

State of Florida



Public Service Commission

CAPITAL CIRCLE OFFICE CENTER • 2540 SHUMARD OAK BOULEVARD
TALLAHASSEE, FLORIDA 32399-0850

-M-E-M-O-R-A-N-D-U-M-

DATE: September 16, 2011
TO: Ann Cole, Commission Clerk, Office of Commission Clerk
FROM: Melissa C. Jones-Alexis, Regulatory Analyst II, Division of Economic Regulation *MCA*
RE: Docket No. 110021-WS, Application for certificates to provide water and wastewater service in Lake County by COL Utility Systems, L.L.C.

Please add the attached Florida Department of Environmental Protection compliance documentation with regard to COL Utility Systems, L.L.C.'s water and wastewater facilities to the above-reference docket. Thank you.

Attachment

cc: ECR (Walden)
GCL (Klancke)

RECEIVED-FPSC
11 SEP 16 PM 3:37
COMMISSION
CLERK

DOCUMENT NUMBER-DATE

06680 SEP 16 =

FPSC-COMMISSION CLERK



Florida Department of Environmental Protection

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

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

STATE OF FLORIDA DOMESTIC WASTEWATER FACILITY PERMIT

PERMITTEE:

Equity Lifestyle Properties Inc/
MHC Grand Island Resort LLC

RESPONSIBLE OFFICIAL:

Brad Nelson
5100 W. Lemon St., Suite 308
Tampa FL 33609

(352) 589-8300

PERMIT NUMBER: FLA010573-007
FILE NUMBER: FLA010573-007-DW3P
ISSUANCE DATE: November 12, 2009
EXPIRATION DATE: November 9, 2014

FACILITY:

Grand Island Mobile Home Park WWTF
36121 Plum Ave
Grand Island, FL 32735-9241
Lake County
Latitude: 28°52' 28.95" N Longitude: 81°44' 10.74" W

This permit is issued under the provisions of Chapter 403, Florida Statutes (F.S.), and applicable rules of the Florida Administrative Code (F.A.C.). This permit does not constitute authorization to discharge wastewater other than as expressly stated in this permit. The above named permittee is hereby authorized to operate the facilities in accordance with the documents attached hereto and specifically described as follows:

WASTEWATER TREATMENT:

An existing 0.035 MGD annual average daily flow (AADF) permitted capacity extended aeration domestic wastewater treatment plant consisting of flow equalization, influent screening, aeration, secondary clarification, chlorination and aerobic digestion of residuals.

REUSE OR DISPOSAL:

Land Application R-001: An existing 0.035 MGD AADF permitted capacity rapid infiltration basin (RIB) system R-001 consists of two rapid infiltration basins (RIBs) with a total wetted area of 0.26 acres located approximately at latitude 28°52' 29" N, Longitude: 81°44' 11" W.

IN ACCORDANCE WITH: The limitations, monitoring requirements, and other conditions set forth in this cover sheet and Part I through Part IX on pages 1 through 15 of this permit.

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island
Resort LLC
FACILITY: Grand Island Mobile Home Park WWTF

PERMIT NUMBER: FLA010573-007
EXPIRATION DATE: November 9, 2014

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 and reported in accordance with condition I.B.7

Parameter	Units	Reclaimed Water Limitations			Monitoring Requirements			Notes
		Max/Min	Limit	Statistical Basis	Frequency of Monitoring	Sample Type	Monitoring Site Number	
Flow	MGD	Max Max	0.035 Report	Annual Average Monthly Average	5 Days/Week	Elapsed Time Measurement on Pump	FLW-1	See I.A.3
BOD, Carbonaceous 5 day, 20C	mg/L	Max Max Max Max	20.0 30.0 45.0 60.0	Annual Average Monthly Average Weekly Average Single Sample	Monthly	Grab	EFA-1	
Solids, Total Suspended	mg/L	Max Max Max Max	20.0 30.0 45.0 60.0	Annual Average Monthly Average Weekly Average Single Sample	Monthly	Grab	EFA-1	
Coliform, Fecal	#/100mL	Max Max Max	200 200 800	Annual Average Monthly Geometric Mean Single Sample	Monthly	Grab	EFA-1	See I.A.4
pH	s.u.	Min Max	6.0 8.5	Single Sample Single Sample	5 Days/Week	Grab	EFA-1	
Chlorine, Total Residual (For Disinfection)	mg/L	Min	0.5	Single Sample	5 Days/Week	Grab	EFA-1	See I.A.5
Nitrogen, Nitrate, Total (as N)	mg/L	Max	12.0	Single Sample	Annually	Grab	EFA-1	See I.A.6

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island
Resort LLC
FACILITY: Grand Island Mobile Home Park WWTF

PERMIT NUMBER: FLA010573-007
EXPIRATION DATE: November 9, 2014

2. Reclaimed water samples shall be taken at the monitoring site locations listed in Permit Condition I.A.1. and as described below:

Monitoring Site Number	Description of Monitoring Site
FLW-1	Flow
EFA-1	Chlorine contact chamber effluent

3. An elapsed time measurement on pumps shall be utilized to measure flow and calibrated at least once every 12 months. [62-601.200(17) and .500(6)]
4. The effluent limitation for the monthly geometric mean for fecal coliform is only applicable if 10 or more values are reported. If fewer than 10 values are reported, the monthly geometric mean shall be calculated and reported on the Discharge Monitoring Report. [62-600.440(4)(c)]
5. Total residual chlorine must be maintained for a minimum contact time of 15 minutes based on peak hourly flow. [62-610.510, 62-600.440(4)(b) and (5)(b)]
6. Nitrate nitrogen (NO₃) concentration in the water discharged to the land application system shall not exceed 12.0 mg/L, or as required to comply with Rule 62-610.510, F.A.C. If the facility exceeds this limit, the Department may require future groundwater monitoring or modification to the treatment facility to remove nitrogen. [62-610.510]

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island
Resort LLC
FACILITY: Grand Island Mobile Home Park WWTF

PERMIT NUMBER: FLA010573-007
EXPIRATION DATE: November 9, 2014

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 and reported in accordance with condition I.B.7.:

Parameter	Units	Max/Min	Limitations		Monitoring Requirements			Notes
			Limit	Statistical Basis	Frequency of Analysis	Sample Type	Monitoring Site Number	
Flow	MGD	Max Max Max	0.035 Report Report	Annual Average Monthly Average Quarterly Average	5 Days/Week	Elapsed Time Measurement on Pump	FLW-1	See I.B.4
Percent Capacity, (TMADF/Permitted Capacity) x 100	percent	Max	Report	Monthly Average	Monthly	Calculated	CAL-1	
BOD, Carbonaceous 5 day, 20C (Influent)	mg/L	Max	Report	Single Sample	Annually	Grab	INF-1	See I.B.3
Solids, Total Suspended (Influent)	mg/L	Max	Report	Single Sample	Annually	Grab	INF-1	See I.B.3

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island
Resort LLC
FACILITY: Grand Island Mobile Home Park WWTF

PERMIT NUMBER: FLA010573-007
EXPIRATION DATE: November 9, 2014

2. Samples shall be taken at the monitoring site locations listed in Permit Condition I.B.1. and as described below:

Monitoring Site Number	Description of Monitoring Site
FLW-1	Flow
CAL-1	Calculated from daily flows
INF-1	Raw influent to surge tank

3. 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)]
4. An elapsed time measurement on pumps shall be utilized to measure flow and calibrated at least once every 12 months. [62-601.200(17) and .500(6)]
5. The sample collection, analytical test methods and method detection limits (MDLs) applicable to this permit shall be conducted using a sufficiently sensitive method to ensure compliance with applicable water quality standards and effluent limitations and shall be in accordance with Rule 62-4.246, Chapters 62-160 and 62-601, F.A.C., and 40 CFR 136, as appropriate. The list of Department established analytical methods, and corresponding MDLs (method detection limits) and PQLs (practical quantitation limits), which is titled "FAC 62-4 MDL/PQL Table (April 26, 2006)" is available at <http://www.dep.state.fl.us/labs/library/index.htm>. The MDLs and PQLs as described in this list shall constitute the minimum acceptable MDL/PQL values and the Department shall not accept results for which the laboratory's MDLs or PQLs are greater than those described above unless alternate MDLs and/or PQLs have been specifically approved by the Department for this permit. Any method included in the list may be used for reporting as long as it meets the following requirements:
- a. The laboratory's reported MDL and PQL values for the particular method must be equal or less than the corresponding method values specified in the Department's approved MDL and PQL list;
 - b. The laboratory reported MDL for the specific parameter is less than or equal to the permit limit or the applicable water quality criteria, if any, stated in Chapter 62-302, F.A.C. Parameters that are listed as "report only" in the permit shall use methods that provide an MDL, which is equal to or less than the applicable water quality criteria stated in 62-302, F.A.C.; and
 - c. If the MDLs for all methods available in the approved list are above the stated permit limit or applicable water quality criteria for that parameter, then the method with the lowest stated MDL shall be used.

When the analytical results are below method detection or practical quantitation limits, the permittee shall report the actual laboratory MDL and/or PQL values for the analyses that were performed following the instructions on the applicable discharge monitoring report.

Where necessary, the permittee may request approval of alternate methods or for alternative MDLs or PQLs for any approved analytical method. Approval of alternate laboratory MDLs or PQLs are not necessary if the laboratory reported MDLs and PQLs are less than or equal to the permit limit or the applicable water quality criteria, if any, stated in Chapter 62-302, F.A.C. Approval of an analytical method not included in the above-referenced list is not necessary if the analytical method is approved in accordance with 40 CFR 136 or deemed acceptable by the Department. [62-4.246, 62-160]

6. 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)]

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island Resort LLC
 FACILITY: Grand Island Mobile Home Park WWTF

PERMIT NUMBER: FLA010573-007
 EXPIRATION DATE: November 9, 2014

7. 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 on DMR	Monitoring Period	Due Date
Monthly or Toxicity	first day of month - last day of month	28 th 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 30	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's Central District Office at the address specified in Permit Condition I.B.8. by the twenty-eighth (28th) of the month following the month of operation.

[62-620.610(18)][62-601.300(1),(2), and (3)]

8. 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, Lake County Water Resource Management and the Department's Central District Office at the address specified below:

Florida Department of Environmental Protection Central District Office
 3319 Maguire Blvd Suite 232
 Orlando, Florida 32803-3767

Phone Number - (407)894-7555
 FAX Number - (407)897-2966
 (All FAX copies and e-mails shall be followed by original copies.)

[62-620.305]

9. 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 Central Process RMF or disposal in a Class I or II solid waste landfill. Transportation of the residuals to an alternative residuals management facility does not require a permit modification. However, use of an alternative residuals management facility requires the submittal of a copy of the agreement pursuant to Rule 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. *[62-620.320(6),62-640.880(1)]*
2. The permittee shall be responsible for proper treatment, management, use, and land application or disposal of its residuals. *[62-640.300(5)]*
3. 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

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island Resort LLC
 FACILITY: Grand Island Mobile Home Park WWTF
 PERMIT NUMBER: FLA010573-007
 EXPIRATION DATE: November 9, 2014

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)]

4. Disposal of residuals, septage, and other solids in a solid waste disposal facility, 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 the requirements of Chapter 62-701, F.A.C. [62-640.100(6)(k)3&4]
5. 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)]
6. The permittee shall keep hauling records to track the transport of residuals between facilities. The hauling records shall contain the following information:

Source Facility	Residuals Management Facility or Treatment Facility
1. Date and Time Shipped	1. Date and Time Received
2. Amount of Residuals Shipped	2. Amount of Residuals Received
3. Degree of Treatment (if applicable)	3. Name and ID Number of Source Facility
4. Name and ID Number of Residuals Management Facility or Treatment Facility	4. Signature of Hauler
5. Signature of Responsible Party at Source Facility	5. Signature of Responsible Party at Residuals Management Facility or Treatment Facility
6. Signature of Hauler and Name of Hauling Firm	

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)]

7. 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

1. Section III is not applicable to this facility.

IV. ADDITIONAL REUSE AND LAND APPLICATION REQUIREMENTS

A. Part IV Rapid Infiltration Basins (RIBs)

1. Advisory signs shall be posted around the site boundaries to designate the nature of the project area. [62-610.518]
2. The maximum annual average loading rate to the RIBs shall be limited to 4.98 inches per day (as applied to the entire bottom area). [62-610.523(3)]
3. The RIBs normally shall be loaded for 7 days and shall be rested for 7 days. Infiltration ponds, basins, or trenches shall be allowed to dry during the resting portion of the cycle. [62-610.523(4)]

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island Resort LLC
PERMIT NUMBER: FLA010573-007
FACILITY: Grand Island Mobile Home Park WWTF
EXPIRATION DATE: November 9, 2014

4. Rapid infiltration basins shall be routinely maintained to control vegetation growth and to maintain percolation capability by scarification or removal of deposited solids. Basin bottoms shall be maintained to be level. *[62-610.523(6) and (7)]*
5. Routine aquatic weed control and regular maintenance of storage pond embankments and access areas are required. *[62-610.514 and 62-610.414]*
6. Overflows from emergency discharge facilities on storage ponds or on infiltration ponds, basins, or trenches shall be reported as abnormal events in accordance with Permit Condition IX.20. *[62-610.800(9)]*

V. OPERATION AND MAINTENANCE REQUIREMENTS

A. Staffing 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 1/2 hour/day for 5 days/week and one visit each weekend. The lead/chief operator must be a Class C operator, or higher.

2. An operator meeting the lead/chief operator class for 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)]*

B. Capacity Analysis Report and Operation and Maintenance Performance Report Requirements

1. 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)]*
2. 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)]*

C. Recordkeeping Requirements

1. The permittee shall maintain the following records and make them available for inspection at the following address: 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, including, if applicable, 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 any required record drawings;

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island Resort LLC
 FACILITY: Grand Island Mobile Home Park WWTF

PERMIT NUMBER: FLA010573-007
 EXPIRATION DATE: November 9, 2014

- 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 license 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, including any preventive maintenance or repairs made or requested; results of tests performed and samples taken, unless documented on a laboratory sheet; and notation of any notification or reporting completed in accordance with Rule 62-602.650(3), F.A.C. 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, 62-602.650]

VI. SCHEDULES

- 1. The following improvement actions shall be completed according to the following schedule:

Improvement Action	Completion Date
1. Complete the engineering evaluation of pumps, splitter box, and chlorine contact chamber, with recommendations for facility modifications if needed to prevent solids wash-out and insufficient disinfection	June 1, 2010
2. Make operational adjustments to improve effluent quality.	Within 30 days of permit issuance

[62-620.320(6)]

- 2. 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 no later than one-hundred and eighty days (180) prior to the expiration date of this permit. Application shall be made using the appropriate forms listed in Rule 62-620.910, F.A.C., including submittal of the appropriate processing fee set forth in Rule 62-4.050, F.A.C. *[62-620.335(1) and (2)]*

VII. INDUSTRIAL PRETREATMENT PROGRAM REQUIREMENTS

- 1. This facility is not required to have a pretreatment program at this time. *[62-625.500]*

VIII. OTHER SPECIFIC CONDITIONS

- 1. 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)]*

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island Resort LLC
FACILITY: Grand Island Mobile Home Park WWTF

PERMIT NUMBER: FLA010573-007
EXPIRATION DATE: November 9, 2014

2. 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)]*
3. Collection/transmission system overflows shall be reported to the Department in accordance with Permit Condition IX. 20. *[62-604.550] [62-620.610(20)]*
4. 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 the wastewater temperature at the introduction of the treatment plant exceeding 40°C or otherwise inhibiting treatment; or
 - e. Which result in the presence of toxic gases, vapors, or fumes that may cause worker health and safety problems.

[62-604.130(5)]
5. The treatment facility, storage ponds for Part II systems, 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) and 62-600.400(2)(b)]*
6. 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)]*
7. Where required by Chapter 471 or Chapter 492, F.S., applicable portions of reports that must be submitted under this permit shall be signed and sealed by a professional engineer or a professional geologist, as appropriate. *[62-620.310(4)]*
8. The permittee shall provide verbal notice to the Department's Central District Office as soon as practical after discovery of a sinkhole or other karst feature 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 Central District Office in a written report within 7 days of the sinkhole discovery. *[62-620.320(6)]*
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.

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island Resort LLC
FACILITY: Grand Island Mobile Home Park WWTF

PERMIT NUMBER: FLA010573-007
EXPIRATION DATE: November 9, 2014

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:

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island Resort LLC
FACILITY: Grand Island Mobile Home Park WWTF

PERMIT NUMBER: FLA010573-007
EXPIRATION DATE: November 9, 2014

- 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;
- 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, F.S., or Rule 62-620.302, F.A.C. 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 or activity 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, F.A.C., and the Department of Environmental Protection Guide to Permitting Wastewater Facilities or Activities Under Chapter 62-620, F.A.C., 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), F.A.C., 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:

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island Resort LLC
FACILITY: Grand Island Mobile Home Park WWTF

PERMIT NUMBER: FLA010573-007
EXPIRATION DATE: November 9, 2014

- 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)]

18. Sampling and monitoring data shall be collected and analyzed in accordance with Rule 62-4.246 and Chapters 62-160, 62-601, and 62-610, F.A.C., and 40 CFR 136, as appropriate.
 - a. 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), or as specified elsewhere in the permit.
 - b. 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.
 - c. Calculations for all limitations which require averaging of measurements shall use an arithmetic mean unless otherwise specified in this permit.
 - d. Except as specifically provided in Rule 62-160.300, F.A.C., any laboratory test required by this permit shall be performed by a laboratory that has been certified by the Department of Health Environmental Laboratory Certification Program (DOH ELCP). Such certification shall be for the matrix, test method and analyte(s) being measured to comply with this permit. For domestic wastewater facilities, testing for parameters listed in Rule 62-160.300(4), F.A.C., shall be conducted under the direction of a certified operator.
 - e. Field activities including on-site tests and sample collection shall follow the applicable standard operating procedures described in DEP-SOP-001/01 adopted by reference in Chapter 62-160, F.A.C.
 - f. Alternate field procedures and laboratory methods may be used where they have been approved in accordance with 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's Central District Office 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.
 - a. The following shall be included as information which must be reported within 24 hours under this condition:
 - (1) Any unanticipated bypass which causes any reclaimed water or effluent to exceed any permit limitation or results in an unpermitted discharge,
 - (2) Any upset which causes any reclaimed water or the effluent to exceed any limitation in the permit,
 - (3) Violation of a maximum daily discharge limitation for any of the pollutants specifically listed in the permit for such notice, and
 - (4) Any unauthorized discharge to surface or ground waters.
 - b. Oral reports as required by this subsection shall be provided as follows:

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island Resort LLC
FACILITY: Grand Island Mobile Home Park WWTF

PERMIT NUMBER: FLA010573-007
EXPIRATION DATE: November 9, 2014

- (1) 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 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:
 - (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's Central District Office 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's Central District Office shall waive the written report.

[62-620.610(20)]

21. The permittee shall report all instances of noncompliance not reported under Permit Conditions IX.17., IX.18., or IX.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" means the intentional diversion of waste streams from any portion of a treatment works.
- b. 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.
- c. 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.
- d. 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.

PERMITTEE: Equity Lifestyle Properties Inc./MHC Grand Island Resort LLC
FACILITY: Grand Island Mobile Home Park WWTF

PERMIT NUMBER: FLA010573-007
EXPIRATION DATE: November 9, 2014

- e. 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)]

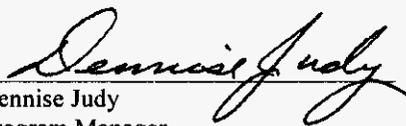
23. Upset Provisions.

- a. "Upset" means an exceptional incident in which there is unintentional and temporary noncompliance with technology-based effluent limitations because of factors beyond the reasonable control of the permittee.
 - (1) An upset does not include noncompliance caused by operational error, improperly designed treatment facilities, inadequate treatment facilities, lack of preventive maintenance, careless or improper operation.
 - (2) An upset constitutes an affirmative defense to an action brought for noncompliance with technology based permit effluent limitations if the requirements of upset provisions of Rule 62-620.610, F.A.C., are met.
- b. 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.
- c. In any enforcement proceeding, the burden of proof for establishing the occurrence of an upset rests with the permittee.
- d. 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 Orlando, Florida.

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION


Dennise Judy
Program Manager
Domestic Waste

Date: _November 10, 2009

Attachment(s):
Discharge Monitoring Report



Florida Department of Environmental Protection

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

Rick Scott
Governor

Jennifer Carroll
Lt. Governor

Mimi A. Drew
Secretary

VIA EMAIL
KAREN_DOIRON@EQUITYLIFESTYLE.COM

January 14, 2011

Karen Doiron
Environmental Engineer
Equity Lifestyle Properties, Inc.
5100 West Lemon Street, Suite 308
Tampa, FL 33609

OCD-PW-SS-10-0053

Lake County – PW

<u>PWS Name</u>	<u>PWS ID Number</u>
Clerbrook RV Resort	3354104
Grand Island Mobile Home Park	3350172

Dear Ms. Doiron:

This confirms a visit to the subject community public water systems on January 5, 2011, by Patrick Farris to conduct a sanitary survey inspection. Copies of the sanitary survey inspection reports are enclosed for your reference and records.

There were no deficiencies at your water plant at the time of our visit. The overall operation of the water plant was good, which is a credit to both you and your operator. The Department appreciates the excellent work being done on your water system and values your continued spirit of cooperation in complying with Department rules.

If you have any questions, please contact Patrick Farris by phone at (407) 894-7555, extension 2276, or by e-mail at Patrick.Farris@dep.state.fl.us.

Sincerely,

Reggie Phillips, Environmental Supervisor II
Drinking Water Compliance and Enforcement

RFP/pf
Enclosures

cc: Tom, Felton, General Utilities [generalutilities@aol.com]; ESI [LEECAIN.ESI@GMAIL.COM]
Jennifer Fernandez [Jennifer_Fernandez@equitylifestyle.com]

State of Florida
 Department of Environmental Protection
 Central District
SANITARY SURVEY REPORT

Plant Name Clerbrook RV Resort - WTP 1 County Lake PWS ID # 3354104-01
 Plant Location: 20005 US Highway 27, Clermont, FL 34715 Phone (352) 394-5513
 Owner Name Equity Lifestyle Properties, Inc. Phone (813) 282-6754
 Owner Address 5100 West Lemon Street, Suite 308, Tampa FL 33609
 Contact Person Karen Doiron Title Environmental Engineer Phone (813) 282-6754
 This Survey Date 1/5/11 Last Survey Date 1/29/2008 Last Compliance Inspection Date 2/24/2009

PWS TYPE: Community

PLANT CATEGORY & CLASS: 5C

MAX-DAY DESIGN CAPACITY: 360,000 gpd

PWS STATUS: Approved

TREATMENT PROCESSES IN USE

Hypochlorination and Aqua Mag for Corrosion Control

SERVICE AREA CHARACTERISTICS

RV Park

Food Service: Yes No N/A

Number of Service Connections 1,257

Population Served 3,142 Basis: Operator

OPERATION & MAINTENANCE LOG: Yes

Location WTP

Comments _____

CERTIFIED OPERATOR: Yes

Operator(s) & Certification Class-Number:

Tom Felton C-2241

Hrs/day: Required _____ *Visit _____ Actual _____ *Visit _____

Days/wk: Required 5+1 Actual 5+1

Non-consecutive Days? Yes No N/A

Comments: *Visits must total 0.6 hour/week.

MONTHLY OPERATION REPORTS (MORs)

MORs submitted regularly? Yes No N/A

Data missing from MORs? No Yes N/A

Average Day (from MORs) 90,208 gpd

Maximum Day (from MORs) 204,000 gpd 5/10

Comments _____

Flow Measuring Device Flow Meter

Meter Size & Type 6" Water Specialties

Date Last Calibrated 5/5/09 by FRWA

RAW WATER SOURCE

GROUND; Number of Wells 1

PURCHASED from PWS ID # _____

Emergency Water Source Interconnect WTP # 2

Emergency Water Capacity _____

STANDBY POWER SOURCE: Yes

Source Generac (LP)

Capacity of Standby (kW) 30 kW

Switchover: Automatic Manual

Hrs Operated Under Load 1 hr/wk.

What equipment does it operate?

Well Pumps Well # 1

High Service Pumps _____

Treatment Equipment _____

Satisfy avg. daily demand? Yes No Unknown

Audio-visual alarm? Yes No

Comments _____

PLANS AND MAPS

Coliform Sampling Plan Yes No N/A

D/DBP Monitoring Plan Yes No N/A

Lead and Copper Plan Yes No N/A

Distribution System Map Yes No N/A

Emergency Response Plan Yes No N/A

Comment _____

PREVENTIVE MAINTENANCE/O&M

Operation & Maintenance Manual Yes No

Preventive Maintenance Program Yes No

Flushing Program Yes No N/A

Records Yes No N/A

Isolation Valve Exercise Yes No N/A

Records Yes No N/A

Comments _____

CROSS CONNECTION CONTROL

BFPAs 3 # Tested 3

WWTP RPZ Yes Date Tested 2/17/10

Written Plan Yes Date Unknown

Comments N/A

GROUND WATER SOURCE

Well Number (Florida Unique Well ID #)	1 (AAH6052)			
Year Drilled	1982			
Depth Drilled	295'			
Drilling Method	Cable Tool			
Type of Grout	Neat Cement			
Static Water Level	10'			
Pumping Water Level	Unknown			
Design Well Yield	Unknown			
Test Yield	Unknown			
Actual Yield (if different than rated capacity)	Unknown			
Strainer	Unknown			
Length (outside casing)	175'			
Diameter (outside casing)	8"			
Material (outside casing)	Black Steel			
Well Contamination History	No			
Is inundation of well possible?	No			
6' X 6' X 4" Concrete Pad	Yes			
SET BACKS	Septic Tank	>100'		
	Reuse Water	N/A		
	WW Plumbing	N/A		
	Other Sanitary Hazard	None		
PUMP	Type	Vertical turbine		
	Manufacturer Name	Goulds		
	Model Number	Unknown		
	Rated Capacity (gpm)	500 GPM		
	Motor Horsepower	20		
Well casing 12" above grade?	Yes			
Well Casing Sanitary Seal	Yes			
Raw Water Sampling Tap	Yes			
Above Ground Check Valve	Yes			
Security	Yes			
Well Vent Protection	Yes			

COMMENTS Please provide additional information for items marked "Unknown."

CHLORINATION (Disinfection)

Type: Gas Hypo
 Make Stenner 85M5 Capacity 85 gpd
 Chlorine Feed Rate 50%
 Chlorine Residuals: Plant 1.9 Remote 1.84
 Remote tap location Front Gate
 DPD Test Kit: On-site With operator
 None Not Used Daily
 Injection Points Prior to hydropneumatic tank
 Booster Pump Info N/A
 Comments _____

STORAGE FACILITIES

(G) Ground (C) Clearwell (E) Elevated
 (B) Bladder (H) Hydropneumatic / flow-through

Tank Type/Number	H
Capacity (gal)	7,500
Material	Steel
Gravity Drain	Yes
By-Pass Piping	Yes
Protected Openings	Yes
Sight Glass or Level Indicator	Yes
PRV/ARV	Yes
Pressure Gauge	Yes
On/Off Pressure	40/60
Access Secured	Yes
Access Manhole	Yes
Tank Sample Tap Location	Yes
Date of Inspection	*
Date of Cleaning	*

Comments *New tank installed 9/08

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 ₂ capability	<input type="checkbox"/>	<input type="checkbox"/>	
Loss of Cl ₂ residual	<input type="checkbox"/>	<input type="checkbox"/>	
Cl ₂ 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"/>	

CORROSION CONTROL

Chemical Used: Aqua Mag
 Injection Point: Raw line prior to chlorination
 Make Stenner Model 45 MPH-2 Capacity 3 gpd
 Chemical Dose 0.59 mg/L
 Target Residual 0.20 mg/L
 Comments: To reduce Pb/Cu and Fe/Mg leaching.
 Permit # WC35-0080557-005 issued May 21, 2010.

AERATION (Gases, Fe, & Mn Removal)

Type _____ Capacity _____
 Aerator Condition _____
 Visible Algae Growth _____
 Protective Screen Condition _____
 Frequency of Cleaning _____
 Date Last Inspected/Cleaned _____
 Comments _____

State of Florida
 Department of Environmental Protection
 Central District
SANITARY SURVEY REPORT

Plant Name Clerbrook RV Resort – WTP 2 County Lake PWS ID # 3354104-02
 Plant Location: 20005 US Highway 27, Clermont, FL 34715 Phone (352) 394-5513
 Owner Name Equity Lifestyle Properties, Inc. Phone (813) 282-6754
 Owner Address 5100 West Lemon Street, Suite 308, Tampa FL 33609
 Contact Person Karen Doiron Title Environmental Engineer Phone (813) 282-6754
 This Survey Date 1/5/2011 Last Survey Date 1/29/2008 Last Compliance Inspection Date 2/24/2009

PWS TYPE: Community

PLANT CATEGORY & CLASS: 5D

MAX-DAY DESIGN CAPACITY: 43,200 gpd

PWS STATUS: Approved

TREATMENT PROCESSES IN USE

Hypochlorination and Aqua Mag for Corrosion Control

SERVICE AREA CHARACTERISTICS

RV Park
 Food Service: Yes No N/A
 Number of Service Connections 1,257
 Population Served 3,142 Basis: Operator

OPERATION & MAINTENANCE LOG: Yes

Location WTP
 Comments _____

CERTIFIED OPERATOR: Yes

Operator(s) & Certification Class-Number:
Tom Felton C-2241

Hrs/day: Required *Visit Actual *Visit
 Days/wk: Required 2 Actual 2
 Non-consecutive Days? Yes No N/A
 Comments: *Visits must total 0.2 hour/week.

MONTHLY OPERATION REPORTS (MORs)

MORs submitted regularly? Yes No N/A
 Data missing from MORs? No Yes N/A
 Average Day (from MORs) 3,339 gpd
 Maximum Day (from MORs) 107,000 gpd 11/09
 Comments _____

Flow Measuring Device Flow Meter
 Meter Size & Type 2" Badger
 Date Last Calibrated 5/5/09 by FRWA

RAW WATER SOURCE

GROUND; Number of Wells 1
 PURCHASED from PWS ID # _____
 Emergency Water Source Interconnect WTP # 1
 Emergency Water Capacity _____

STANDBY POWER SOURCE: No

Source Auxiliary power at WTP # 1
 Capacity of Standby (kW) _____
 Switchover: Automatic Manual
 Hrs Operated Under Load _____
 What equipment does it operate?
 Well Pumps _____
 High Service Pumps _____
 Treatment Equipment _____
 Satisfy avg. daily demand? Yes No Unknown
 Audio-visual alarm? Yes No
 Comments _____

PLANS AND MAPS

Coliform Sampling Plan Yes No N/A
 D/DBP Monitoring Plan Yes No N/A
 Lead and Copper Plan Yes No N/A
 Distribution System Map Yes No N/A
 Emergency Response Plan Yes No N/A
 Comment _____

PREVENTIVE MAINTENANCE/O&M

Operation & Maintenance Manual Yes No
 Preventive Maintenance Program Yes No
 Flushing Program Yes No N/A
 Records Yes No N/A
 Isolation Valve Exercise Yes No N/A
 Records Yes No N/A
 Comments _____

CROSS CONNECTION CONTROL

BFPAs 3 # Tested 3
 WWTP RPZ Yes Date Tested 2/17/10
 Written Plan Yes Date Unknown
 Comments N/A

GROUND WATER SOURCE

Well Number (Florida Unique Well ID #)	2 (AAH6055)		
Year Drilled	1992		
Depth Drilled	260'		
Drilling Method	Combination		
Type of Grout	Neat Cement		
Static Water Level	20'		
Pumping Water Level	Unknown		
Design Well Yield	Unknown		
Test Yield	Unknown		
Actual Yield (if different than rated capacity)	Unknown		
Strainer	Unknown		
Length (outside casing)	189'		
Diameter (outside casing)	4"		
Material (outside casing)	Black Steel		
Well Contamination History	No		
Is inundation of well possible?	No		
6' X 6' X 4" Concrete Pad	Yes		
SET BACKS	Septic Tank	N/A	
	Reuse Water	N/A	
	WW Plumbing	>100'	
	Other Sanitary Hazard	None Noted	
PUMP	Type	Submersible	
	Manufacturer Name	StaRite	
	Model Number	40P4JS-26	
	Rated Capacity (gpm)	60	
	Motor Horsepower	5	
Well casing 12" above grade?	Yes		
Well Casing Sanitary Seal	Yes		
Raw Water Sampling Tap	Yes		
Above Ground Check Valve	Yes*		
Security	Yes		
Well Vent Protection	Yes		

COMMENTS: *The check valve was leaking at the time of the inspection. The utility installed a new check valve on 1/7/11 correcting this deficiency. Please provide information for items marked "Unknown."

CHLORINATION (Disinfection)

Type: Gas Hypo
 Make Stenner 45MHP2 Capacity 3 gpd
 Chlorine Feed Rate 50%
 Chlorine Residuals: Plant 1.68 Remote 1.84
 Remote tap location Front Gate
 DPD Test Kit: On-site With operator
 None Not Used Daily
 Injection Points Prior to hydropneumatic tank
 Booster Pump Info _____
 Comments _____

STORAGE FACILITIES

(G) Ground (C) Clearwell (E) Elevated
 (B) Bladder (H) Hydropneumatic / flow-through

Tank Type/Number	H
Capacity (gal)	5,000
Material	Steel
Gravity Drain	Yes
By-Pass Piping	Yes
Protected Openings	Yes
Sight Glass or Level Indicator	Yes
PRV/ARV	Yes
Pressure Gauge	Yes
On/Off Pressure	30/60
Access Secured	Yes
Access Manhole	Yes
Tank Sample Tap Location	Yes
Date of Inspection	**
Date of Cleaning	**

Comments **Tank was installed June 2007

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 ₂ capability	<input type="checkbox"/>	<input type="checkbox"/>	
Loss of Cl ₂ residual	<input type="checkbox"/>	<input type="checkbox"/>	
Cl ₂ 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"/>	

CORROSION CONTROL

Chemical Used: Aqua Mag
 Injection Point: Raw line prior to chlorination
 Make: Stenner Model 45 MPH-2 Capacity 3 gpd
 Chemical Dose 0.59 mg/L
 Target Residual 0.20 mg/L
 Comments: To reduce Pb/Cu and Fe/Mg leaching
 Permit # WC35-0080557-006 issued May 21, 2010.

AERATION (Gases, Fe, & Mn Removal)

Type _____ Capacity _____
 Aerator Condition _____
 Visible Algae Growth _____
 Protective Screen Condition _____
 Frequency of Cleaning _____
 Date Last Inspected/Cleaned _____
 Comments _____

DEFICIENCIES:

No deficiencies noted at the time of the inspection.

COMMENTS/REMINDERS:

- Suppliers of water shall submit written notification to the Department before beginning work or alterations to the public water system. Each notification shall be submitted to the appropriate Department of Environmental Protection District Office or Approved County Health Department and shall include the following: a description of the scope, purpose, and location of the work or alterations; and assurance that the work or alterations will comply with applicable requirements listed in Rule 62-555.330, F.A.C. Suppliers of water may begin such work or alterations 14 days after providing notification to the Department unless they are advised by the Department that the notification is incomplete or that a construction permit is required.
- Suppliers of water shall telephone the SWP at 1-800-320-0519 immediately (i.e., within two hours) after discovery of any actual or suspected sabotage or security breach, or any suspicious incident, involving a public water system. [Rule 62-555.350(10)(a), F.A.C.]
- Suppliers of water shall telephone, and speak directly to a person at, the appropriate DEP District Office as soon as possible, but never later than noon of the next business day, in the event of any of the following emergency or abnormal operating conditions:
 - The occurrence of any abnormal color, odor, or taste in a public water system's raw or finished water;
 - The failure of a public water system to comply with applicable disinfection requirements; or
 - The breakdown of any water treatment or pumping facilities, or the break of any water main, in a public water system if the breakdown or break is expected to adversely affect finished-water quality, interrupt water service to 150 or more service connections or 350 or more people, interrupt water service to any one service connection for more than eight hours, or necessitate the issuance of a precautionary "boil water" notice in accordance with the Department of Health's "Guidelines for the Issuance of Precautionary Boil Water Notices" as adopted in Rule 62-555.335, F.A.C. [Rule 62-555.350(10)(b), F.A.C.]
- Suppliers of water shall notify the appropriate DEP District Office and affected water customers by no later than the previous business day before initiating any planned permanent or temporary conversion from free chlorine to chloramines or vice versa for disinfection. Notices to the appropriate DEP District Office shall be delivered by telephoning and speaking directly to a person at the DEP District Office, and notices to affected water customers shall be delivered in writing or via telephone, newspaper, radio, or television. A single notice may be provided to cover both a planned temporary conversion from chloramines to free chlorine and the planned subsequent conversion back to chloramines. Notification is not required before unplanned temporary conversions from chloramines to free chlorine to protect public health during emergency operating conditions caused by circumstances such as source water contamination, water main breaks, or backflow incidents. [Rule 62-555.350(10)(c), F.A.C.]
- Suppliers of water shall notify affected water customers in writing or via telephone, newspaper, radio, or television; and telephone, and speak directly to a person at, the appropriate DEP District Office by no later than the previous business day before taking PWS components out of operation for planned maintenance or repair work if the work is expected to adversely affect finished-water quality, interrupt water service to 150 or more service connections or 350 or more people, interrupt water service to any one service connection for more than eight hours, or necessitate the issuance of a precautionary "boil water" notice in accordance with the Department of Health's "Guidelines for the Issuance of Precautionary Boil Water Notices" as adopted in Rule 62-555.335, F.A.C. [Rule 62-555.350(10)(d), F.A.C.]

COMMENTS/REMINDERS (continued):

- Suppliers of water shall issue precautionary “boil water” notices as required or recommended in the Department of Health’s “Guidelines for the Issuance of Precautionary Boil Water Notices” as adopted in Rule 62-555.335, F.A.C. [Rule 62-555.350(11), F.A.C.]
- For monitoring schedules and information about the Drinking Water Program, please visit the Central District’s Drinking Water website at <http://www.dep.state.fl.us/central/Home/DrinkingWater/default.htm>.

Inspector  Title Env. Specialist I Date 1/14/11

Approved by  Title Env. Supervisor II Date 1/14/11

State of Florida
 Department of Environmental Protection
 Central District
SANITARY SURVEY REPORT
 Plant # 1 (West)

Plant Name Grand Island MHP – West WTP #1 County _____ Lake _____ PWS ID # 3350172-01
 Plant Location 36121 Plum Avenue, Grand Island, FL 32735 Phone (352) 589-2040
 Owner Name Equity Lifestyle Properties, Inc. Phone (813) 282-6754
 Owner Address 5100 West Lemon Street, Suite 308, Tampa FL 33609
 Contact Person Karen Doiron Title Environmental Engineer Phone (813) 282-6754
 This Survey Date 1/5/11 Last Survey Date 1/29/08 Last Compliance Inspection Date 2/24/09

PWS TYPE: Community

PLANT CATEGORY & CLASS: 5D

MAX-DAY DESIGN CAPACITY: 144,000 gpd

PWS STATUS: Approved

TREATMENT PROCESSES IN USE

Hypochlorination & Aqua Mag for Sequestration

SERVICE AREA CHARACTERISTICS

Mobile Home Park, RV Park

Food Service: Yes No N/A

Number of Service Connections 480

Population Served 680 Basis: Operator

OPERATION & MAINTENANCE LOG: Yes

Location WTP

Comments _____

CERTIFIED OPERATOR: Yes

Operator(s) & Certification Class-Number:

Lee Cain C-7791

Hrs/day: Required _____ *Visit _____ Actual _____ *Visit _____

Days/wk: Required 3 Actual 3

Non-consecutive Days? Yes No N/A

Comments *Visits must total 0.3 hour/week.

MONTHLY OPERATION REPORTS (MORs)

MORs submitted regularly? Yes No N/A

Data missing from MORs? No Yes N/A

Average Day (from MORs) 74,967 gpd

Maximum Day (from MORs) 277,000 gpd 10/10

Comments Plant has been above 75% of plant capacity since April 2010.

Flow Measuring Device _____ Flow Meter

Meter Size & Type 4" McCrometer

Date Last Calibrated 3/10/10

RAW WATER SOURCE

GROUND; Number of Wells 1

PURCHASED from PWS ID # _____

Emergency Water Source Interconnet WTP # 2

Emergency Water Capacity _____

STANDBY POWER SOURCE: Yes

Source Kohler (propane)

Capacity of Standby (kW) 70

Switchover: Automatic Manual

Hrs Operated Under Load 1 hr/wk.

What equipment does it operate?

Well Pumps _____

High Service Pumps _____

Treatment Equipment _____

Satisfy avg. daily demand? Yes No Unknown

Audio-visual alarm? Yes No

Comments _____

PLANS AND MAPS

Coliform Sampling Plan Yes No N/A

D/DBP Monitoring Plan Yes No N/A

Lead and Copper Plan Yes No N/A

Distribution System Map Yes No N/A

Emergency Response Plan Yes No N/A

Comment _____

PREVENTIVE MAINTENANCE/O&M

Operation & Maintenance Manual Yes No

Preventive Maintenance Program Yes No

Flushing Program Yes No N/A

Records Yes No N/A

Isolation Valve Exercise Yes No N/A

Records Yes No N/A

Comments _____

CROSS CONNECTION CONTROL

BFPAs 5 # Tested 5

WWTP RPZ Yes Date Tested 9/8/10

Written Plan Yes Date 11/4/2010

Comments N/A

GROUND WATER SOURCE

Well Number (Florida Unique Well ID #)	1 (AAC3285)			
Year Drilled	1973			
Depth Drilled	405'			
Drilling Method	Cable Tool			
Type of Grout	Unknown			
Static Water Level	27'			
Pumping Water Level	Unknown			
Design Well Yield	Unknown			
Test Yield	Unknown			
Actual Yield (if different than rated capacity)	Unknown			
Strainer	Unknown			
Length (outside casing)	Unknown			
Diameter (outside casing)	6"			
Material (outside casing)	Black Steel			
Well Contamination History	None			
Is inundation of well possible?	No			
6' X 6' X 4" Concrete Pad	Yes			
SET BACKS	Septic Tank	N/A		
	Reuse Water	N/A		
	WW Plumbing	>100'		
	Other Sanitary Hazard	None observed		
PUMP	Type	Submersible		
	Manufacturer Name	Goulds		
	Model Number	Unknown		
	Rated Capacity (gpm)	200		
	Motor Horsepower	15		
Well casing 12" above grade?	Yes			
Well Casing Sanitary Seal	OK			
Raw Water Sampling Tap	Yes			
Above Ground Check Valve	Yes			
Security	Yes			
Well Vent Protection	Yes			

COMMENTS Please provide information for items marked "Unknown."

CHLORINATION (Disinfection)

Type: Gas Hypo
 Make Stenner Model 85 MHP-17 Capacity 17 gpd
 Chlorine Feed Rate Unknown
 Chlorine Residuals: Plant 1.24 Remote 1.17
 Remote tap location Offline plant 2 (East)
 DPD Test Kit: On-site With operator
 None Not Used Daily
 Injection Points Prior to hydropneumatic tank
 Booster Pump Info N/A
 Comments: Conversion to liquid chlorination from gas
Permit # WD35-0200356-002.

STORAGE FACILITIES

(G) Ground © Clearwell (E) Elevated
 (B) Bladder (H) Hydropneumatic / flow-through

Tank Type/Number	H	
Capacity (gal)	5,000	
Material	Steel	
Gravity Drain	Yes	
By-Pass Piping	Yes	
Protected Openings	Yes	
Sight Glass or Level Indicator	Yes	
PRV/ARV	Yes	
Pressure Gauge	Yes	
On/Off Pressure	40/60	
Access Secured	Yes	
Access Manhole	Yes	
Tank Sample Tap Location	Yes	
Date of Inspection	*	
Date of Cleaning	*	

Comments * Tank replaced on 2/8/07

SEQUESTRATION

Chemical Used: Aqua Mag
 Injection Point: Raw water prior to chlorination.
 Make: Stenner Model 45 MHP-4 Capacity 3 gpd
 Design Chemical Dose Rate 0.4 mg/L
 Comments: For iron sequestration

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 ₂ capability	<input type="checkbox"/>	<input type="checkbox"/>	
Loss of Cl ₂ residual	<input type="checkbox"/>	<input type="checkbox"/>	
Cl ₂ 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 _____
 Visible Algae Growth _____
 Protective Screen Condition _____
 Frequency of Cleaning _____
 Date Last Inspected/Cleaned _____
 Comments _____

State of Florida
 Department of Environmental Protection
 Central District
SANITARY SURVEY REPORT
 Plant # 2 (East)

Plant Name Grand Island MHP – WTP 2 County Lake PWS ID # 3350172-02
 Plant Location 36121 Plum Avenue, Grand Island, FL 32735 Phone (352) 589-2040
 Owner Name Equity Lifestyle Properties, Inc. Phone (813) 282-6754
 Owner Address 5100 West Lemon Street, Suite 308, Tampa FL 33609
 Contact Person Karen Doiron Title Environmental Engineer Phone (813) 282-6754
 This Survey Date 1/5/11 Last Survey Date 1/29/2008 Last Compliance Inspection Date 2/24/2009

PWS TYPE: Community

PLANT CATEGORY & CLASS: 5D

MAX-DAY DESIGN CAPACITY: 180,000 gpd

PWS STATUS: Approved

RAW WATER SOURCE

GROUND; Number of Wells 1
 PURCHASED from PWS ID # _____
 Emergency Water Source Interconnect WTP # 1
 Emergency Water Capacity _____

STANDBY POWER SOURCE: No

Source _____
 Capacity of Standby (kW) _____
 Switchover: Automatic Manual
 Hrs Operated Under Load _____ hr/wk.
 What equipment does it operate?
 Well Pumps _____
 High Service Pumps _____
 Treatment Equipment _____
 Satisfy avg. daily demand? Yes No Unknown
 Audio-visual alarm? Yes No
 Comments _____

TREATMENT PROCESSES IN USE

Hypochlorination and Aqua Mag for Sequestration

SERVICE AREA CHARACTERISTICS

Mobile Home Park
 Food Service: Yes No N/A
 Number of Service Connections 480
 Population Served 680 Basis: Operator

OPERATION & MAINTENANCE LOG: Yes

Location WTP
 Comments _____

CERTIFIED OPERATOR: Yes

Operator(s) & Certification Class-Number:
Lee Cain C-7791

Hrs/day: Required	*Visit	Actual	*Visit
Days/wk: Required	<u>3</u>	Actual	<u>3</u>
Non-consecutive Days?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Comments:	<u>*Visits must total 0.3 hour/week.</u>		

MONTHLY OPERATION REPORTS (MORs)

MORs submitted regularly? Yes No N/A
 Data missing from MORs? No Yes N/A
 Average Day (from MORs) 9,571 gpd
 Maximum Day (from MORs) 93,000 gpd 2/10
 Comments (East) Plant 2 has been offline since 4/2/10

Flow Measuring Device Flow Meter
 Meter Size & Type 4" McCrometer
 Date Last Calibrated 3/10/10

PLANS AND MAPS

Coliform Sampling Plan	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
D/DBP Monitoring Plan	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Lead and Copper Plan	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Distribution System Map	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Emergency Response Plan	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Comment	_____		

PREVENTIVE MAINTENANCE/O&M

Operation & Maintenance Manual	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Preventive Maintenance Program	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Flushing Program	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
Records	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
Isolation Valve Exercise	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
Records	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
Comments	_____	

CROSS CONNECTION CONTROL

# BFPAs	<u>5</u>	# Tested	<u>5</u>
WWTP RPZ	<u>Yes</u>	Date Tested	<u>9/8/10</u>
Written Plan	<u>Yes</u>	Date	<u>11/4/2010</u>
Comments	<u>N/A</u>		

GROUND WATER SOURCE

Well Number (Florida Unique Well ID #)	2 (AAC3284)			
Year Drilled	1980			
Depth Drilled	705'			
Drilling Method	Cable Tool			
Type of Grout	Neat Cement			
Static Water Level	30'			
Pumping Water Level	Unknown			
Design Well Yield	Unknown			
Test Yield	Unknown			
Actual Yield (if different than rated capacity)	Unknown			
Strainer	Open hole			
Length (outside casing)	450'			
Diameter (outside casing)	6"			
Material (outside casing)	Black steel			
Well Contamination History	None			
Is inundation of well possible?	No			
6' X 6' X 4" Concrete Pad	Yes			
SET BACKS	Septic Tank	N/A		
	Reuse Water	N/A		
	WW Plumbing	>100'		
	Other Sanitary Hazard	None observed		
PUMP	Type	Vertical turbine		
	Manufacturer Name	Goulds		
	Model Number	R2989-03-600		
	Rated Capacity (gpm)	250		
	Motor Horsepower	30		
Well casing 12" above grade?	Yes			
Well Casing Sanitary Seal	OK			
Raw Water Sampling Tap	Yes			
Above Ground Check Valve	Yes			
Security	Yes			
Well Vent Protection	N/A			

COMMENTS Please provide information for items marked "Unknown."

CHLORINATION (Disinfection)

Type: Gas Hypo
 Make Stenner Model 85 MHP-17 Capacity 17 gpd
 Chlorine Feed Rate 50%
 Chlorine Residuals: Plant 1.17 Remote N/A
 Remote tap location East Well offline
 DPD Test Kit: On-site With operator
 None Not Used Daily
 Injection Points Prior to hydropneumatic tank
 Booster Pump Info N/A
 Comments: Conversion to liquid chlorination from gas
Permit # WD35-0200356-003

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 ₂ capability	<input type="checkbox"/>	<input type="checkbox"/>	
Loss of Cl ₂ residual	<input type="checkbox"/>	<input type="checkbox"/>	
Cl ₂ 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"/>	

STORAGE FACILITIES

(G) Ground (C) Clearwell (E) Elevated
 (B) Bladder (H) Hydropneumatic / flow-through

Tank Type/Number	H	
Capacity (gal)	5,000	
Material	Steel	
Gravity Drain	Yes	
By-Pass Piping	Yes	
Protected Openings	Yes	
Sight Glass or Level Indicator	Yes	
PRV/ARV	Yes	
Pressure Gauge	Yes	
On/Off Pressure	40/60	
Access Secured	Yes	
Access Manhole	Yes	
Tank Sample Tap Location	Yes	
Date of Inspection	5/20/10	
Date of Cleaning	5/20/10	

Comments _____

SEQUESTRATION

Chemical Used: Aqua Mag
 Injection Point: Raw water prior to chlorination.
 Make: Stenner Model 45 MHP-4 Capacity 3 gpd
 Design Chemical Dose Rate 0.4 mg/L
 Comments: For iron sequestration

AERATION (Gases, Fe, & Mn Removal)

Type _____ Capacity _____
 Aerator Condition _____
 Visible Algae Growth _____
 Protective Screen Condition _____
 Frequency of Cleaning _____
 Date Last Inspected/Cleaned _____
 Comments _____

DEFICIENCIES:

No deficiencies noted at the time of the inspection.

COMMENTS/REMINDERS - EAST PLANT:

- Review of the recent East Plant hydropneumatic tank inspection report dated May 20, 2010, revealed that the interior should be spot blasted and recoated with an NSF approved (for potable water systems) interior coating system sometime within the next 1 to 2 years. The existing coating is failing in isolated areas and these areas will continue to deteriorate under the harsh wet chlorine environment.
- Wells shall be disinfected to inactivate any microbiological contaminant that may have been introduced into the wells during construction, repair, or maintenance and to allow the true microbiological character of well water to be determined through a bacteriological survey. [Rule 62-555.315(6), F.A.C.]

Before new or altered wells, wells out of operation for more than six months, wells in which new pumping equipment has been installed, and wells taken out of operation for maintenance that might have contaminated the well are placed into, or returned to, operation, they shall be disinfected in accordance with Sections 1. through 4., and Section 5.2 of American Water Works Association (AWWA), Standard C654, as incorporated into Rule 62-555.330, F.A.C. [62-555.315(6)(a), F.A.C.]

NOTE: In Section 5.2 of the aforementioned AWWA standard, references to Section 5.1 shall be interpreted to mean paragraph 62-555.315(6)(b) or (c), F.A.C., as appropriate. This paragraph does not apply to, and disinfection is not required for, wells that officially have been determined to be under the direct influence of surface water per subsection 62-550.517(2), F.A.C., and subparagraph 62-550.817(2)(a)1., F.A.C., and that are pumping to treatment plants with filtration and disinfection facilities meeting all applicable requirements in Rule 62-550.817, F.A.C.

- Following disinfection of a new or altered well or a well that has been out of operation for more than six months, a bacteriological survey of the well shall be conducted as set forth below *unless the well is already considered microbially contaminated or susceptible to microbial contamination.* [62-555.315(6)(b), F.A.C.]
 - 1) A total of at least 20 samples – each taken on a separate but consecutive workday and taken at least six hours apart from the other samples – shall be collected after first pumping the well to waste to remove all residual chlorine and then pumping the well to waste at a rate approximately equal to that of the permanent well pump for at least 15 minutes before each sample is collected, and the samples shall be analyzed for the presence of total residual chlorine, total coliform, and *E. coli*. *Upon a showing by the supplier of water, or a determination by the Department, that historical records or other circumstances warrant it, the Department shall allow the required number of samples or the sample collection interval to be modified. Under no circumstances shall the Department allow fewer than ten samples to be collected, and under no circumstances shall the Department allow more than two samples to be collected per day.* If the Department allows collection of two samples per day, the samples shall be collected at least six hours apart, and the well shall be pumped to waste for at least 15 minutes before each sample is collected. [Rule 62-555.315(6)(b)1, F.A.C.]

NOTE: The total residual chlorine measurements required above may be performed by any authorized representative of the supplier of water or person constructing or altering the well, but shall be performed following the appropriate procedures in the Department of Environmental Protection Standard Operating Procedures for Field Activities, DEP-SOP-001/01 as incorporated into Rule 62-160.800, F.A.C. [62-555.315(6)(b), F.A.C.]

COMMENTS/REMINDERS - EAST PLANT (CONTINUED):

The total coliform or E. coli analyses shall be performed by a laboratory of the Department of Health (DOH) or a laboratory certified by the DOH to perform bacteriological analyses of drinking water and shall be performed using an appropriate method referenced in subsection 62-550.550(1), F.A.C. [62-555.315(6)(b), F.A.C.]

- 2) If any sample shows the presence of free or combined chlorine, the sample shall be considered invalid. [Rule 62-555.315(6)(b)2, F.A.C.]

If any sample shows the presence of *E. coli*, the well shall be considered microbially contaminated unless the Department invalidates the sample or the supplier of water determines and eliminates the source of the *E. coli*, in which case the well shall be disinfected and resampled. [Rule 62-555.315(6)(b)2, F.A.C.]

If more than ten percent of the total number of samples collected show the presence of total coliform or if either of the last two samples collected shows the presence of total coliform, the well shall be disinfected as necessary and resampled or shall be considered susceptible to microbial contamination. [Rule 62-555.315(6)(b)2, F.A.C.]

If a well is considered microbially contaminated or susceptible to microbial contamination, the supplier of water shall provide treatment that reliably achieves at least four-log inactivation or removal of viruses in accordance with paragraph 62-555.320(12)(b), F.A.C. Additionally, the supplier of water shall conduct physical characteristics monitoring in accordance with subsection 62-550.517(2), F.A.C., when notified in writing by the Department to do so. [Rule 62-555.315(6)(b)2, F.A.C.]

- 3) Bacteriological test results shall be considered unacceptable if the tests were completed more than 60 days before the Department received the results. [Rule 62-555.315(6)(b)3, F.A.C.]

COMMENTS/REMINDERS - BOTH PLANTS:

- Suppliers of water shall submit written notification to the Department before beginning work or alterations to the public water system. Each notification shall be submitted to the appropriate Department of Environmental Protection District Office or Approved County Health Department and shall include the following: a description of the scope, purpose, and location of the work or alterations; and assurance that the work or alterations will comply with applicable requirements listed in Rule 62-555.330, F.A.C. Suppliers of water may begin such work or alterations 14 days after providing notification to the Department unless they are advised by the Department that the notification is incomplete or that a construction permit is required.
- Suppliers of water shall telephone the SWP at 1-800-320-0519 immediately (i.e., within two hours) after discovery of any actual or suspected sabotage or security breach, or any suspicious incident, involving a public water system. [Rule 62-555.350(10)(a), F.A.C.]
- Suppliers of water shall telephone, and speak directly to a person at, the appropriate DEP District Office as soon as possible, but never later than noon of the next business day, in the event of any of the following emergency or abnormal operating conditions:
 - The occurrence of any abnormal color, odor, or taste in a public water system's raw or finished water;
 - The failure of a public water system to comply with applicable disinfection requirements; or

COMMENTS/REMINDERS - BOTH PLANTS (continued):

- The breakdown of any water treatment or pumping facilities, or the break of any water main, in a public water system if the breakdown or break is expected to adversely affect finished-water quality, interrupt water service to 150 or more service connections or 350 or more people, interrupt water service to any one service connection for more than eight hours, or necessitate the issuance of a precautionary "boil water" notice in accordance with the Department of Health's "Guidelines for the Issuance of Precautionary Boil Water Notices" as adopted in Rule 62-555.335, F.A.C. [Rule 62-555.350(10)(b), F.A.C.]
- Suppliers of water shall notify the appropriate DEP District Office and affected water customers by no later than the previous business day before initiating any planned permanent or temporary conversion from free chlorine to chloramines or vice versa for disinfection. Notices to the appropriate DEP District Office shall be delivered by telephoning and speaking directly to a person at the DEP District Office, and notices to affected water customers shall be delivered in writing or via telephone, newspaper, radio, or television. A single notice may be provided to cover both a planned temporary conversion from chloramines to free chlorine, and the planned subsequent conversion back to chloramines. Notification is not required before unplanned temporary conversions from chloramines to free chlorine to protect public health during emergency operating conditions caused by circumstances such as source water contamination, water main breaks, or backflow incidents. [Rule 62-555.350(10)(c), F.A.C.]
- Suppliers of water shall notify affected water customers in writing or via telephone, newspaper, radio, or television; and telephone, and speak directly to a person at, the appropriate DEP District Office by no later than the previous business day before taking PWS components out of operation for planned maintenance or repair work if the work is expected to adversely affect finished-water quality, interrupt water service to 150 or more service connections or 350 or more people, interrupt water service to any one service connection for more than eight hours, or necessitate the issuance of a precautionary "boil water" notice in accordance with the Department of Health's "Guidelines for the Issuance of Precautionary Boil Water Notices" as adopted in Rule 62-555.335, F.A.C. [Rule 62-555.350(10)(d), F.A.C.]
- Suppliers of water shall issue precautionary "boil water" notices as required or recommended in the Department of Health's "Guidelines for the Issuance of Precautionary Boil Water Notices" as adopted in Rule 62-555.335, F.A.C. [Rule 62-555.350(11), F.A.C.]
- For monitoring schedules and information about the Drinking Water Program, please visit the Central District's Drinking Water website at <http://www.dep.state.fl.us/central/Home/DrinkingWater/default.htm>.

Inspector  Title Env. Specialist I Date 1/14/11
Approved by  Title Env. Supervisor II Date 1/14/11



Florida Department of Environmental Protection

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

Rick Scott
Governor

Jennifer Carroll
Lt. Governor

Mimi A Drew
Secretary

SENT VIA EMAIL TO: brad_nelson@equitylifestyle.com

January 19, 2011

EQUITY LIFESTYLES PROPERTIES INC
5100 WEST LEMON STREET
SUITE 308
TAMPA FL 33609

OCD-C-WW-11-0057

ATTENTION BRAD NELSON
VICE PRESIDENT

Lake County - DW
Grand Island Resort MHP WWTF
Wastewater Facility - Permit No. FLA010573

Dear Mr. Nelson:

On December 21, 2010, Department personnel conducted a routine inspection of your wastewater facility. At the time of the inspection, the overall operation of your facility was found to be in substantial compliance with the terms and conditions in Permit Number FLA010573. A copy of the inspection report is enclosed for your review.

Your continued cooperation with our wastewater program is appreciated. If you have any questions, please contact me at (407) 893-3313 or via e-mail: jenny.e.farrell@dep.state.fl.us.

Sincerely,

Jenny E. Farrell
Environmental Specialist
Wastewater Compliance/Enforcement

JEF/ar

Enclosure: Inspection Report

cc: Lake County Water Resource Management, scatasus@lakecountyfl.gov
Karen Doiron, ELS Environmental Engineer, karen_doiron@equitylifestyle.com

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

WASTEWATER COMPLIANCE INSPECTION REPORT

FACILITY AND INSPECTION INFORMATION @ = Optional

Name and Physical Location of Facility	WAFR ID:	County	Entry Date/Time
Grand Island MHP WWTF (FKA Chain O Lakes)	FLA010573	Lake	12/21/2010 10:29:00 AM
36121 Plum Ave		Phone	@ Exit Date/Time
Grand Island, FL 32735 - 9241			12/21/2010 11:05:00 AM

Name(s) of Field Representatives(s)	Title	Email	Phone
-------------------------------------	-------	-------	-------

Name and Address of Permittee or Designated Representative	Title	Phone	@ Operator Certification #
Brad Nelson	Regional Vice President	(352) 589-8300	
Equity Lifestyle Properties Inc/MHC Grand Island Resort LLC			
5100 W. Lemon Street, Suite 308	Email		
Tampa, FL 33609			

Inspection Type	C	E	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: EIP	@ Page N/A

FACILITY COMPLIANCE AREAS EVALUATED

IC = In Compliance; NC = Out of Compliance; SC = 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		SELF 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	NE	4. Sampling	IC	7. Flow Measurement	IC	10. ♦ Effluent Disposal
		IC	5. ♦ Records & Reports	IC	8. ♦ Operation & Maintenance	IC	11. Residuals/Sludge
						NA	12. Groundwater
NA	14. Other:					NE	13. ♦ SSO Survey

Facility and/or Order Compliance Status:	<input checked="" type="checkbox"/> In-Compliance	<input type="checkbox"/> Out-Of-Compliance	<input type="checkbox"/> Significant-Out-Of-Compliance
------------------------------------------	---------------------------------------------------	--------------------------------------------	--------------------------------------------------------

Recommended Actions: Letter

Name(s) and Signature(s) of Inspector(s)	District Office/Phone Number	Date
Jenny Farrell <i>Jenny E. Farrell</i>	CD/ (407)893-3313	01/18/2011
Signature of Reviewer	District Office/Phone Number	Date
David Smicherko <i>David Smicherko</i>	CD/ (407)893-3313	January 18, 2011

Single Event Violation Codes(s):

INSPECTION SUMMARY

Facility Name: Grand Island MHP WWTF (FKA Chain O Lakes)

Facility ID: FLA010573

Inspection Type: CEI

Date: 12/21/2010 11:05:00 AM

FACILITY BACKGROUND:

Address: 36121 Plum Ave, Grand Island, FL 32735 - 9241, Lake County

Permit Information: Wastewater Permit issued: 11/12/2009, and expires: 11/11/2014

Treatment Summary: Extended Aeration Stp W/ Surge Control Effluent To 1 Perc/Evaporation Pond

Permitted Capacity: 0.035

1. **Permit:** IN COMPLIANCE

1.1 **Observation:** A copy of the permit was onsite and available to plant personnel.

2. **Compliance Schedules:** IN COMPLIANCE

2.1 **Observation:** The schedules specified in the permit have been completed.

Additional Comments: On June 1, 2010 the Department received an engineering evaluation and permit modification request. The permit modification was issued by the Department on June 15, 2010. On the day of inspection the modifications had not been completed.

3. **Laboratory:** NOT EVALUATED

4. **Sampling:** NOT EVALUATED

5. **Records and Reports:** IN COMPLIANCE

5.1 **Observation:** *General* - A copy of the current laboratory certification was available at the time of the inspection (62-620.350(1) F.A.C.).

Additional Comments: Samples are analyzed by Advanced Environmental Laboratories.

5.2 **Observation:** *General* - Operators' certifications were current and available on-site.

5.3 **Observation:** *General* - The certified operator's daily logbook was complete.

Additional Comments: The logbook was pre-numbered, bound, and contained sufficient operation/maintenance entries.

5.4 **Observation:** *General* - The Operation and Maintenance Manual was onsite and available to plant personnel.

5.5 **Observation:** *General* - All malfunctions and spills at the facility during this review period were reported to the Department as required.

5.6 **Observation:** *General* - Please see specific comment

Additional Comments: The DMR file review period was from March 2010 through July 2010, all were submitted in a timely manner.

On the March 2010 DMR the percent capacity was reported as 111%.

The annual influent samples were collected and reported in January 2010. The annual effluent sample was collected and reported in February 2010.

5.7 **Observation:** *General* - Please see specific comment

Additional Comments: The RPZ's were last inspected and tested in November 2010 (facility) and September 2010 (lift station).

6. **Facility Site Review:** IN COMPLIANCE

6.1 **Observation:** *General* - The facility grounds were secured properly.

Additional Comments: Advisory signs were posted on the fence.

6.2 **Observation:** *Backflow Prevention* - A reduced pressure zone backflow prevention device was in place on the potable water supply line.

INSPECTION FINDINGS

- 6.3 Observation: *LiftStations* - No problems or deficiencies noted.
- 6.4 Observation: *Headworks* – Screenings are being collected in suitable containers.
- 6.5 Observation: *SurgeTanks* - No problems or deficiencies noted.
- 6.6 Observation: *AerationBasins/Act.Sludge* - The contents in the aeration chambers appeared to be adequately mixed.
- 6.7 Observation: *Blowers/Motors* - The blower was operational at the time of the inspection.
Additional Comments: Two blowers were noted onsite with belt guards.
- 6.8 Observation: *Clarifiers* - Please see specific comment
Additional Comments: The clarifier contained some pin floc. A skimmer was noted. The weir appeared level and was clean.
- 6.9 Observation: *Disinfection* - Please see specific comment
Additional Comments: Sodium hypochlorite is used for disinfection and is introduced in the weir. The chlorine contact chambers (CCC's) were free from solids and debris. The last baffle in the CCC had a V-notch in it. **On the day of inspection the V-notch was above the water line but this could cause short circuiting to occur if the water level increased in the CCC.**
- 6.10 Observation: *Digesters* - The tank contents in the aerobic digester were well mixed.
Additional Comments: There was room for wasting.
7. **Flow Measurement**: IN COMPLIANCE
- 7.1 Observation: The copy of the flow calibration report is current and satisfactory.
Additional Comments: According to onsite records the elapsed time meters on the lift station pumps were last calibrated on January 26, 2010.
8. **Operation and Maintenance**: IN COMPLIANCE
- 8.1 Observation: *General* - Please see specific comment
Additional Comments: The facility grounds were well maintained.
9. **Effluent Quality**: IN COMPLIANCE
- 9.1 Observation: A review of the Discharge Monitoring Reports did not reveal any effluent exceedances.
Additional Comments: The review period was from March 2010 through July 2010.
10. **Effluent Disposal**: IN COMPLIANCE
- 10.1 Observation: *General* - The rapid infiltration basins (RIBs) appeared to be well maintained.
- 10.2 Observation: *General* - Advisory signs were posted around the disposal site indicating the nature of the project area.
- 10.3 Observation: *General* - The fence surrounding the effluent disposal site provided adequate access control (62-610.518(10) F.A.C.)
11. **Residuals/Sludge**: IN COMPLIANCE
- 11.1 Observation: *General* - Please see specific comment
Additional Comments: Biosolids from this facility are hauled to A-Able Septic Services RMF. According to onsite records sludge was hauled on December 16, 2010.
12. **Groundwater Quality**: NOT APPLICABLE
13. **SSO Survey**: NOT EVALUATED
14. **Other**: NOT APPLICABLE