Expires 02/23/10	County PASCO Phone	Entry Date/Time 7/29/08 ⊗ Exit Date/Time 7/29/08
Name(s) of Field Representative(s)	Title	Phone	
Name and Address of Permittee or Designated Representative Mr. Patrick Flynn Lateador Utilities, Inc. of Florida P.O. Box 1206 Zephyrhills, FL 33539	Title Regional Director	Phone 813/783-7979	⊗ Operator Certification #

Inspection Type	<input type="checkbox"/> C <input type="checkbox"/> E <input type="checkbox"/> I	Samples Taken(Y/N): N	⊗ Sample ID#: N/A	Samples Split(Y/N): N/A
<input checked="" type="checkbox"/> Domestic	<input type="checkbox"/> Industrial	Were Photos Taken(Y/N): Y	⊗ Log book Volume: N/A	⊗ Page: N/A

FACILITY COMPLIANCE AREAS EVALUATED							
(C) In Compliance; (NC) Out of Compliance; (SO) Significant Out of Compliance; (NA) Not Applicable; (NE) Not Evaluated							
Significant Non-Compliance Criteria Should be Reviewed when Out of Compliance Ratings Are Given in Areas Marked by a *							
PERMITS/ORDERS		SITE MONITORING PROGRAM		FACILITY OPERATIONS		EFFLUENT DISPOSAL	
IC	1. Permit	NE	3. Laboratory	IC	6. Facility Site Review	IC	9. Effluent Quality
IC	2. Compliance Schedules	NC	4. Sampling	IC	7. Flow Measurement	NC	10. Effluent Disposal
		NC	5. Records & Reports	NC	8. Operation & Maintenance	IC	11. Residuals/Sludge
SC	13. Other: Odor					NC	12. Groundwater

Facility and/or Order Compliance Status:  In-Compliance  Out-Of-Compliance  Significant Out Of Compliance

Recommended Action: Letter

Name(s) and Signature(s) of Inspector(s) Frank L. Fulghum III	District Office/Phone Number SWD (813)632-7600 X411	Date 8-12-08
⊗ Signature of Reviewer Michele H. Duggan	District Office/Phone Number SWD (813)632-7600 X335	Date 08/12/08

Fill Out This Section For All Surface Water Discharge Inspections (CEI, CSI, CBI, PAI, XSI, RI)

Transaction Code	NPDES Number	YR/MO/DA	Insp Type	Inspector	Fac Type
N	S		1	2	3

ADDITIONAL NPDES COMMENTS

Inspection Type (Field 1): A=PAI, B=CI, C=CEI, S=CSI, X=XSI, R=RI  
 Inspection Code (Field 2): S=State, J=Joint EPA/State, EPA Lead, T=Joint State/EPA, State Lead, L=Local Program  
 Facility Type (Field 3): 1=Municipal (Publicly Owned), 2=Industrial and Privately Owned Domestic, 3=Agricultural, 4=Federal  
 Every other field is self explanatory

## INSPECTION FINDINGS

Facility Name: Forest Lakes Estates WWTF  
Facility ID No.: FLA012801  
Inspection Type: Compliance Evaluation Inspection  
Inspection Date: July 29, 2008, 1105 hours

### PERMIT

Domestic Wastewater Permit No. FLA012801 was issued February 24, 2005 and expires on February 23, 2010.

### COMPLIANCE SCHEDULES

There are no outstanding items from Section VI, Schedules, of the permit.

### LABORATORY

Not Evaluated.

### SAMPLING

\*Influent and effluent sampling is being conducted by timed-compositing. Eight hour flow proportioned compositing is required.

### RECORDS AND REPORTS

1. \*A review of the Discharge Monitoring Reports (DMRs) submitted from June 2007 to June 2008 revealed missing or incorrect values. On the January 2008 DMR, the Annual Average Daily Flow and the 3 Month Average Daily Flow values were incorrect. Please correct and verify all flow measurement data for all the DMRs after January 2008. On the March 2008 DMR, the values for fecal coliform maximum and fecal coliform 90% were missing.
2. \*The backflow prevention device should be tested annually by a certified technician. The last calibration date was on June 9, 2006. Please submit documentation of the most recent testing date.

### FACILITY SITE REVIEW

No problems or deficiencies were identified.

### FLOW MEASUREMENT

\*The onsite calibration report for the sonic meter was dated April 24, 2008. However, the calibration report for the flow chart was September 10, 2007. It is recommended that all components of the flow measuring system be calibrated at the same time.

### OPERATION AND MAINTENANCE

1. \*Moderate rust was observed in and around clarifiers, bulkhead, rails, and support.
2. The Facility was operating at half its permitted capacity as a result of low seasonal flows.
3. The new odor control system at the headworks was observed.

4. \*The automatic backwash feature for the filters was inoperable. Please indicate when this will be repaired.

#### EFFLUENT QUALITY

1. A review of the DMRs submitted from June 2007 through June 2008 did not reveal any permit limit exceedances.
2. The final effluent's total chlorine residual was greater than 2.2 mg/L and the pH was 7.5 SU at 1135 hours.

#### EFFLUENT DISPOSAL

1. No ponding or sprayhead problems were observed during this inspection. The height of the hay was uniform.
2. \*The two onsite percolation ponds were extremely overgrown and should be mowed more frequently.

#### RESIDUALS

Residuals are to be transported to a residuals management facility for treatment or disposal in a Class I or II solid waste landfill.

#### GROUND WATER

1. \*A review of the Ground Water Monitoring Reports (GWMR) submitted for the first and second quarters of 2008 revealed the following:
  - a. \*Monitoring wells MWC 01, 02, and 03 were too dry to sample for the first quarter of 2008.
  - b. \*The first quarter of 2008 qualifiers for Total Recoverable Chromium and Dissolved Sodium indicated a method blank "contamination". Please contact lab to check sampling procedures.
  - c. \*The second quarter of 2008 pH value for MWC-02 was 4.66 SU. This value is below the permitted 6.5 to 8.5 range.
  - d. \*The second quarter of 2008 pH value for MWC-04 was 6.3 SU. This value is below the permitted 6.5 to 8.5 range.
  - e. \*Monitoring wells MWC 01 and 03 were too dry to sample for the second quarter of 2008.
2. \*Both 2008 quarters of GWMRs indicated that some MWC were "dry" and a representative sample could not be obtained. If another "dry" event occurs, then the permittee shall follow

the permit in notifying the Department immediately, and submitting a written report within seven days detailing remedial measures taken or proposed.

3. \*Please start sampling for Total Recoverable Sodium, PARM Code 00923, not Dissolved Sodium, for future quarters. The Department will send you a revised GWMR to be used in place of the current permitted GWMR.

OTHER

\*Notwithstanding the previous concerns, the issues outlined in the Department's Warning Letter No. WL06-0021DW-51-SWD, dated August 17, 2006, and subsequent inspections appeared largely resolved. The Department shall revise and forward a settlement offer separately.

Facility: Forest Lake WWTF  
 County: Pasco  
 Application No.

Permit No. FLA012801  
 Issued: 2/24/2005 Expires: 2/23/2010  
 Revised:

Reviewer Frank L. Fulghum III  
 Date: 7/29/2008

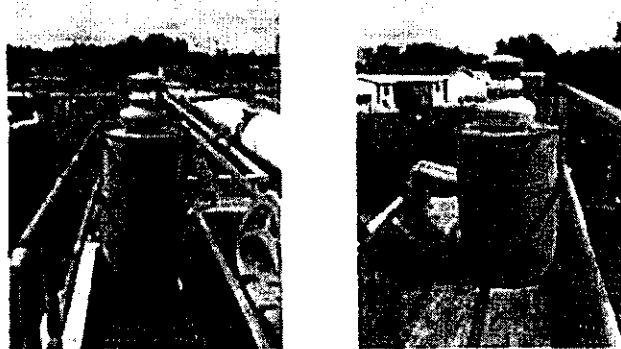
<i>Plant/R001</i>	<i>0.216</i>	<i>0.216</i>			<i>20</i>	<i>30</i>	<i>60</i>	<i>20</i>	<i>30</i>	<i>60</i>	<i>200</i>	<i>200</i>	<i>400</i>	<i>800</i>
Mon/Yr	Flow aadf	Flow 3madf	Flow madf	% Cap	CBOD aa	CBOD ma	CBOD max	TSS aa	TSS ma	TSS max	Fecal aa	Fecal mgn	Fecal (90%)	Fecal max
Jun-07	0.053	0.036	0.02	16.6	4.66	2	2	3.52	1.5	2	1.25	1	100	1
Jul-07	0.0520	0.0210	0.0230	9.7	4.8	5.9	13	3.6	3.3	6	1.3	1	100	1
Aug-07	0.0520	0.0240	0.0290	11	4.5	3.2	3.8	3.5	1.5	2	1.5	1	1	1
Sep-07	0.0510	0.0270	0.0290	12.5	4.4	3	4	3.5	4.6	6	1.3	1	1	1
Oct-07	0.0510	0.0350	0.0470	16	4.5	2.8	3.6	3.6	1.5	2	1.3	1	100	1
Nov-07	0.0620	0.0470	0.0640	21.7	4.5	2	2	3.8	2	2	1	1	1	1
Dec-07	0.0650	0.0550	0.0530	25	4.4	1	3	3.9	1	1	1	1	1	1
Jan-08	<b>0.0830</b>	<b>0.0760</b>	0.0510	35	3.6	2	2	3.4	5	12	1.1	2.3	5	1
Feb-08	0.0520	0.0760	0.0880	32.7	4.4	4.7	7.3	3.8	9.9	17	1	1	1	1
Mar-08	0.0550	<b>0.0990</b>	0.1250	45.8	2.9	4	6	3.4	5.5	7.6	1	1		
Apr-08	0.0630	0.1020	0.0950	47	3.1	3.3	4.1	4.2	9.3	14	1.2	1	1	1
May-08	0.0650	0.1040	0.0940	48.0	3.1	2	2	4.1	2.2	2.4	1.2	1	1	1
Jun-08	0.0620	0.0840	0.0450	39	3.2	3.1	4.2	4	2	2	1.1	1	1	1
Total	0.7660	0.7860	0.7630		52.06	39	57	48.32	49.3	76	15.25	14.3	313	12
Average	0.0589	0.0605	0.0587		4.00	3.00	4.38	3.72	3.79	5.85	1.17	1.07	26.08	1.00

- 1) Please recheck the numbers for the January 2008 AADF and 3MADF.
- 2) The March 2008 DMR does not have any values for fecal coliform maximum or 90%.



## Forest Lake Estates WWTF, 07/29/08

- Photographer: Frank L. Fulghum III
- Facility Name: Forest Lake Estates WWTF
- Facility ID No.: FLA012801
- Photographed on: July 29, 2008
- Type of Camera: Canon PowerShot A530
- Recording Media: MMC Plus memory card
- Digital photos copied by: Frank L. Fulghum III
- Digital photos copied to: C:\Documents and Settings\fulghum\_fm\My Documents\My Pictures\7-29-08
- Original copies stored: "Photo Archives" CD



Photos above of the charcoal filters above the surge tank

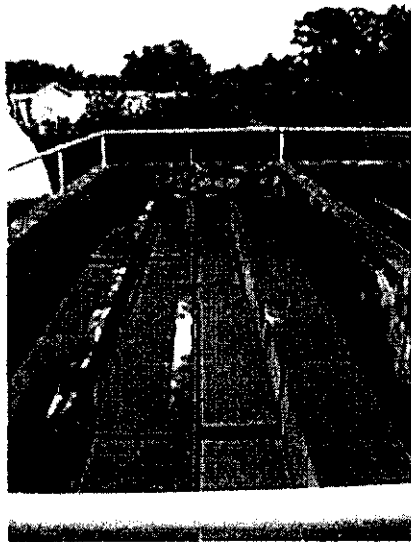


Photo above of the chlorine contact chamber with pebbles to prevent algae



Photo above is the spray field

**Labrador Utilities, Inc.**

**Docket No.: 080249-WS**

**Pasco County**

**25.30.440 (6)  
PERMITS**

**Test Year Ended December 31, 2007**



# Department of Environmental Protection

Jeb Bush  
Governor

Southwest District  
3804 Coconut Palm Drive  
Tampa, Florida 33619-1352

Colleen M. Castille  
Secretary

**PERMITTEE**  
Utilities, Inc. of Florida  
200 Weathersfield Avenue  
Altamonte Springs, Florida 32714

Attn: Patrick Flynn  
Regional Director

**PERMIT/CERTIFICATION**  
PWS ID. No.: 6514842  
Permit Number: 0242955-001-WC/MC  
Date of Issue: February 21, 2005  
Expiration Date: February 20, 2010  
County: Pasco  
Lat/Long: NA  
Sect/Town/Range: N/A  
Project: Labrador Disinfection Conversion

This permit is issued under the provisions of Chapter 403, Florida Statutes (F.S.) and Florida Administrative Code (F.A.C.) Rules 62-555 and 62-4. The above named permittee is hereby authorized to perform the work or operate the facility shown on the application and approved drawing(s), plans, and other documents, attached hereto or on file with the department and made a part hereof and specifically described as follows:

Replacement of the existing gas chlorination system with a sodium hypochlorite system at all of the system's wells. The water plant modification shall be constructed in accordance with the plans and specifications prepared by Mark A. Veenstra, P.E., [McKim & Creed, PA].

Location: Labrador WTP, in Pasco County, Florida.

#### Specific Conditions:

1. All construction must be in accordance with this permit. Before commencing work on project changes for which a construction permit modification is required per 62-555.536(1), the permittee shall submit to the Department a written request for a permit modification. Each such request shall be accompanied by one copy of a revised construction permit application, the proper processing fee and one copy of either a revised preliminary design report or revised drawings, specifications and design data. [F.A.C. Rule 62-555.536]
2. Permitted construction or alteration of a public water system may not be placed into service until a letter of clearance has been issued by this Department. [F.A.C. Rule 62-555.345]
3. Permitted construction or alteration of public water supply systems must be supervised during construction by a professional engineer registered in the State of Florida if the project was designed under the responsible charge of a professional engineer licensed in the State of Florida. The permittee must retain the service of an engineer registered in the State to

observe that construction of the project is in accordance with the engineering plans and specifications as submitted in support of the application for this permit. [F.A.C. Rule 62-555.520(3)]

4. A letter of clearance may be issued by this Department once the following items have been submitted:
  - a. Complete and fully executed form "Certification of Construction Completion and Request for Clearance to Place Permitted PWS Components into Operation", DEP Form 62-555.900(9) effective August 28, 2003 [F.A.C. Rule 62-555.345(1)];
  - b. The portion of record drawings showing deviations from DEP construction permit, including the approved preliminary design report or drawings and specifications, if there are any deviations from said permit. (Note that it is necessary to submit a copy of only the portion of record drawings showing deviations and not a complete set of record drawings) [F.A.C. Rule 62-555.345(1)(a)];
5. The permittee must instruct the engineer of record to request system clearance from the Department within sixty (60) days of completion of construction, testing and disinfecting the system. Bacteriological test results shall be considered unacceptable if the test were completed more than 60 days before the Department received the results. [F.A.C. Rule 62-555.340(2)(c)]
6. If historical or archaeological artifacts, such as Indian canoes, are discovered at any time within the project site the permittee shall immediately notify the district office and the Bureau of Historic Preservation, Division of Archives, History and Records Management, R.A. Gray Building, Tallahassee, Florida 32301, telephone number (850) 487-2073.
7. The supplier of water must operate and maintain this facility in accordance with the requirements of F.A.C. Rule 62-555.350 and the applicable standards in 62-550.
8. The permittee shall be aware of and operate under the attached "General Conditions". General conditions are binding upon the permittee and enforceable pursuant to Chapter 403, F.S. [F.A.C. Rule 62-555.533(1)]
9. If unanticipated delays will cause project completion to extend beyond the expiration date of this permit, the permittee shall submit to the Department a request to extend the expiration date of this permit including the appropriate processing fee. This request shall specify the reasons for the delay and shall be submitted to the Department for approval prior to the expiration date of this permit. Note that no specific construction permit shall be extended so as to remain in effect longer than five years. [F.A.C. Rule 62-555.536(4)]
10. All water main pipe, including fittings shall be color coded or marked using blue as a predominant color to differentiate drinking water from reclaimed or other water in accordance with F.A.C. Rule 62-555.320(21)(b) 3.

PERMITTEE: Utilities, Inc. of Florida  
PROJECT: Labrador Disinfection Conversion

PERMIT No.: 0242955-001-WC/MC

11. Persons proposing to transfer this permit prior to the project being approved or cleared by the Department for placement into permanent operation shall complete DEP Form 62-555.900(8) effective August 28, 2003 and submit to the Department along with the proper processing fee. [F.A.C. Rule 62-555.536]
12. The permittee must ensure that all components that will be installed under this project and that will come into contact with drinking water or drinking water treatment chemicals conform to one of the following:
  - a. NSF International Standard 61 as adopted in Rule 62-555.335, F.A.C.;
  - b. NSF International Standard 42, 44, 53, 55, 58, or 62 as adopted in Rule 62-555.335, F.A.C.;
  - c. Section 6 of NSF International Standard 14 as adopted in Rule 62-555.335, F.A.C.;
  - d. The Food and Drug Administration's regulations for indirect food additives as contained in the April 1, 2002, revision of 121 CFR Parts 174 through 189.

[F.A.C. Rule 62-555.320(3)(b)]

STATE OF FLORIDA DEPARTMENT  
OF ENVIRONMENTAL PROTECTION  
DRINKING WATER PROGRAM



Deborah A. Getzoff  
District Director  
Southwest District

DAG/sk



Jeb Bush  
Governor

# Department of Environmental Protection

Southwest District  
3804 Coconut Palm Drive  
Tampa, Florida 33619

Colleen M. Castille  
Secretary

## STATE OF FLORIDA DOMESTIC WASTEWATER FACILITY PERMIT

**PERMITTEE:**

Labrador Utilities, Inc.

**PERMIT NUMBER:** FLA012801  
**PA FILE NUMBER:** FLA012801-005-DW2P  
**ISSUANCE DATE:** February 24, 2005  
**EXPIRATION DATE:** February 23, 2010

**RESPONSIBLE AUTHORITY:**

Mr. Patrick Flynn  
Regional Director  
200 Weathersfield Avenue  
Altamonte Springs, FL 32714

(407) 869-1919

**FACILITY:**

Forest Lake Estates WWTF  
41311 Paquette Way  
Zephyrhills, FL 33540  
Pasco County  
Latitude: 28° 14' 43" N Longitude: 82° 07' 58" W

This permit is issued under the provisions of Chapter 403, Florida Statutes, and applicable rules of the Florida Administrative Code. The above named permittee is hereby authorized to operate the facilities shown on the application and other documents attached hereto or on file with the Department and made a part hereof and specifically described as follows:

**TREATMENT FACILITIES:**

An existing 0.216 MGD three month average daily flow (TMADF) Type II extended aeration domestic wastewater treatment facility consisting of: three equalization basins of 95,000 gallons total, eight aeration basins of 211,000 gallons total volume, three clarifiers of 69,000 gallons total volume and 846 square feet total surface area, one 5,300 holding / dosing tank, one sand filter of 144 square feet, two chlorine contact chambers of 6,200 gallons total volume, and three aerobic digesters of 38,000 gallons total volume. This facility is operated to provide secondary treatment with basic disinfection. Under this renewal, the wastewater plant will be re-piped to operate as a one, two, or three train process.

*"More Protection, Less Process"*

*Printed on recycled paper.*

FACILITY: Forest Lake Estates WWTF  
PERMITTEE: Labrador Utilities, Inc.

PERMIT NUMBER: FLA012801

**REUSE:**

**Land Application:** An existing remote 0.216 MGD annual average daily flow (AADF) permitted capacity slow-rate restricted public access system (R-001). R-001 consists of a 34.7-acre sprayfield located ¼ mile North of the S.R. 54 / Lumberton intersection at approximately latitude 28° 14' 41" N, longitude 82° 08' 03" W.

A former on-site percolation pond is to be re-piped under this renewal to function as a wet weather storage pond. The capacity is to be determined and submitted to the Department after the re-piping is complete.

**IN ACCORDANCE WITH:** The limitations, monitoring requirements and other conditions set forth in Pages 1 through 17 of this permit.



**I. RECLAIMED WATER AND EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS**

**A. Reuse and Land Application Systems**

1. During the period beginning on the issuance date and lasting through the expiration date of this permit, the permittee is authorized to direct reclaimed water to Reuse System R-001. Such reclaimed water shall be limited and monitored by the permittee as specified below:

Parameter	Units	Max/Min	Reclaimed Water Limitations				Monitoring Requirements			
			Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequency	Sample Type	Monitoring Location Site Number	Notes
Flow, to R-001	MGD	Maximum	0.216	Report	-	-	Continuous	Recording flow meters and totalizers	FLW-01	Sec Cond.I.A.3
BOD, Carbonaceous 5 day, 20C	MG/L	Maximum	20.0	30.0	-	60.0	Every Two Weeks	8-hour flow proportioned composite	EFA-01	
Solids, Total Suspended	MG/L	Maximum	20.0	30.0	-	60.0	Every Two Weeks	8-hour flow proportioned composite	EFA-01	
pH	SU	Range	-	-	-	6.0 to 8.5	5 Days/Week	Grab	EFA-01	
Coliform, Fecal	#/100M L	Maximum	See Permit Condition I.A.4.				Every Two Weeks	Grab	EFA-01	
Total Residual Chlorine (For Disinfection)	MG/L	Minimum	-	-	-	0.5	5 Days/Week	Grab	EFA-01	Sec Cond.I.A.5

FACILITY: Forest Lake Estates WWTF  
PERMITTEE: Labrador Utilities, Inc.

PERMIT NUMBER: FLA012801

2. Reclaimed water samples shall be taken at the monitoring site locations listed in Permit Condition I. A. 1. and as described below:

Monitoring Location Site Number	Description of Monitoring Location
EFA-01	After disinfection and prior to discharge.
FLW-01	Flow to R-001.

3. Recording flow meters and totalizers shall be utilized to measure flow and calibrated at least annually. *[62-601.200(17) and .500(6)]*
4. The arithmetic mean of the monthly fecal coliform values collected during an annual period shall not exceed 200 per 100 mL of reclaimed water sample. The geometric mean of the fecal coliform values for a minimum of 10 samples of reclaimed water, each collected on a separate day during a period of 30 consecutive days (monthly), shall not exceed 200 per 100 mL of sample. No more than 10 percent of the samples collected (the 90th percentile value) during a period of 30 consecutive days shall exceed 400 fecal coliform values per 100 mL of sample. Any one sample shall not exceed 800 fecal coliform values per 100 mL of sample. *[62-610.410 and 62-600.440(4)(c)]*
5. A minimum of 0.5 mg/L total residual chlorine must be maintained for a minimum contact time of 15 minutes based on peak hourly flow. *[62-610.410 and 62-600.440(4)(b)]*

**B. Other Limitations and Monitoring and Reporting Requirements**

1. During the period beginning on the issuance date and lasting through the expiration date of this permit, the treatment facility shall be limited and monitored by the permittee as specified below:

Parameter	Units	Max/Min	Limitations				Monitoring Requirements			Notes
			Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequency	Sample Type	Monitoring Location Site Number	
Flow, Total plant	MGD	Maximum	0.216 (TMADF)	Report	-	-	5 Days/Week	Recording flow meters and totalizers	FLW-01	See Cond.1.B.3 & 5
Percent Capacity, (3MADF/Permitted Capacity) x 100	%	Maximum	-	Report	-	-	Monthly	Calculated	FLW-01	
BOD, Carbonaceous 5 day, 20C	MG/L	Maximum	-	Report	-	-	Every Two Weeks	8-hour flow proportioned composite	INF-01	See Cond.1.B.4
Solids, Total Suspended	MG/L	Maximum	-	Report	-	-	Every Two Weeks	8-hour flow proportioned composite	INF-01	See Cond.1.B.4
Residuals	Gallons	Total	-	Report Mo. Total	-	-	Monthly	Calculation	OTH-01	See Cond.11.2

2. Samples shall be taken at the monitoring site locations listed in Permit Condition I. B. 1 and as described below:

Monitoring Location Site Number	Description of Monitoring Location
FLW-01	Total plant flow, measured at the mixing chamber located before the holding/dosing tank and after the effluent of the old CCCs.
INF-01	At headworks, prior to treatment, and ahead of RAS line.
OTH-01	Volume of residuals transported off site.

3. The three-month average daily flow to the treatment plant shall not exceed 0.216 MGD.
4. Influent samples shall be collected so that they do not contain digester supernatant or return activated sludge, or any other plant process recycled waters. [62-601.500(4)]
5. Recording flow meters and totalizers shall be utilized to measure flow and calibrated at least annually. [62-601.200(17) and .500(6)]
6. Parameters which must be monitored as a result of a surface water discharge shall be analyzed using a sufficiently sensitive method in accordance with 40 CFR Part 136. Parameters which must be monitored as a result of a ground water discharge (i.e., underground injection or land application system) shall be analyzed in accordance with Chapter 62-601, F.A.C. [62-620.610(18)]
7. The permittee shall provide safe access points for obtaining representative influent, reclaimed water, and effluent samples which are required by this permit. [62-601.500(5)]
8. Monitoring requirements under this permit are effective on the first day of the second month following permit issuance. Until such time, the permittee shall continue to monitor and report in accordance with previously effective permit requirements, if any. During the period of operation authorized by this permit, the permittee shall complete and submit to the Department Discharge Monitoring Reports (DMRs) in accordance with the frequencies specified by the REPORT type (i.e., monthly, toxicity, quarterly, semiannual, annual, etc.) indicated on the DMR forms attached to this permit. Monitoring results for each monitoring period shall be submitted in accordance with the associated DMR due dates below.

REPORT Type	Monitoring Period	Due Date
Monthly or Toxicity	first day of month – last day of month	28 <sup>th</sup> day of following month
Quarterly	January 1 - March 31	April 28
	April 1 – June 30	July 28
	July 1 – September 30	October 28
	October 1 – December 31	January 28
Semiannual	January 1 – June 30	July 28
	July 1 – December 31	January 28
Annual	January 1 – December 31	January 28

DMRs shall be submitted for each required monitoring period including months of no discharge. The permittee shall make copies of the attached DMR form(s) and shall submit the completed DMR form(s) to the Department postmarked by the twenty-eighth (28th) of the month following the month of operation at the address specified below:

Florida Department of Environmental Protection  
 Wastewater Compliance Evaluation Section, Mail Station 3551  
 Twin Towers Office Building  
 2600 Blair Stone Road  
 Tallahassee, Florida 32399-2400

[62-620.610(18)][62-601.300(1),(2), and (3)]

9. During the period of operation authorized by this permit, reclaimed water or effluent shall be monitored annually for the primary and secondary drinking water standards contained in Chapter 62-550, F.A.C., (except for turbidity, total

FACILITY: Forest Lake Estates WWTF  
PERMITTEE: Labrador Utilities, Inc.

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coliforms, color, and corrosivity). Twenty-four hour composite samples shall be used to analyze reclaimed water or effluent for the primary and secondary drinking water standards. These monitoring results shall be reported to the Department annually on the Reclaimed Water or Effluent Analysis Report, Form 62-620.910(15), or in another format if requested by the permittee and if approved by the Department as being compatible with data entry into the Department's computer system. During years when a permit is not renewed, a certification stating that no new non-domestic wastewater dischargers have been added to the collection system since the last reclaimed water or effluent analysis was conducted may be submitted in lieu of the report. The annual reclaimed water or effluent analysis report or the certification shall be completed and submitted in a timely manner so as to be received by the Department by January 1 of each year. [62-601.300(4)][62-601.500(3)]

10. The permittee shall submit an Annual Reuse Report using DEP Form 62-610.300(4)(a)2. on or before January 1 of each year. [62-610.870(3)]
11. Unless specified otherwise in this permit, all reports and other information required by this permit, including 24-hour notifications, shall be submitted to or reported to, as appropriate, the Department's Southwest District Office at the address specified below:

Southwest District Office  
3804 Coconut Palm Drive  
Tampa, Florida 33619-1352

Phone Number - 813-744-6100

FAX Number - 813-744-8198

All FAX copies shall be followed by original copies. All reports and other information shall be signed in accordance with the requirements of Rule 62-620.305, F.A.C. [62-620.305]

## II. RESIDUALS MANAGEMENT REQUIREMENTS

1. The method of residuals use or disposal by this facility is transport to a Residual Management Facility or disposal in a Class I or II solid waste landfill. Transportation of the residuals to an alternative RMF does not require a permit modification, however, use of an alternative RMF requires a copy of the agreement pursuant to Chapter 62-640.880(1)(c), F.A.C., along with a written notification to the Department at least 30 days before transport of the residuals.
2. The permittee shall report the volume of residuals transported. [62-640.650(3)]
3. The permittee shall be responsible for proper treatment, management, use, and land application or disposal of its residuals. [62-640.300(5)]
4. The permittee shall not be held responsible for treatment, management, use, or land application violations that occur after its residuals have been accepted by a permitted residuals management facility with which the source facility has an agreement in accordance with Rule 62-640.880(1)(c), F.A.C., for further treatment, management, use or land application. [62-640.300(5)]
5. Disposal of residuals, septage, and other solids in a solid waste landfill, or disposal by placement on land for purposes other than soil conditioning or fertilization, such as at a monofill, surface impoundment, waste pile, or dedicated site, shall be in accordance with Chapter 62-701, F.A.C. [62-640.100(6)(k)3 & 4]
6. If the permittee intends to accept residuals from other facilities, a permit revision is required pursuant to Rule 62-640.880(2)(d), F.A.C. [62-640.880(2)(d)]
7. The permittee shall keep hauling records to track the transport of residuals between facilities. The hauling records shall contain the following information:

FACILITY: Forest Lake Estates WWTF  
 PERMITTEE: Labrador Utilities, Inc.

PERMIT NUMBER: FLA012801

**Source Facility**

1. Date and Time Shipped
2. Amount of Residuals Shipped
3. Degree of Treatment (if applicable)
4. Name and ID Number of Residuals Management Facility or Treatment Facility
5. Signature of Responsible Party at Source Facility
6. Signature of Hauler and Name of Hauling Firm

**Residuals Management Facility or Treatment Facility**

1. Date and Time Received
2. Amount of Residuals Received
3. Name and ID Number of Source Facility
4. Signature of Hauler
5. Signature of Responsible Party at Residuals Management Facility or Treatment Facility

These records shall be kept for five years and shall be made available for inspection upon request by the Department. A copy of the hauling records information maintained by the source facility shall be provided upon delivery of the residuals to the residuals management facility or treatment facility. The permittee shall report to the Department within 24 hours of discovery any discrepancy in the quantity of residuals leaving the source facility and arriving at the residuals management facility or treatment facility. [62-640.880(4)]

8. Storage of residuals or other solids at the permitted facility shall require prior written notification to the Department. [62-640.300(4)]

**III. GROUND WATER REQUIREMENTS**

**Operational Requirements**

1. For the Part II land application system(s), all ground water quality criteria specified in Chapter 62-520, F.A.C., shall be met at the edge of the zone of discharge. The zone of discharge for this project shall extend horizontally 100 feet from the application site or to the facility's property line, whichever is less, and vertically to the base of the surficial aquifer. [62-520.200(23)][62-522.400 and 62-522.410]
2. The ground water minimum criteria specified in Rule 62-520.400 F.A.C., shall be met within the zone of discharge. [62-520.400 and 62-520.420(4)]
3. During the period of operation authorized by this permit, the permittee shall sample ground water in accordance with this permit and the approved ground water monitoring plan prepared in accordance with Rule 62-522.600, F.A.C. [62-522.600][62-610.510, 62-610.412]
4. The following monitoring wells shall be sampled in accordance with the monitoring frequencies specified in Permit Condition III.5. for Reuse Systems R-001 and R-002. Sampling must be reasonably spaced to be representative of potentially changing conditions.

Monitoring Well ID	Alternate Well Name and/or Description of Monitoring Location	Aquifer Monitored	New or Existing
MWC-01	MW-8	Surficial	existing
MWC-02	MW-9	Surficial	existing
MWC-03	MW-10	Surficial	existing
MWC-04	MW-11	Surficial	existing

MWB = Background; MWI = Intermediate; MWC = Compliance

[62-522.600][62-610.510(3)]

5. The following parameters shall be analyzed for each of the monitoring well(s) identified in Permit Condition(s) III. 4:

Parameter	Compliance Well Limit	Units	Sample Type	Monitoring Frequency
Water Level Relative to NGVD	Report	FEET	In-situ	Quarterly
Nitrogen, Nitrate, Total (as N)	10	MG/L	Grab	Quarterly
Solids, Total Dissolved (TDS)	500	MG/L	Grab	Quarterly
Arsenic, Total Recoverable	50	UG/L	Grab	Quarterly
Chloride (as Cl)	250	MG/L	Grab	Quarterly
Cadmium, Total Recoverable	5	UG/L	Grab	Quarterly
Chromium, Total Recoverable	100	UG/L	Grab	Quarterly
Lead, Total Recoverable	15	UG/L	Grab	Quarterly
Coliform, Fecal	4	#/100ML	Grab	Quarterly
pH	6.5 to 8.5	SU	In-situ	Quarterly
Sulfate, Total	250	MG/L	Grab	Quarterly
Turbidity	Report	NTU	In-situ	Quarterly
Sodium, Dissolved	160	MG/L	Grab	Quarterly
Specific Conductance	Report	UMHO/CM	In-situ	Quarterly
Temperature (C), Water	Report	DEG.C	In-situ	Quarterly

[62-522.600(11)(b)] [62-601.300(3), 62-601.700, and Figure 3 of 62-601] [62-601.300(6)] [62-520.300(9)]

6. If the concentration for any constituent listed in Permit Condition III. 5 in the natural background quality of the ground water is greater than the stated maximum, or in the case of pH is also less than the minimum, the representative natural background quality shall be the prevailing standard. [62-520.420(2)]
7. In accordance with Part D of Form 62-620.910(10), water levels shall be recorded before evacuating wells for sample collection. Elevation references shall include the top of the well casing and land surface at each well site (NGVD allowable) at a precision of plus or minus 0.1 foot. [62-610.510(3)(b), 62-610.412(2)(c), ]
8. Ground water monitoring wells shall be purged prior to sampling to obtain representative samples. [62-601.700(5)]
9. Analyses shall be conducted on unfiltered samples, unless filtered samples have been approved by the Department's Southwest District Office as being more representative of ground water conditions. [62-520.300(9)]
10. Ground water monitoring parameters shall be analyzed in accordance with Chapter 62-601, F.A.C. [62-620.610(18)]
11. Ground water monitoring test results shall be submitted on Part D of Form 62-620.910(10). For reuse or land application projects, results shall be submitted with the DMR for each month listed in the following schedule. The submitted results shall be for each year during the period of operation allowed by this permit in accordance with Permit Condition I.B.7. [62-522.600(10) and (11)(b)] [62-601.300(3), 62.601.700, and Figure 3 of 62-601] [62-620.610(18)]

SAMPLE PERIOD	REPORT DUE DATE
January - March	April 28
April - June	July 28
July - September	October 28
October - December	January 28

12. If any monitoring well becomes damaged or cannot be sampled for some reason, the permittee shall notify the Department's Southwest District Office immediately and a written report shall follow within seven days detailing the circumstances and remedial measures taken or proposed. Repair or replacement of monitoring wells shall be approved in advance by the Department's Southwest District Office. [62-522.600] [62-4.070(3)]

FACILITY: Forest Lake Estates WWTF  
PERMITTEE: Labrador Utilities, Inc.

PERMIT NUMBER: FLA012801

13. The Permittee shall provide verbal notice to the Department's Southwest District Office as soon as practical after discovery of a sinkhole within an area for the management or application of wastewater, wastewater residuals (sludges), or reclaimed water. The Permittee shall immediately implement measures appropriate to control the entry of contaminants, and shall detail these measures to the Department's Southwest District Office in a written report within 7 days of the sinkhole discovery. *[62-4.070(3)]*
14. All piezometers and wells not part of the approved ground water monitoring plan are to be plugged and abandoned in accordance with Rule 62-532.500(4), F.A.C., unless there is intent for their future use. *[62-532.500(4)]*

#### IV. ADDITIONAL REUSE AND LAND APPLICATION REQUIREMENTS

##### Part II Slow-Rate/Restricted Access System(s) (R-001)

1. Advisory signs shall be posted around the site boundaries to designate the nature of the project area. *[62-610.418(1)]*
2. Routine aquatic weed control and regular maintenance of storage pond embankments and access areas are required. *[62-610.414(8)]*
3. The annual average hydraulic loading rate to R-001 shall be limited to a maximum of 1.6 inches per week. The hydraulic loading rate shall not produce surface runoff or ponding of the applied reclaimed water. *[62-610.423(3) and (4)]*
4. The crops or vegetation shall be periodically harvested and removed from the project area. *[62-610.310(3)(d) and 62-610.419(1)(b)]*
5. Dairy cattle whose milk is intended for human consumption shall not be allowed on the project area for a period of 15 days after the last application of reclaimed water. No restrictions are imposed on the grazing of other cattle. *[62-610.425]*
6. Irrigation of edible food crops is prohibited. *[62-610.426]*
7. Overflows from emergency discharge facilities on storage ponds shall be reported as an abnormal event to the Department's Southwest District Office within 24 hours of an occurrence. The provisions of Rule 62-610.800(9), F.A.C., shall be met. *[62-610.800(9)]*

#### V. OPERATION AND MAINTENANCE REQUIREMENTS

1. During the period of operation authorized by this permit, the wastewater facilities shall be operated under the supervision of a(n) operator(s) certified in accordance with Chapter 62-602, F.A.C. In accordance with Chapter 62-699, F.A.C., this facility is a Category III, Class C facility and, at a minimum, operators with appropriate certification must be on the site as follows:  
  
A Class C or higher operator 3 hours/day for 5 days/week and one weekend visit. The lead operator must be a Class C operator, or higher.  
  
*[62-620.630(3)] [62-699.310] [62-610.462]*
2. An operator meeting the lead operator classification level of the plant shall be available during all periods of plant operation. "Available" means able to be contacted as needed to initiate the appropriate action in a timely manner. *[62-699.311(1)]*
3. The application to renew this permit shall include an updated capacity analysis report prepared in accordance with Rule 62-600.405, F.A.C. *[62-600.405(5)]*
4. The application to renew this permit shall include a detailed operation and maintenance performance report prepared in accordance with Rule 62-600.735, F.A.C. *[62-600.735(1)]*



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PERMIT NUMBER: FLA012801

5. The permittee shall maintain the following records and make them available for inspection on the site of the permitted facility:
  - a. Records of all compliance monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation and a copy of the laboratory certification showing the certification number of the laboratory, for at least three years from the date the sample or measurement was taken;
  - b. Copies of all reports required by the permit for at least three years from the date the report was prepared;
  - c. Records of all data, including reports and documents, used to complete the application for the permit for at least three years from the date the application was filed;
  - d. Monitoring information, including a copy of the laboratory certification showing the laboratory certification number, related to the residuals use and disposal activities for the time period set forth in Chapter 62-640, F.A.C., for at least three years from the date of sampling or measurement;
  - e. A copy of the current permit;
  - f. A copy of the current operation and maintenance manual as required by Chapter 62-600, F.A.C.;
  - g. A copy of the facility record drawings;
  - h. Copies of the licenses of the current certified operators; and
  - i. Copies of the logs and schedules showing plant operations and equipment maintenance for three years from the date of the logs or schedules. The logs shall, at a minimum, include identification of the plant; the signature and certification number of the operator(s) and the signature of the person(s) making any entries; date and time in and out; specific operation and maintenance activities; tests performed and samples taken; and major repairs made. The logs shall be maintained on-site in a location accessible to 24-hour inspection, protected from weather damage, and current to the last operation and maintenance performed.

[62-620.350]

## VI. SCHEDULES

1. The permittee shall follow the below schedule:

Implementation Step		Completion Date
1	Submit an operating protocol for R-001.	Within 30 days of Permit Issuance
2	Pipe the smaller of the two percolation ponds to return to the pre-filtration tank. This former percolation pond is to function only as a wet weather storage pond after re-piping is complete.	Within 180 days of Permit Issuance
3	Fence R-001 in accordance with Chapter 62-610.518(1), F.A.C.	Within 90 days of Permit Issuance
4	Cap all piping to former R-003 and remove all appurtenances.	Within 180 days of Permit Issuance
5	Submit written notification of completion to the Department no more than 30 days after completing each item above.	-

[62-620.320(1) and (2)] [62-4.070(3)]

## VII. INDUSTRIAL PRETREATMENT PROGRAM REQUIREMENTS

This facility is not required to have a pretreatment program at this time. [62-625.500]

FACILITY: Forest Lake Estates WWTF  
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### VIII. OTHER SPECIFIC CONDITIONS

1. If the permittee wishes to continue operation of this wastewater facility after the expiration date of this permit, the permittee shall submit an application for renewal, using Department Forms 62-620.910(1) and (2), no later than one-hundred and eighty days (180) prior to the expiration date of this permit. *[62-620.410(5)]*
2. Florida water quality criteria and standards shall not be violated as a result of any discharge or land application of reclaimed water or residuals from this facility. *[62-610.850(1)(a) and (2)(a)]*
3. In the event that the treatment facilities or equipment no longer function as intended, are no longer safe in terms of public health and safety, or odor, noise, aerosol drift, or lighting adversely affects neighboring developed areas at the levels prohibited by Rule 62-600.400(2)(a), F.A.C., corrective action (which may include additional maintenance or modifications of the permitted facilities) shall be taken by the permittee. Other corrective action may be required to ensure compliance with rules of the Department. Additionally, the treatment, management, use or land application of residuals shall not cause a violation of the odor prohibition in Rule 62-296.320(2), F.A.C. *[62-600.410(8) and 62-640.400(6)]*
4. The deliberate introduction of stormwater in any amount into collection/transmission systems designed solely for the introduction (and conveyance) of domestic/industrial wastewater; or the deliberate introduction of stormwater into collection/transmission systems designed for the introduction or conveyance of combinations of storm and domestic/industrial wastewater in amounts which may reduce the efficiency of pollutant removal by the treatment plant is prohibited, except as provided by Rule 62-610.472, F.A.C. *[62-604.130(3)]*
5. Collection/transmission system overflows shall be reported to the Department in accordance with Permit Condition IX. 20. *[62-604.550] [62-620.610(20)]*
6. The operating authority of a collection/transmission system and the permittee of a treatment plant are prohibited from accepting connections of wastewater discharges which have not received necessary pretreatment or which contain materials or pollutants (other than normal domestic wastewater constituents):
  - a. Which may cause fire or explosion hazards; or
  - b. Which may cause excessive corrosion or other deterioration of wastewater facilities due to chemical action or pH levels; or
  - c. Which are solid or viscous and obstruct flow or otherwise interfere with wastewater facility operations or treatment; or
  - d. Which result in treatment plant discharges having temperatures above 40°C.*[62-604.130(4)]*
7. The treatment facility, storage ponds, rapid infiltration basins, and/or infiltration trenches shall be enclosed with a fence or otherwise provided with features to discourage the entry of animals and unauthorized persons. *[62-610.518(1)] [62-610.418(1)] [and 62-600.400(2)(b)]*
8. Screenings and grit removed from the wastewater facilities shall be collected in suitable containers and hauled to a Department approved Class I landfill or to a landfill approved by the Department for receipt/disposal of screenings and grit. *[62-701.300(1)(a)]*
9. The permittee shall provide adequate notice to the Department of the following:
  - a. Any new introduction of pollutants into the facility from an industrial discharger which would be subject to Chapter 403, F.S., and the requirements of Chapter 62-620, F.A.C. if it were directly discharging those pollutants; and
  - b. Any substantial change in the volume or character of pollutants being introduced into that facility by a source which was identified in the permit application and known to be discharging at the time the permit was issued.

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*Adequate notice shall include information on the quality and quantity of effluent introduced into the facility and any anticipated impact of the change on the quantity or quality of effluent or reclaimed water to be discharged from the facility.*

*[62-620.625(2)]*

## IX. GENERAL CONDITIONS

1. The terms, conditions, requirements, limitations and restrictions set forth in this permit are binding and enforceable pursuant to Chapter 403, Florida Statutes. Any permit noncompliance constitutes a violation of Chapter 403, Florida Statutes, and is grounds for enforcement action, permit termination, permit revocation and reissuance, or permit revision. *[62-620.610(1)]*
2. This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviations from the approved drawings, exhibits, specifications or conditions of this permit constitutes grounds for revocation and enforcement action by the Department. *[62-620.610(2)]*
3. As provided in Subsection 403.087(6), F.S., the issuance of this permit does not convey any vested rights or any exclusive privileges. Neither does it authorize any injury to public or private property or any invasion of personal rights, nor authorize any infringement of federal, state, or local laws or regulations. This permit is not a waiver of or approval of any other Department permit or authorization that may be required for other aspects of the total project which are not addressed in this permit. *[62-620.610(3)]*
4. This permit conveys no title to land or water, does not constitute state recognition or acknowledgment of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the State. Only the Trustees of the Internal Improvement Trust Fund may express State opinion as to title. *[62-620.610(4)]*
5. This permit does not relieve the permittee from liability and penalties for harm or injury to human health or welfare, animal or plant life, or property caused by the construction or operation of this permitted source; nor does it allow the permittee to cause pollution in contravention of Florida Statutes and Department rules, unless specifically authorized by an order from the Department. The permittee shall take all reasonable steps to minimize or prevent any discharge, reuse of reclaimed water, or residuals use or disposal in violation of this permit which has a reasonable likelihood of adversely affecting human health or the environment. It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit. *[62-620.610(5)]*
6. If the permittee wishes to continue an activity regulated by this permit after its expiration date, the permittee shall apply for and obtain a new permit. *[62-620.610(6)]*
7. The permittee shall at all times properly operate and maintain the facility and systems of treatment and control, and related appurtenances, that are installed and used by the permittee to achieve compliance with the conditions of this permit. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to maintain or achieve compliance with the conditions of the permit. *[62-620.610(7)]*
8. This permit may be modified, revoked and reissued, or terminated for cause. The filing of a request by the permittee for a permit revision, revocation and reissuance, or termination, or a notification of planned changes or anticipated noncompliance does not stay any permit condition. *[62-620.610(8)]*
9. The permittee, by accepting this permit, specifically agrees to allow authorized Department personnel, including an authorized representative of the Department and authorized EPA personnel, when applicable, upon presentation of credentials or other documents as may be required by law, and at reasonable times, depending upon the nature of the concern being investigated, to:
  - a. Enter upon the permittee's premises where a regulated facility, system, or activity is located or conducted, or where records shall be kept under the conditions of this permit;
  - b. Have access to and copy any records that shall be kept under the conditions of this permit;

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- c. Inspect the facilities, equipment, practices, or operations regulated or required under this permit; and
- d. Sample or monitor any substances or parameters at any location necessary to assure compliance with this permit or Department rules.

*[62-620.610(9)]*

10. In accepting this permit, the permittee understands and agrees that all records, notes, monitoring data, and other information relating to the construction or operation of this permitted source which are submitted to the Department may be used by the Department as evidence in any enforcement case involving the permitted source arising under the Florida Statutes or Department rules, except as such use is proscribed by Section 403.111, Florida Statutes, or Rule 62-620.302, Florida Administrative Code. Such evidence shall only be used to the extent that it is consistent with the Florida Rules of Civil Procedure and applicable evidentiary rules. *[62-620.610(10)]*

11. When requested by the Department, the permittee shall within a reasonable time provide any information required by law which is needed to determine whether there is cause for revising, revoking and reissuing, or terminating this permit, or to determine compliance with the permit. The permittee shall also provide to the Department upon request copies of records required by this permit to be kept. If the permittee becomes aware of relevant facts that were not submitted or were incorrect in the permit application or in any report to the Department, such facts or information shall be promptly submitted or corrections promptly reported to the Department. *[62-620.610(11)]*

12. Unless specifically stated otherwise in Department rules, the permittee, in accepting this permit, agrees to comply with changes in Department rules and Florida Statutes after a reasonable time for compliance; provided, however, the permittee does not waive any other rights granted by Florida Statutes or Department rules. A reasonable time for compliance with a new or amended surface water quality standard, other than those standards addressed in Rule 62-302.500, F.A.C., shall include a reasonable time to obtain or be denied a mixing zone for the new or amended standard. *[62-620.610(12)]*

13. The permittee, in accepting this permit, agrees to pay the applicable regulatory program and surveillance fee in accordance with Rule 62-4.052, F.A.C. *[62-620.610(13)]*

14. This permit is transferable only upon Department approval in accordance with Rule 62-620.340, F.A.C. The permittee shall be liable for any noncompliance of the permitted activity until the transfer is approved by the Department. *[62-620.610(14)]*

15. The permittee shall give the Department written notice at least 60 days before inactivation or abandonment of a wastewater facility and shall specify what steps will be taken to safeguard public health and safety during and following inactivation or abandonment. *[62-620.610(15)]*

16. The permittee shall apply for a revision to the Department permit in accordance with Rules 62-620.300 and the Department of Environmental Protection Guide to Wastewater Permitting at least 90 days before construction of any planned substantial modifications to the permitted facility is to commence or with Rule 62-620.325(2) for minor modifications to the permitted facility. A revised permit shall be obtained before construction begins except as provided in Rule 62-620.300, F.A.C. *[62-620.610(16)]*

17. The permittee shall give advance notice to the Department of any planned changes in the permitted facility or activity which may result in noncompliance with permit requirements. The permittee shall be responsible for any and all damages which may result from the changes and may be subject to enforcement action by the Department for penalties or revocation of this permit. The notice shall include the following information:

- a. A description of the anticipated noncompliance;
- b. The period of the anticipated noncompliance, including dates and times; and
- c. Steps being taken to prevent future occurrence of the noncompliance.

*[62-620.610(17)]*

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18. Sampling and monitoring data shall be collected and analyzed in accordance with Rule 62-4.246, Chapters 62-160 and 62-601, F.A.C., and 40 CFR 136, as appropriate.
- Monitoring results shall be reported at the intervals specified elsewhere in this permit and shall be reported on a Discharge Monitoring Report (DMR), DEP Form 62-620.910(10).
  - If the permittee monitors any contaminant more frequently than required by the permit, using Department approved test procedures, the results of this monitoring shall be included in the calculation and reporting of the data submitted in the DMR.
  - Calculations for all limitations which require averaging of measurements shall use an arithmetic mean unless otherwise specified in this permit.
  - Any laboratory test required by this permit shall be performed by a laboratory that has been certified by the Department of Health (DOH) under Chapter 64E-1, F.A.C., where such certification is required by Rule 62-160.300, F.A.C. The laboratory must be certified for any specific method and analyte combination that is used to comply with this permit. For domestic wastewater facilities, the on-site test procedures specified in Rule 62-160.300(4), F.A.C., shall be performed by a laboratory certified test for those parameters or under the direction of an operator certified under Chapter 62-602, F.A.C.
  - Field activities including on-site tests and sample collection, whether performed by a laboratory or a certified operator, must follow the applicable procedures described in DEP-SOP-001/01 (January 2002). Alternate field procedures and laboratory methods may be used where they have been approved according to the requirements of Rules 62-160.220, and 62-160.330, F.A.C.

[62-620.610(18)]

19. Reports of compliance or noncompliance with, or any progress reports on, interim and final requirements contained in any compliance schedule detailed elsewhere in this permit shall be submitted no later than 14 days following each schedule date. [62-620.610(19)]
20. The permittee shall report to the Department any noncompliance which may endanger health or the environment. Any information shall be provided orally within 24 hours from the time the permittee becomes aware of the circumstances. A written submission shall also be provided within five days of the time the permittee becomes aware of the circumstances. The written submission shall contain: a description of the noncompliance and its cause; the period of noncompliance including exact dates and time, and if the noncompliance has not been corrected, the anticipated time it is expected to continue; and steps taken or planned to reduce, eliminate, and prevent recurrence of the noncompliance.
- The following shall be included as information which must be reported within 24 hours under this condition:
    - Any unanticipated bypass which causes any reclaimed water or effluent to exceed any permit limitation or results in an unpermitted discharge,
    - Any upset which causes any reclaimed water or the effluent to exceed any limitation in the permit,
    - Violation of a maximum daily discharge limitation for any of the pollutants specifically listed in the permit for such notice, and
    - Any unauthorized discharge to surface or ground waters.
  - Oral reports as required by this subsection shall be provided as follows:
    - For unauthorized releases or spills of treated or untreated wastewater reported pursuant to subparagraph a.4 that are in excess of 1,000 gallons per incident, or where information indicates that public health or the environment will be endangered, oral reports shall be provided to the Department by calling the **STATE WARNING POINT TOLL FREE NUMBER (800) 320-0519**, as soon as practical, but no later than 24 hours from the time the permittee becomes aware of the discharge. The permittee, to the extent known, shall provide the following information to the State Warning Point:

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- a) Name, address, and telephone number of person reporting;
- b) Name, address, and telephone number of permittee or responsible person for the discharge;
- c) Date and time of the discharge and status of discharge (ongoing or ceased);
- d) Characteristics of the wastewater spilled or released (untreated or treated, industrial or domestic wastewater);
- e) Estimated amount of the discharge;
- f) Location or address of the discharge;
- g) Source and cause of the discharge;
- h) Whether the discharge was contained on-site, and cleanup actions taken to date;
- i) Description of area affected by the discharge, including name of water body affected, if any; and
- j) Other persons or agencies contacted.

2. Oral reports, not otherwise required to be provided pursuant to subparagraph b.1 above, shall be provided to the Department within 24 hours from the time the permittee becomes aware of the circumstances.

c. If the oral report has been received within 24 hours, the noncompliance has been corrected, and the noncompliance did not endanger health or the environment, the Department shall waive the written report.

[62-620.610(20)]

21. The permittee shall report all instances of noncompliance not reported under Permit Conditions IX. 18. and 19. of this permit at the time monitoring reports are submitted. This report shall contain the same information required by Permit Condition IX. 20 of this permit. [62-620.610(21)]

22. Bypass Provisions.

- a. Bypass is prohibited, and the Department may take enforcement action against a permittee for bypass, unless the permittee affirmatively demonstrates that:
  1. Bypass was unavoidable to prevent loss of life, personal injury, or severe property damage; and
  2. There were no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime. This condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance; and
  3. The permittee submitted notices as required under Permit Condition IX. 22. b. of this permit.
- b. If the permittee knows in advance of the need for a bypass, it shall submit prior notice to the Department, if possible at least 10 days before the date of the bypass. The permittee shall submit notice of an unanticipated bypass within 24 hours of learning about the bypass as required in Permit Condition IX. 20. of this permit. A notice shall include a description of the bypass and its cause; the period of the bypass, including exact dates and times; if the bypass has not been corrected, the anticipated time it is expected to continue; and the steps taken or planned to reduce, eliminate, and prevent recurrence of the bypass.
- c. The Department shall approve an anticipated bypass, after considering its adverse effect, if the permittee demonstrates that it will meet the three conditions listed in Permit Condition IX. 22. a. 1. through 3. of this permit.
- d. A permittee may allow any bypass to occur which does not cause reclaimed water or effluent limitations to be exceeded if it is for essential maintenance to assure efficient operation. These bypasses are not subject to the provisions of Permit Condition IX. 22. a. through c. of this permit.

[62-620.610(22)]

FACILITY: Forest Lake Estates WWTF  
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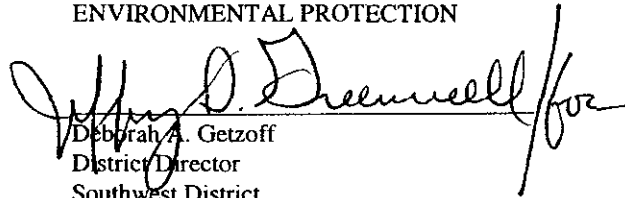
23. Upset Provisions

- a. A permittee who wishes to establish the affirmative defense of upset shall demonstrate, through properly signed contemporaneous operating logs, or other relevant evidence that:
  1. An upset occurred and that the permittee can identify the cause(s) of the upset;
  2. The permitted facility was at the time being properly operated;
  3. The permittee submitted notice of the upset as required in Permit Condition IX. 20. of this permit; and
  4. The permittee complied with any remedial measures required under Permit Condition IX. 5. of this permit.
- b. In any enforcement proceeding, the permittee seeking to establish the occurrence of an upset has the burden of proof.
- c. Before an enforcement proceeding is instituted, no representation made during the Department review of a claim that noncompliance was caused by an upset is final agency action subject to judicial review.

[62-620.610(23)]

Executed in Tampa, Florida.

STATE OF FLORIDA DEPARTMENT OF  
ENVIRONMENTAL PROTECTION



Deborah A. Getzoff  
District Director  
Southwest District  
3804 Coconut Palm Drive  
Tampa, FL 33619-1352

**Labrador Utilities, Inc.**

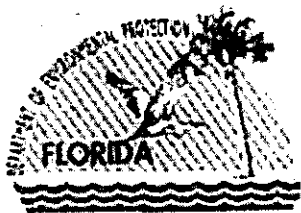
**Docket No.: 080249-WS**

**Pasco County**

**25.30.440 (7)  
NOTICES**

**Test Year Ended December 31, 2007**





Job Bush  
Governor

# Department of Environmental Protection

406 2006

Southwest District  
13051 North Telecom Parkway  
Temple Terrace, FL 33637-0926  
Telephone: 813-632-7600

*Call Bissett 7/6/06*

Colleen M. Castille  
Secretary

August 17, 2006

*cc: Mike  
Scotty  
John*

Mr. Patrick Flynn  
Regional Director  
Utilities, Inc. of Florida  
200 Weathersfield Avenue  
Altamonte Springs, FL 32714

Re: Warning Letter No. WL06-0021DWS1SWD  
Forest Lake Estates WWTF  
Facility ID No. FLA012801  
Pasco County

Dear Mr. Flynn:

The purpose of this letter is to advise you of possible violations of law for which Utilities, Inc. of Florida may be responsible, and to seek your cooperation in resolving the matter. A field inspection and file review on June 12, 2006 of Forest Lake Estates Wastewater Treatment Facility (WWTF) indicated that a violation of Florida Statutes and Rules may exist at the above-referenced facility. Department of Environmental Protection personnel observed the following:

1. On June 10, 2006, the operator reported that the maintenance crew had just finished a modification to the aeration basin, and lost part of a plug that caused sludge to discharge onto the ground. A file review revealed that this modification was done without a permit revision. Section 403.087, Florida Statutes, provides that a facility shall not be constructed, expanded, or modified without an appropriate and currently valid permit issued by the Department.
2. On June 10, 2006, the operator reported an overflow condition at the WWTF. On June 12, 2006, Department personnel observed that the aeration basin line between tanks A-1 and A-2 had plugged. The plugged line allowed raw sewage to be discharged onto the ground at the Forest Lake Estates WWTF and discharge off site. The operator failed to properly clean-up the effected areas. In addition, the operator reported overflow conditions on November 4, 2004, February 21, 2005 and March 29, 2006. Rule 62-600.740(2)(a), Florida Administrative Code, provides that the release or disposal of excreta, sewage, or other wastewater or domestic wastewater residuals without providing proper treatment approved by the Department is prohibited. Rule 62-600.410(6), Florida Administrative Code, provides that all facilities and equipment necessary for the treatment, reuse and disposal of domestic wastewater and domestic wastewater residuals shall be maintained, at a minimum, so as to function as intended.
3. Previously, the operator reported that the WWTF's four-inch PVC effluent discharge pipe to the off site spray field had broken six times between October 22, 2004 through March 30, 2005. Rule 62-600.410(6), Florida Administrative Code, provides that all facilities and equipment necessary for the treatment, reuse and disposal of domestic wastewater and domestic wastewater residuals shall be maintained, at a minimum, so as to function as intended.

*Must  
CLEAN UP OF  
SOILED AREA -*

"More Protection, Less Process"

Printed on recycled paper.

Mr. Patrick Flynn  
Warning Letter No. WL06-0021DW51SWD  
Facility ID No. FLA012801, Pasco County  
Page 2 of 2


4. On June 12, 2006, Department personnel detected a foul odor that permeated beyond the boundaries of the plant site. On July 3, 2006, Department personnel received 37 signed and notarized affidavits of odor nuisances. Rule 62-600.410(8), Florida Administrative Code, provides that in the event that the treatment facility's odor adversely affects neighboring developed areas, then corrective action shall be taken by the permittee.

The activities observed during the Department's field inspection, file review, and any other activities at this facility that may be contributing to violations of the aforementioned statutes or rules should be ceased. The operation of a facility in violation of state statutes or rules may result in liability for damages and restoration, and the administrative imposition of penalties up to \$10,000.00 pursuant to Section 403.121, Florida Statutes, or the judicial imposition of civil penalties up to \$10,000.00 per violation per day pursuant to Sections 403.141 and 403.161, Florida Statutes.

You are requested to contact Jerry E. Nichols at the Southwest District address or telephone number (813) 632-7600, extension 411, within 15 days of receipt of this Warning Letter to arrange a meeting to discuss this matter. The Department is interested in reviewing any facts you may have that will assist in determining whether any violations have occurred. You may bring anyone with you to the meeting that you feel could help resolve this matter.

Please be advised that this Warning Letter is part of an agency investigation, preliminary to agency action in accordance with Section 120.57(5), Florida Statutes. We look forward to your cooperation in completing the investigation and resolution of this matter.

Sincerely,



J. M. Farley  
Interim District Director  
Southwest District

JMF/jn

cc: Mr. Shan Rainey, Operator  
Mr. Tom Gucciardo, DEP

## INSPECTION FINDINGS

Facility Name: *Forest Lake Estates WWTF*

Facility ID: *FLA012801*

Inspection Type: *Follow-Up Inspection*

Date: *6/12/2006 at 1:11:00 PM*

### Facility Background:

Address: *41311 Paquette Way, Zephyrhills, FL 33540 - 7579, Pasco County*

Permit Information: *Wastewater Permit issued: 2/24/2005, and expires: 2/23/2010*

Treatment Summary: *Type III Extended Aeration*

Permitted Capacity: *0.216 MGD*

### 1. Permit: Significantly Out-of-Compliance

1.1 \*Observation: The permittee made modifications to the treatment trains without a permit revision.

### 2. Compliance Schedules: Not Evaluated

### 3. Laboratory: Not Evaluated

### 4. Sampling: Not Evaluated

### 5. Records and Reports: Not Evaluated

### 6. Facility Site Review: Out of Compliance

6.1 \*Observation: General - Foul odors permeated beyond the boundaries of the plant site at the time of the inspection.

### 7. Flow Measurement: Not Evaluated

### 8. Operation and Maintenance: Significantly Out-of-Compliance

8.1 \*Observation: General - The facility was not being operated and maintained in accordance with the description in the permit, as evidenced by the six effluent line breaks from October 2004 through March 2005 and the three other sludge spills from November 2004 through March 2006.

### 9. Effluent Quality: Not Evaluated

### 10. Effluent Disposal: Not Evaluated

### 11. Residuals/Sludge: Not Evaluated

### 12. Groundwater Quality: Not Evaluated

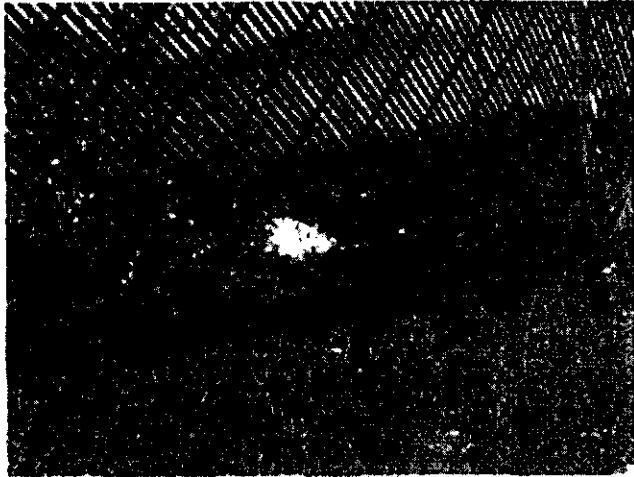
### 13. Other: Out of Compliance

13.1 \*Observation: It was raining at the time of the inspection.

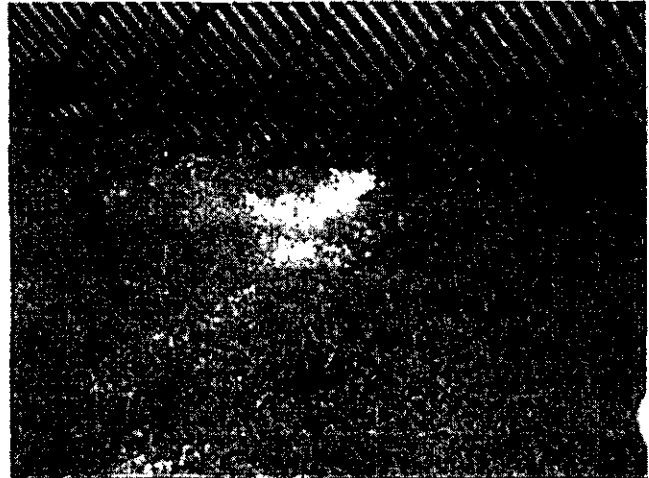
13.2 \*Observation: On the June 10, 2006, the operator reported a sludge discharge from the WWTF. The sludge discharged from the northwest corner of the WWTF and crossed two adjacent yards. Lime was applied to the effected areas. On June 12, 2006, Department personnel observed rainwater run-off was carrying the sludge to a storm

water collection ditch on the east side of the park. The response to the sludge spill was insufficient. The contaminated soil should be removed, leveled and grass replaced.

- 13.3 \*Observation: Department personal spoke with three residents near the WWTF. All three confirmed the odor problems from last week.
- 13.4 \*Observation: The operator has ordered chemicals to address the odor problems and that he would complete the clean up of the sludge.



#1 - View of sludge deposit under the west side of WWTF where sludge ran under fence.



#2 - View of sludge deposit under the north side of WWTF where sludge ran under fence.



#3 - View of the storm water collection ditch to the east of the WWTF.



#4 - Viewing north, the storm water collection ditch to the east of the WWTF.

**LABRADOR UTILITIES, INC.**

AN AFFILIATE OF UTILITIES, INC.

200 WEATHERSFIELD AVENUE  
ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES:  
2335 Sanders Road  
Northbrook, Illinois 60062  
Telephone: 847-498-6440

Telephone: 407-869-1919  
Florida: 800-272-1919  
Fax: 407-869-6961  
florida@utilitiesinc-usa.com

October 4, 2006

Mr. Jerry Nichols  
FDEP - Southwest District  
Wastewater Section  
13051 North Telecom Parkway  
Temple Terrace, FL 33637-0926

RE: Warning Letter No. WL06-0021DW51SWD  
Forest Lake Estates WWTF  
Facility ID # FLA012801

Dear Mr. Nichols:

As requested in our recent meeting with the Department on September 26, 2006 regarding the above referenced facility, the following actions have been taken. Please note the Department's comments reiterated in bold with the utility's response following.

- 1. On June 10, 2006, the operator reported that the maintenance crew had just finished a modification to the aeration basin, and lost part of a plug that caused sludge to discharge onto the ground. A file review revealed that this modification was done without a permit revision. Section 403.087, Florida Statutes, provides that a facility shall not be constructed, expanded, or modified without an appropriate and currently valid permit issued by the Department.**

Mr. Mark A. Veenstra, P.E., of McKim & Creed Engineering had contacted Ms. Stephanie Barrios of the Department in January 2005 describing intended improvements to the piping of the WWTF to provide more flexibility to operate the plant at lower seasonal flow times of the year. The Department was provided a letter from Mr. Veenstra stating that Ms. Barrios determined that she believed these were maintenance activities and no permit modification would be required. However, she did state that Labrador Utilities, Inc. had submitted the permit renewal for the plant and it was being reviewed by the Department and the improvements could be noted prior to permit issuance. Please note the final paragraph on the front page of the current permit which states that "Under this permit renewal, the wastewater plant will be re-piped to operate as a one, two, or three train process".

- 2. On June 10, 2006, the operator reported an overflow condition at the WWTF. On June 12, 2006, Department personnel observed that the aeration basin line between tanks A-1 and A-2 had plugged. The plugged**

**line allowed raw sewage to be discharged onto the ground at the Forest Lake Estates WWTF and discharge off site. The operator failed to properly clean-up the effected areas. In addition, the operator reported overflow conditions on November 4, 2004, February 21, 2005 and March 29, 2006. Rule 62-600.740(2), Florida Administrative Code provides that the release or disposal of excreta, sewage, or other wastewater or domestic wastewater residuals without providing proper treatment approved by the Department is prohibited. Rule 62-600.410(6) Florida Administrative Code provides that all facilities and equipment necessary for the treatment, reuse and disposal of domestic wastewater and domestic wastewater residuals shall be maintained at a minimum, so as to function as intended.**

It was determined that a plug or other piece of material from the maintenance construction project had lodged in the aeration transfer line between the A-1 and A-2 treatment trains. Upon arrival at the site, it was noted that the obstruction had cleared. Upon discovery of the discharge, utility personnel had spread lime in the affected areas until a more suitable removal could be arranged. On Monday, June 12, 2006, a contractor had provided services to remove sludge and soil from the affected area and replace soil and sod. The work was completed on June 14, 2006. The Department was provided a copy of the contractor invoice for services performed. The spills noted on November 4, 2004, February 21, 2005, and March 29, 2006 were attributed to the RAS discharge line failing. In April, 2006, an aluminum splash guard was installed to keep the RAS from spilling over the plant and onto the ground.

- 3. Previously, the operator reported that the WWTF's four-inch PVC effluent discharge pipe to the off site spray field had broken six times between October 22, 2004 through March 30, 2005. Rule 62-600.410(6), Florida Administrative Code, provides that all facilities and equipment necessary for the treatment, reuse and disposal of domestic wastewater and domestic wastewater residuals shall be maintained, at a minimum, so as to function as intended.**

A contractor had replaced three (3) 4" PVC 90's with mega-lugged Ducto 90's on the effluent discharge pipe during July-August of 2005. There has been no noted failures since the installation of the joint restraints. Copies of the contractor invoice have been provided to the Department.

- 4. On June 12, 2006, Department personnel detected a foul odor that permeated beyond the boundaries of the plant site. On July 3, 2006, Department personnel received 37 signed and notarized affidavits of odor nuisances. Rule 62-600.410(8), Florida Administrative Code, provides that in the event that the treatment facility's odor adversely affects neighboring developed areas, then corrective action shall be taken by the permittee.**

Mr. Jerry Nichols  
Forest Lake Estates WWTF  
Page Three

Utility personnel started utilizing the chemical Histosol OP-9840 for odor control at the headworks of the WWTF, starting the first week of July, 2006. After optimal dosage was obtained, it was noted that odors had decreased significantly. The Department was provided with an invoice for the purchase of Histosol.

We are planning some minor maintenance to enclose the Drum Screen, chute and install a drop tube system into the dumpster at the WWTF headworks. Our idea is to enclose the discharge from the screen and reduce any odors with the enclosure. Utility personnel have been in contact with neighboring customers, and no objectionable odors have been observed since the Histosol has been utilized for odor control.

We hope the Department finds this response adequate in addressing concerns related to this matter. If you should have any questions, please do not hesitate to contact me at (407) 869-8588, ext. 234, or Email at slhaws@uiwater.com.

Sincerely,

LABRADOR UTILITIES, INC.

Scotty L. Haws  
Regional Compliance & Safety Manager

EC: Patrick C. Flynn, Regional Director  
Mick Wilson, Regional Manager  
Lee Neal, Area Manager



**Labrador Utilities, Inc.**

**Docket No.: 080249-WS**

**Pasco County**

**25.30.440 (8)  
FIELD EMPLOYEES**

**Test Year Ended December 31, 2007**

**EMPLOYEES INVOLVED IN LABRADOR UTILITIES, INC. OPERATIONS  
TEST YEAR 2007 (January thru December)**

Patrick Flynn, Regional Director: Oversees all operations and employees in Florida.

Mike Wilson, Regional Manager: Manages operations and employees for all West Coast, North and South Florida operations. Mike Wilson oversees the day-to-day operations within the West Coast, North and South Florida areas.

Tony Wierzbicki, Project Manager: Manages all capital projects, inspects and monitors any developer activities or line extensions within the system.

Lee Neal, Area Manager: Supervises the day-to-day operations of the facilities on the West Coast and North Florida.

**Current Plant Operation Employees**

Jason Wright, Lead Operator: Jason holds *Class C drinking water treatment plant operator* and *Class C wastewater treatment plant operator* licenses and is responsible for overseeing the day-to-day operations of the Labrador water and wastewater facilities.

Kennedy Franklin, Field Technician: Kennedy holds no licensure and assists in completion of daily service orders, customer service response and after-hours emergency response.

**Facilities**

The minimum staffing requirement at the wastewater plant is 6 hours per day, 7 days per week, by a minimum Class C wastewater operator. The water plant must be staffed daily for 6 hours per day Monday through Friday and once each weekend by a minimum Class C water operator.

**Duties and Responsibilities**

- a) Responsible for performing treatment plant, collection system and transmission system operation and maintenance. Duties are to be completed in a reasonable and professional manner consistent with standard operating practices in order to comply with state and local regulatory rules and requirements. Must perform duties consistent with the protection of the public health and the environment.
- b) Perform responsible, efficient, and effective on-site management and supervision of all system functions.
- c) Submit complete, accurate and timely periodic plant operating reports.
- d) Report to the Permittee and the Department of Environmental Protection any serious plant or system breakdown or condition causing or likely to cause serious, inefficient or unsafe treatment or discharge of water or wastewater in a manner not authorized by the current permit.
- e) Submit accurate reports relative to treatment plant, collection system, and transmission system operation, including sampling and laboratory analysis.

- f) Maintain an operation and maintenance log for each plant, current to the last operation and maintenance task performed.
- g) Perform required preventative maintenance in conformance with equipment manufacturer recommendations. Repair or replace equipment or distribution and collection system components as needed to keep the facilities operating as permitted.
- h) Perform various service order functions including but not limited to the following: customer complaints; reading and checking meters; cross-connection inspections; installing or repairing the distribution, collection and disposal systems; installation of water meters.
- i) Maintain the visual aesthetics of the facilities in compliance with company standards, including grounds maintenance, fence repairs, site security, lighting fixtures, and general building upkeep.



**State of Florida**

**Department of Environmental Protection**

**OPERATOR CERTIFICATION PROGRAM**

**2000 BEAUFORT STONE ROAD, M.S. 3506**

**TALLAHASSEE, FLORIDA 32399-2400**

**(850)245-7500**

**JASON L. WRIGHT**

**10120 DOUGLAS OAKS CIRCLE APT. 102  
TAMPA, FL 33610**

**State of Florida**

**Department of Environmental Protection**

**LICENSE NO.: 0014592      DATE ISSUED: 10/23/2006**

**CLASS C DRINKING WATER TREATMENT PLANT OPERATOR**

**JASON L. WRIGHT**

**IS LICENSED UNDER PROVISIONS OF CHAPTER 403, FLORIDA STATUTES**

**VALID UNTIL: 4/30/2009**

**State of Florida**

**Department of Environmental Protection**

**ISSUED: 10/23/2006**

**LICENSE NO.: 0014592**

**THE CLASS C DRINKING WATER TREATMENT PLANT OPERATOR NAMED BELOW IS  
LICENSED UNDER THE PROVISIONS OF CHAPTER 403, FLORIDA STATUTES.**

**VALID UNTIL: 4/30/2009**

**JASON L. WRIGHT**

**JEB BUSH**

**COLLEEN M. CASTILL**



**State of Florida**

**Department of Environmental Protection**  
**OPERATOR CERTIFICATION PROGRAM**  
2600 BLAIR STONE ROAD, M.S. 3506  
TALLAHASSEE, FLORIDA 32399-2400  
(850)245-7500

**JASON L. WRIGHT**

**1804 RUDDER DRIVE**  
**VALRICO, FL 33594**

**State of Florida**

**Department of Environmental Protection**

**LICENSE NO.: 0013909      DATE ISSUED: 4/27/2007**

**CLASS C WASTEWATER TREATMENT PLANT OPERATOR**

**JASON L. WRIGHT**

**IS LICENSED UNDER PROVISIONS OF CHAPTER 403, FLORIDA STATUTES**

**VALID UNTIL: 4/30/2009**

**State of Florida**

**Department of Environmental Protection**

**ISSUED: 4/27/2007**

**LICENSE NO.: 0013909**

**THE CLASS C WASTEWATER TREATMENT PLANT OPERATOR NAMED BELOW IS  
LICENSED UNDER THE PROVISIONS OF CHAPTER 403, FLORIDA STATUTES.**

**VALID UNTIL: 4/30/2009**

**JASON L. WRIGHT**

**CHARLIE CRIST**

**MICHAEL W. SOLE**

**GOVERNOR**

**DISPLAY IS REQUIRED BY LAW**

**SECRETARY**

p.2

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Utilities, Inc

Aug 14 08 08:50a

**Labrador Utilities, Inc.**

**Docket No.: 080249-WS**

**Pasco County**

**25.30.440 (9)  
VEHICLES**

**Test Year Ended December 31, 2007**

Vehicle Schedule

Company: Labrador Utilities, Inc.

Docket No.: 080249-WS

Test Year Ended: December 31, 2007

Vehicle #	Year	Model	Serial Number	Driver	Position	Original Cost	Allocation Method
0803	2008	Chevy Colorado	1GCCS19E888113719	Chard, Ronald	Field Supervisor/Cross Connection Control	17,962.31	ERCs
0512	2005	Chevy Tahoe	1GNEC1358R199267	Flynn, Patrick C	Regional Director	37,478.51	ERCs
0304	2003	Chevy C15	1GCEC14X23Z115810	Franklin, Kennedy	Operator	19,372.92	ERCs
0729	2007	Chevy Trailblazer	1GNDS13S572108957	Haws, Scotty L	Regional Compliance & Safety Manager	29,355.64	ERCs
0825	2008	Chevy Silverado	2GCEC19C281204055	Neal, William Lee	Area Manager	22,388.38	ERCs
0427	2004	Chevy C15	1GCEC14X94Z275720	Wright, Jason	Operator	18,742.37	ERCs
0701	2007	Chevy Tahoe	1GNFK13007J125498	Yount, Darrin	Operations Director	39,156.49	ERCs
0651	2006	Chevy Tahoe	1GNEK13Z06R130226	Durham, Richard J	Regional Vice President	41,395.09	ERCs
0688	2006	Toyota Highlander	JTEEW21A060032524	Schiopu, Mircea	Mailroom Clerk	35,567.16	ERCs
0728	2007	Chevy Trailblazer	1GNDS13S672194103	Wilson, Michael	Regional Manager	28,711.49	ERCs

**Labrador Utilities, Inc.**

**Docket No.: 080249-WS**

**Pasco County**

**25.30.440 (10)  
CUSTOMER COMPLAINTS**

**Test Year Ended December 31, 2007**



## LABRADOR UTILITIES INC. - 2007 SERVICE ORDERS

Subdivision: 00693 Route:1 Service Order #: 173918  
Account # : 006930013832 Customer Name: KEFFER, THOMAS  
Address : 6232 RESIDENTIAL CIR Phone #: (813)782-8004  
Entry Date : 05/18/07 Serv Order Type: 48 Operator:  
Comments : Customer called saying sewer is backing up into his tub.  
**PAGE TO SHAN**

Due Date : 05/18/07 Cust/Comp Resp: CUST  
Resolution Date: 05/18/07  
Resolution : Customer issue - sewer backed up on customer side. Informed customer to consult a plumber.  
**SR/SH/KIM**

Subdivision : 00693 Route: 1 Service Order #: 195905  
Account # : 006930018801 Customer Name: BRADSTREET, JIM  
Address : 6130 UTOPIA DR Phone #: (813)783-7979  
Entry Date : 07/18/07 Serv Order Type: 37 Operator:  
Comments : Odor in area, possibly from tanks in area.  
Questions PH; 800-468-7979

**PAGED SCOTT**

Due Date : 07/18/07 Cust/Comp Resp: COMP  
Resolution Date : 07/18/07  
Resolution : R=119000 No odor indicated at time I went to residence.  
Talked to customer.  
**SH/KIM**

Subdivision : 00693 Route: 1 Service Order #: 200746  
Account # : 006930015521 Customer Name: PEREZ, WILLIAM  
Address : 5901 BENZ PL Phone #: (813) 788-2158  
Entry Date : 08/01/07 Serv Order Type: 28 Operator:  
Comments : Particles in water? Please inform customer of findings.  
**PAGED TO SCOTT H; 10:20AM**

Due Date :08/01/07 Cust/Comp Resp: CUST  
Resolution Date:08/01/07  
Resolution :R=913640 Customer not at home at this time.  
Tagged door no particles at 10:35AM.

**SH/KIM**

Subdivision : 00693 Route:1 Service Order #: 209400  
Account # : 006930014261 Customer Name: MCLEAN, DONALD  
Address : 6328 JESSUP DR Phone #: ( ) -  
Entry Date : 08/23/07 Serv Order Type: 36 Operator:  
Comments : A neighbor called (who is house sitting) To report a clogged sewer line. The house next door (6322 JESSUP DR) is also clogged.  
**CALL DAVID BENBIE 813-788-5579 IF ASSISTANCE IS NEEDED.**

Due Date : 08/23/07 Cust/Comp Resp: COMP  
Resolution Date: 08/23/07  
Resolution : R=465140 Out to unstop sew line on Utilities' side.  
Completed.

**SH/KIM**

## LABRADOR UTILITIES INC. - 2007 SERVICE ORDERS

Subdivision : 00693                      Route: 1                      Service Order #: 225506  
Account #    : 006930011382 Customer Name: AUFFREY, NORMAN J.  
Address      : 6207 TWILIGHT DR                      Phone #: (813)715-0746  
Entry Date   : 10/08/07                      Serv Order Type: 29                      Operator:  
Comments     : Customer called and complained that her laundry water turned the  
clothes brown.  
**PAGED JEFF F.**

Due Date        : 10/08/07                      Cust/Comp Resp: COMP  
Resolution Date: 10/08/07  
Resolution      : R=76860 - Gave customer Red Out.  
**SH/KIM**

Subdivision : 00693                      Route:1                      Service Order #: 225633  
Account #    : 006930012251 Customer Name : REID, TED  
Address      : 6031 TWILIGHT DR                      Phone #: (813)783-7677  
Entry Date   : 10/08/07                      Serv Order Type : 29                      Operator:  
Comments     : Customer's laundry turned brown due to our water.    Paged Jeff F.  
Please bring customer some of that Brown-Be Gone.

Due Date        : 10/08/07                      Cust/Comp Resp: COMP  
Resolution Date: 10/08/07  
Resolution      : R=47630 - Gave Customer Red-B-Gone.  
**SH/KIM**

Subdivision : 00693                      Route: 1                      Service Order#: 225776  
Account #    : 006930011402 Customer Name: ADAMS, JAMES R  
Address      : 6155 TWILIGHT DR                      Phone#: (902) 454-6768  
Entry Date   : 10/08/07                      Serv Order Type: 29                      Operator:  
Comments     : Mr. called saying our staff was flushing today. He washed a load  
of clothes and due to the flushing his clothes are 'red'.  
**PAGED TO JEFF F.**

Due Date        : 10/08/07                      Cust/Comp Resp: COMP  
Resolution Date: 10/08/07  
Resolution      : R=58600 - Gave customer Red-B-Gone.  
**SH/KIM**

Subdivision : 00693                      Route: 1                      Service Order #: 229469  
Account #    : 006930011751 Customer Name: RILEY, JOHN  
Address      : 6062 SPRING LAKE CIR                      Phone #: (813) 715-0152  
Entry Date   : 10/17/07                      Serv Order Type: 36                      Operator:  
Comments     : Clogged sewer on our end.  
**PAGED TO JEFF F; 1:10PM**

Due Date        : 10/17/07                      Cust/Comp Resp: COMP  
Resolution Date: 10/17/07  
Resolution      : KBH cleared sewer line.  
**JF/KIM**

Subdivision : 00693                      Route: 1                      Service Order #: 229934  
Account #    : 006930015963 Customer Name: FARR, RONALD  
Address      : 5824 NAPLES DR                      Phone #: (802) 233-6568  
Entry Date   : 10/18/07                      Serv Order Type : 36                      Operator:  
Comments     : Clogged sewer cap blew off.  
**PAGED TO JEFF F; 9AM**

**LABRADOR UTILITIES INC. - 2007 SERVICE ORDERS**

Due Date : 10/18/07 Cust/Comp Resp: COMP  
Resolution Date: 10/18/07  
Resolution : R=KBH Unclogged sewer.  
**SH/KIM**

Subdivision : 00693 Route: 1 Service Order #: 235727  
Account # : 006930015521 Customer Name: PEREZ, WILLIAM  
Address : 5901 BENZ PL Phone #: (813) 788-2158  
Entry Date : 11/02/07 Serv Order Type : 29 Operator:  
Comments : Customer very upset that water is yellow again. She feels that someone is not doing their job and this issue needs tending to, she said.  
**PAGED JEFF F**

Due Date : 11/02/07 Cust/Comp Resp: CUST  
Resolution Date: 11/02/07  
Resolution : Spoke with customer. No discoloration at time of arrival.  
**JF/KIM**

Subdivision: 00693 Route: 1 Service Order #: 236202  
Account # : 006930017322 Customer Name : ZINK, JOHN F  
Address : 5704 VIAU WAY Phone #: (813) 469-4635  
Entry Date : 11/05/07 Serv Order Type: 43 Operator:  
Comments : Customer utilizes water meter curb stop when entering and leaving state. (Advised him that he should not be doing this-CO. Meter) He has no water and says that the valve is in the ON position.  
**Dispatched call to Jeff F.**

Due Date : 11/05/07 Cust/Comp Resp: CUST  
Resolution Date: 11/05/07  
Resolution : Customer house valve was in OFF position. Advised how to fix and explained to call us for T/on and T/off.  
**JF/KIM**

Subdivision : 00693 Route: 1 Service Order #: 239020  
Account # : 006930018211 Customer Name: BALLIETTE, CURT  
Address : 6215 UTOPIA DR Phone #: (813)715-0060  
Entry Date : 11/12/07 Serv Order Type: 43 Operator:  
Comments : Customer called due to no water.  
**PAGED TO SCOTT H**

Due Date : 11/12/07 Cust/Comp Resp: CUST  
Resolution Date: 11/12/07  
Resolution : R=179410 - Customer has leak under house. Has been repaired.  
**SH/KIM**

Subdivision : 00693 Route: 1 Service Order #: 241348  
Account # : 006930018073 Customer Name: JOHNSTON, PORTER  
Address : 6061 UTOPIA DR Phone #: (813)780-9895  
Entry Date : 11/19/07 Serv Order Type: 32 Operator:  
Comments : Ms. Called due to the odor of her water. She said the plant smells bad and now her water smells like creek water.

Due Date : 11/20/07 Cust/Comp Resp: CUST  
Resolution Date: 11/20/07  
Resolution : Spoke with customer. Mr. no discoloration. Will flush line for possible odor.  
**JF/KIM**

**LABRADOR UTILITIES INC. - 2007 SERVICE ORDERS**

Subdivision : 00693            Route: 1            Service Order #: 243697  
Account # : 006930018073 Customer Name: JOHNSTON, PORTER  
Address : 6061 UTOPIA DR            Phone #: (813)780-9895  
Entry Date : 11/27/07            Serv Order Type: 37            Operator:  
Comments : 11/26/07 Customer called after hours to the answering service  
because odor coming from sewer treatment plant.  
**PAGED TO ONCALL - PLEASE RESOLVE**

Due Date : 11/28/07            Cust/Comp Resp: COMP  
Resolution Date: 11/28/07  
Resolution : R=200212 No odor  
**SH/KIM**

Subdivision : 00693            Route: 1            Service Order #:250270  
Account # : 006930012954 Customer Name: DAVIS, JANET D  
Address : 6036 PRESIDENTIAL CIR            Phone #: (352)345-4677  
Entry Date : 12/17/07            Serv Order Type: 47            Operator:  
Comments : 11/12/07 READ 542910  
          12/07/07 READ 548240 H/C

Due Date : 12/18/07            Cust/Comp Resp: COMP  
Resolution Date: 12/18/07  
Resolution : R=550940 Leak on customer side in box. Tagged.  
**SH/KIM**

Subdivision : 00693            Route: 1            Service Order#: 250492  
Account # : 006930018073 Customer Name: JOHNSTON, PORTER  
Address : 6061 UTOPIA DR            Phone #: (813) 780-9895  
Entry Date : 12/17/07            Serv Order Type: 43            Operator:  
Comments : 12/16/07 - Customer called the Answering Service after hours due  
to \*\*\*\*\*no water\*\*\*\*\*. Paged to OnCall.  
**PLEASE RESOLVE**

Due Date : 12/16/07            Cust/Comp Resp: COMP  
Resolution Date: 12/16/07  
Resolution : Line repaired. All valves open.  
**SH/KIM**

Subdivision : 00693            Route: 1            Service Order #: 250494  
Account # : 006930017031 Customer Name: MCGINNIS, RUSSELL  
Address : 5731 VIAU WAY            Phone #: (813) 788-4884  
Entry Date : 12/17/07            Serv Order Type: 43            Operator:  
Comments : 12/16/07 - Customer called due to no water/power to the answering  
service. Paged to OnCall.  
**PLEASE RESOLVE**

Due Date : 12/16/07            Cust/Comp Resp: COMP  
Resolution Date: 12/16/07  
Resolution : Line repaired. All lines open.  
**SH/KIM**

## LABRADOR UTILITIES INC. - 2007 SERVICE ORDERS

Subdivision : 00693      Route:      Service Order #: 250496  
Account # : 006930000000      Customer Name:  
Address :      Phone #:  
Entry Date : 12/17/07      Serv Order Type :43      Operator:  
Comments : 12/16/07 - Customer called from Benz Dr., Viau Way, Utopia Drl,  
Whitmer Dr., & Forest Lake Drive due to no water. No power, generator not  
running. Wanted to know if boil advisory will be for the park.  
CUSTOMER CALLED FROM BENZ DR, VIAU WAY, UTOPIA DR,  
**PAGED TO ONCALL PLEASE RESOLVE**

Due Date : 12/16/07      Cust/Comp Resp: COMP  
Resolution Date: 12/16/07  
Resolution : Line repaired all valves open.  
**SH/KIM**

Subdivision : 00693      Route: 1      Service Order #: 128581  
Account # : 006930010702      Customer Name: HODGE, GREGORY W  
Address : 6365 Presidential Circle      Phone #: (218) 254-5874  
Entry Date : 01/05/07      Serv Order Type: 27      Operator:  
Comments : Customer says that pipe at meter is broken.  
**PAGED TO SHAN R**

Due Date : 01/05/07      Cust/Comp Resp: CUST  
Resolution Date: 01/05/07  
Resolution : R=13630 Customer's problem on their side not ours.  
**SR/KIM**

Subdivision : 00693      Route: 1      Service Order #: 128826  
Account # : 006930013511      Customer Name: CONN, DON  
Address : 6208 FOREST LAKE DR      Phone #: (813)779-1589  
Entry Date : 01/05/07      Serv Order Type: 33      Operator:  
Comments : Customer sent in note due to hole is in driveway that we caused  
and repair needs to be fixed ASAP. Customer is not happy with results of meter  
installation and how the driveway was left.

Due Date : 01/08/07      Cust/Comp Resp: COMP  
Resolution Date: 01/08/07  
Resolution : R=34470 Will consult with Manager to come up with solution to  
issue.  
**SR/KIM**

Subdivision : 00693      Route: 1      Service Order #: 128889  
Account # : 006930015454      Customer Name: O'BRIEN, BARBARA K  
Address : 5921 TWILIGHT DR      Phone #: (813) 788-1787  
Entry Date : 01/08/07      Serv Order Type: 28      Operator:  
Comments : Please check water pressure for customer. Please go in AM for  
someone will be home if not Tag door w/findings.

Due Date : 01/09/07      Cust/Comp Resp: CUST  
Resolution Date: 01/09/07  
Resolution : R=200590 Pressure on Utilities side is good. Customer has  
pressure issue.  
**SR/KIM**

## LABRADOR UTILITIES INC. - 2007 SERVICE ORDERS

Subdivision : 00693            Route: 1            Service Order #:130419  
Account #    : 006930012161 Customer Name: MATTHEWS, NANCY S  
Address      : 6243 SPRING LAKE CIR            Phone#: (813) 779-9099  
Entry Date   : 01/11/07            Serv Order Type: 3            Operator:  
Comments     : Customer had a broken water line under the mobile home.  
Requested sewer leak adjustment. Adjust account for 3 billing periods  
(Nov/Dec/Jan).

Due Date        : 01/11/07            Cust/Comp Resp: COMP  
Resolution Date: 01/11/07  
Resolution      : Account adjusted for Nov/Dec and upcoming Jan bills:  
                  Nov Adjusted for 3140 gallons  
                  Dec adjusted for 1230 gallons  
                  Jan adjusted for 16080 gallons (3450 gals due to sewer cap)  
                  Total adjustment - \$83.91 (20450 gals)  
                  Adjustment okay per Adrienne.

**KS**

Subdivision : 00693            Route: 1            Service Order #: 134011  
Account #    : 006930011791 Customer Name: GRAHAM, ED  
Address      : 6074 Spring Lake Circle            Phone: (813) 782-1787  
Entry Date   : 01/22/07            Serv Order Type: 39 Operator:  
Comments     : L/S is alarming, per customer.

**PAGED TO SR.**

Due Date        : 01/22/07            Cust/Comp Resp: COMP  
Resolution Date: 01/22/07  
Resolution      : No alarm. All is okay.

**SR/KIM**

Subdivision : 00693            Route: 1            Service Order #: 138101  
Account #    : 006930012801 Customer Name: CHAPMAN, DONALD D  
Address      : 6025 PRESIDENTIAL CIR            Phone #: (813) 782-5950  
Entry Date   : 02/02/07            Serv Order Type: 28            Operator:  
Comments     : 2/1/07 Customer called the answering service after hours due to  
low pressure in toilets. Paged to On Call. Please resolve.

Due Date        : 02/02/07            Cust/Comp Resp: CUST  
Resolution Date: 02/02/07  
Resolution      : Per the OnCall person, issue was the customer's.

**SR/KIM**

R=483650 Tested pressure to house 60PSI, Customer called  
plumber for sink cleaning.

**SH/KIM**

Subdivision : 00693            Route: 1            Service Order#: 140069  
Account #    : 006930012161 Customer Name: MATTHEWS, NANCY S  
Address      : 6243 SPRING LAKE CIR            Phone #: (813) 779-9099  
Entry Date   : 02/08/07            Serv Order Type: 30            Operator:  
Comments     : Customer called due to sand in water lines. Plumber is out  
trying to repair fixture in bathroom and sand is showing in lines.

**PAGED TO KS**

**LABRADOR UTILITIES INC. - 2007 SERVICE ORDERS**

Due Date : 02/08/07 Cust/Comp Resp: COMP  
Resolution Date: 02/08/07  
Resolution : R=48590 No leaks.  
**SH/KIM**

Subdivision : 00693 Route: 1 Service Order #: 140648  
Account # : 006930010861 Customer Name: SAWTELLE, CLIFFORD  
Address : 6346 FOREST LAKE DR Phone #: (813) 783-7961  
Entry Date : 02/09/07 Serv Order Type: 29 Operator:  
Comments : Ms. Called due to yellow water. She was calling for everyone in  
the whole park, she said.  
**PAGED TO SHAN**

Due Date : 02/09/07 Cust/Comp Resp: COMP  
Resolution Date: 02/09/07  
Resolution : Spoke with park maint. Emergency repair made by KBH to  
hydrant.  
**SR/KIM**

Subdivision : 00693 Route: 1 Service Order #: 140776  
Account # : 006930011921 Customer Name: JOHNSON, BEV  
Address : 6143 Spring Lake Circle Phone #: (813) 715-7036  
Entry Date : 02/09/07 Serv Order Type: 29 Operator:  
Comments : Customer has 'rust' colored water. She has also stated that she  
has done a load of laundry that is now brown. Please supply customer with Red-  
Be-Gone.  
**PAGED TO SHAN R. GAVE TELEPHONE # TO SHAN TO CALL CUSTOMER.**

Due Date : 02/09/07 Cust/Comp Resp: COMP  
Resolution Date: 02/09/07  
Resolution : R=27050 Gave customer rust and iron stain remover. Red-B-  
Gone.  
**SR/KIM**

Subdivision : 00693 Route: 1 Service Order # :141450  
Account # : 006930010981 Customer Name: WNOROWSKI, VINNEY  
Address : 6343 SPRING LAKE CIR Phone #: (813) 715-7568  
Entry Date : 02/13/07 Serv Order Type: 30 Operator:  
Comments : Son called due to sand in piping due to flushing the area.  
**PAGED TO SHAN**

Due Date : 02/13/07 Cust/Comp Resp: COMP  
Resolution Date: 02/13/07  
Resolution : 02/14/07 Flushed lines inside home and at hydrant. Start read  
26730, Stop Read 26950. Give customer 250 gals adjustment. From Cons to Bill  
at Bill time.  
**SH/EC**

Subdivision : 00693 Route: 1 Service Order # : 145188  
Account # : 006930010771 Customer Name: MATANI, DOM  
Address : 6401 FOREST LAKE DR Phone #: (813) 783-1986  
Entry Date : 02/23/07 Serv Order Type: 32 Operator:  
Comments : Customer says water has a bad taste and odor. Please check.  
**PAGED SHAN**

**LABRADOR UTILITIES INC. - 2007 SERVICE ORDERS**

Due Date : 02/23/07 Cust/Comp Resp: CUST  
Resolution Date: 02/23/07  
Resolution : R=99080 Water tested, no bad taste or odor. CL2 RES 2.2  
**SH/KIM**

Subdivision : 00693 Route: 1 Service Order #: 152158  
Account # : 006930012592 Customer Name: ROBERTS, EDWARD C  
Address : 6029 FOREST LAKE DR Phone #: (413) 626-9589  
Entry Date : 03/16/07 Serv Order Type : 49 Operator:  
Comments : Take reading. Turn on for new AM Appointment.

Due Date : 03/19/07 Cust/Comp Resp: COMP  
Resolution Date: 03/19/07  
Resolution : Finaled last dash with correct service order. This order is  
in error. Water was turned on at this residence already. New was not there to  
see water on. The final order for Dash-1 type needed to be a 12 for final  
accounts.  
**KIM**

Subdivision : 00693 Route: 1 Service Order #: 154911  
Account # : 006930016721 Customer Name: BURNHAM, SKIP  
Address : 5862 NAPLES DR Phone #: (813) 783-3619  
Entry Date : 03/26/07 Serv Order Type: 37 Operator:  
Comments : Customer states the whole area has a sewer-like smell.  
**PAGED SHAN**

Due Date : 03/26/07 Cust/Comp Resp: COMP  
Resolution Date: 03/26/07  
Resolution : Odor due to blower tripped @ WWTP. Blower has been reset.  
**SR/KIM**

Subdivision : 00693 Route : 1 Service Order #: 154925  
Account # : 006930018041 Customer Name: HESLINGA, KLAAS  
Address : 6053 UTOPIA DR Phone #: (813) 783-6473  
Entry Date : 03/26/07 Serv Order Type: 37 Operator:  
Comments : Customer complaining of bad sewer smell.  
**PAGED SHAN**

Due Date : 03/26/07 Cust/Comp Resp: COMP  
Resolution Date : 03/26/07  
Resolution : Odor due to blower tripped @ WWTP. Reset Blower.  
**SR/KIM**

Subdivision : 00693 Route: 1 Service Order #: 155120  
Account # : 006930018032 Customer Name : GADD , RAYMOND  
Address : 6051 UTOPIA DR Phone #: (813) 783-2577  
Entry Date : 03/26/07 Serv Order Type: 37 Operator:  
Comments : Customer says that waste water plant near home has such a  
horrible odor that she can't even open her windows or go outside.  
**PAGED TO SHAN R.**

Due Date : 03/26/07 Cust/Comp Resp: COMP  
Resolution Date: 03/26/07  
Resolution : Odor due to blower tripping @ WWTP. Blower has been reset.  
**SR/KIM**



LABRADOR UTILITIES INC. - 2007 SERVICE ORDERS

Subdivision : 00693            Route: 1            Service Order #: 155245  
Account #    : 006930018021 Customer Name: PARKER-GOOD, DOROTHY  
Address      : 6049 UTOPIA DR            Phone #: (813) 783-1691  
Entry Date   : 03/26/07            Serv Order Type: 37            Operator:  
Comments     : Customer complaining of sewer smell all over again. They could  
not sleep last night due to the stench again.

**PAGED SHAN**

Due Date        : 03/26/07            Cust/Comp Resp: COMP  
Resolution Date: 03/26/07  
Resolution      : Due to blower tripping @ WWTP blower has been reset.  
**SR/KIM**

Subdivision : 00693            Route: 1            Service Order #: 156960  
Account #    : 006930017132 Customer Name: NORQUAY            , DAVE  
Address      : 5721 VIAU WAY            Phone #: (905) 274-4913  
Entry Date   : 03/30/07            Serv Order Type: 29            Operator:  
Comments     : Water has sand in it. Please resolve and tag with findings.

Due Date        : 04/12/07            Cust/Comp Resp: COMP  
Resolution Date: 04/12/07  
Resolution      : Per customer, issue resolved.  
**SH/KIM**

4/11/07- Has residue in pipes still and Field informed customer we would be  
back out 4/2/07. Please resolve and notify of findings to customer.

HAS RESIDUE IN PIPES SITLL AND FIELD INFORMED CUSTOMER WE WOULD

**PAGED TO SHAN; 10:06AM-D**

R=668630 Spoke to customer 0 Customer issue calcium build up in lines and hot  
water heater.

**SR/KIM**

Subdivision : 00693            Route: 1            Service Order #: 157715  
Account #    : 006930018073 Customer Name : JOHNSTON, PORTER  
Address      : 6061 UTOPIA DR            Phone #: (813) 780-9895  
Entry Date   : 04/03/07            Serv Order Type: 37            Operator:  
Comments     : Sewer smell very bad still from plant behind her house.  
**PAGED TO SHAN; 8:37AM**

Due Date        : 04/03/07            Cust/Comp Resp: COMP  
Resolution Date: 04/03/07  
Resolution      : Odor due to tripping of surge pump. Surge pump now  
operational. Odor will cease.  
**SR/KIM**

Subdivision : 00693            Route: 1            Service Order #: 158608  
Account #    : 006930012831 Customer Name: MADDEN, GUS  
Address      : 6057 FOREST LAKE DR            Phone #: (813) 788-5226  
Entry Date   : 04/05/07            Serv Order Type: 33            Operator:  
Comments     : Customer called complaining about sewer pipe causing dip in front  
yard along the middle of the lawn. Please check out. Customer sys has to add  
dirt and sod every two years. Let customer know of findings.

## LABRADOR UTILITIES INC. - 2007 SERVICE ORDERS

Due Date : 04/06/07 Cust/Comp Resp: COMP  
Resolution Date: 04/06/07  
Resolution : No leaks on sewer link. No repair needed.  
**SH/KIM**

Subdivision : 00693 Route: 1 Service Order # 163461  
Account # : 006930014232 Customer Name: GRANGAARD, ORRIN  
Address : 6344 JESSUP DR Phone #: (563) 568-4223  
Entry Date : 04/19/07 Serv Order Type : 47 Operator:  
Comments : 3/9/07 R=748870  
4/9/07 R=756170 H/C ANY LEAKS

Due Date : 04/18/07 Cust/Comp Resp: CUST  
Resolution Date: 04/18/07  
Resolution : R=758750 Leak on customer side. Tagged door. Meter leak was found during MVR for billing.  
**SH/KIM**

Subdivision : 00693 Route: 1 Service Order #: 165976  
Account # : 006930014022 Customer Name: SLANAKER, DAVID  
Address : 6241 JESSUP DR Phone #: (813) 782-5298  
Entry Date : 04/26/07 Serv Order Type: 29 Operator:  
Comments : Water brown and in laundry. Please bring ironout to remove brown from clothes.  
**PAGED TO SHAN; he said to fax S.O. and per Scott Harppter, they did have issues on 4/25/07 and it would have caused this problem. 9:09 AM**

Due Date : 04/26/07 Cust/Comp Resp: COMP  
Resolution Date: 04/26/07  
Resolution : R=725790 Customer had no issues. Spoke to customer.  
**SH/KIM**

Subdivision : 00693 Route: 1 Service Order #: 167178  
Account # : 006930017213 Customer Name: DEANER, KURT  
Address : 5714 VIAU WAY Phone #: (813) 788-8258  
Entry Date : 04/30/07 Serv Order Type: 28 Operator:  
Comments : Just called about low water pressure. Please check meter for leaks and also meet with customer. Appointment for \*\*AM\*\*. Thanks

Due Date : 05/01/07 Cust/Comp Resp: CUST  
Resolution Date: 05/01/07  
Resolution : R=306290 Spoke with the customer. Issue on customer side.  
**SR/KIM**

Subdivision : 00693 Route: 1 Service Order #: 168395  
Account # : 006930018073 Customer Name: JOHNSTON, PORTER  
Address : 6061 UTOPIA DR Phone # (813) 780-9895  
Entry Date : 05/02/07 Serv Order Type: 32 Operator:  
Comments : 4/28/07 - Customer called the Answering Service due to water smells.  
**PAGED TO ONCALL, PLEASE RESOLVE**

Due Date : 05/03/07 Cust/Comp Resp: COMP  
Resolution Date: 05/03/07  
Resolution : Lee N and Shan R spoke with customer. Customer is satisfied.  
**AM/LN/SR/EC**