



## 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-**

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**DATE:** July 26, 2018  
**TO:** Carlotta S. Stauffer, Commission Clerk, Office of Commission Clerk  
**FROM:** Moniaishi Mtenga, Engineering Specialist, Division of Engineering *MM*  
**RE:** Docket No. 20170219- WS - Application for staff-assisted rate case in Polk County  
by River Ranch Water Management, L.L.C.

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Please file the attached document, "River Ranch Water Management L.L.C.'s response to Staff's Second Data Request" in the above mentioned docket file.

Thank you.

MM:pz

Attachment

RECEIVED-FPSC  
2018 JUL 26 PM 3:24  
COMMISSION  
CLERK

COMMISSIONERS:  
JULIE I. BROWN, CHAIRMAN  
ART GRAHAM  
RONALD A. BRISÉ  
DONALD J. POLMANN  
GARY F. CLARK

STATE OF FLORIDA



DIVISION OF ENGINEERING  
TOM BALLINGER  
DIRECTOR  
(850) 413-6910

## Public Service Commission

December 7, 2017

Mr. Bryon Smith  
River Ranch Water Management  
5601 Windhover Dr.  
Orlando, Florida 38218  
bryon\_smith@wgresorts.com

### STAFF'S SECOND DATA REQUEST VIA EMAIL & US MAIL

**Re: Docket No. 20170219-WS- Application for staff-assisted rate case in Polk County by River Ranch Water Management, L.L.C.**

Dear Mr. Smith:

For the engineering portion of this rate case, staff requires several items to be completed prior to our field audit and to ensure fast and expedient treatment of your rate case. Please submit the following information for the period of October 1, 2016, through September 30, 2017, unless another time period is specified, to the Commission Clerk, Office of Commission Clerk, 2540 Shumard Oak Blvd., Tallahassee, FL 32399-0850, by January 8, 2018. Staff will contact you to arrange for a site visit after reviewing the material. On the date selected for the site visit, the staff engineer will inspect the water and wastewater plants, the distribution and collection sy or an assigned person with access to the plant) available for this tour.

1. Purchased Water and/or Wastewater: All utility related bills from the beginning of the test year to present which include meter number and location, gallons used, dollars paid, and the Utility's account numbers.
2. Purchased Power: All utility related electricity bills from the beginning of the test year to present, which include meter number and location, kilowatts used, dollars paid, and the electric company's account numbers.
3. Chemicals: A list of all chemicals used in the treatment of water, amounts purchased, quantity purchased, unit prices paid and dosage rates utilized.
4. Sludge Removal Expenses: Provide a schedule showing the total cost and quantity of removing the sludge, if persons other than owners, stockholders, and employees of the utility perform such work during the test year.
5. Contractual Services – Testing: A list of tests along with costs paid to outside laboratories for testing the water and wastewater treatment during the test year.

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

An Affirmative Action / Equal Opportunity Employer

PSC Website: <http://www.floridapsc.com>

Internet E-mail: [contact@psc.state.fl.us](mailto:contact@psc.state.fl.us)



6. Contractual Services – Other: The costs of operation and maintenance work not performed by utility employees with an explanation of the type of work performed. These costs include the operator's fee, mowing and grounds keeping and contracted repair for the water and wastewater systems.
7. Transportation Expenses: A schedule of all vehicles by serial number and description owned or leased by the utility, original cost or lease documents, whom the vehicles are assigned to, and an explanation of how they are allocated to the utility, or a copy of the log book showing miles on personal vehicles associated with utility business. All vehicles are to be available for inspection.
8. Copies of your five most recent Primary and Secondary Water Quality test results.
9. Copies of monthly operation reports for water and wastewater from October 1, 2016, to September 30, 2017, which includes:

FOR WASTEWATER – Total treated, total wash water, total of each chemical in points, chemical dosage rates (average).

FOR WATER – Total water purchased or pumped, total wash water, total of each chemical in points, chemical dosages rates (average)

10. Copy of monthly totals of metered water sold for each month of the test year.
11. A written summary, by permit number, of all Department of Environmental Protection, Water Management District, and/or County Health Department permits.
12. If any plant addition has been made or will be required due to a written order from a governmental agency, please provide a copy of that order.
13. A list of all service complaints received during the test year and four years prior to the test year. Please include an explanation of how each complaint was resolved.
14. A listing of all assets owned by the utility.

Example: 200' – 8" PVC (Sewer)  
250' – 6" PVC Pipe (Water)  
50' – 6" PVC Fire Hydrants (Water)

15. Number of customers classified as to meter size and class (commercial or residential) for the following points in time:
  - a) A minimum of four years prior to the beginning of the test (or calendar last) year.
  - b) The beginning of the last calendar year.
  - c) The end of the last calendar year.
  - d) Present.

Mr. Smith  
Date: December 7, 2017  
Page 3

16. Please provide a copy of the Utility's engineering maps for water and wastewater showing location and size of water and wastewater mains throughout the service area and customer location and classification.
17. Please fill out the spreadsheet attached concerning any pro forma items. Please include any bid proposals or estimates for the pro forma items.

Please contact me by phone at (850) 413-6586 or by email at [mmtenga@psc.state.fl.us](mailto:mmtenga@psc.state.fl.us), if you have any questions.

Sincerely,



Moniaishi Mtenga  
Engineering Specialist  
Florida Public Service Commission  
Division of Engineering

MM:tj

Enclosure

cc: Office of Commission Clerk (Docket No. 20170219-WS)

Mr. Smith  
Date: December 7, 2017  
Page 4

Enclosure

Site	Item	NARUC Account Number	Issue Relevance*	Problem	Solution	Regulatory Mandate (M) or Enhancement (E)	Comments	Year?	Year?	Year?	Total

\*For Issue Relevance, please use DM (Deferred Maintenance), S (Safety), C (Compliance), R (Reliability), WQ (Water Quality), or WWQ (Wastewater Quality). In the year columns, please include the amount spent and projected to be spent



## River Ranch Water Management LLC

Response to PSC Letter Dated 12/07/2016

## 2 Please see the attached invoices from Peace River Electric

ACCT #	43790002	43790008	43790006	43790004	43790005	43790007
Oct-16	78.20	1348.13	106.35	1550.64	190.38	36.71
Nov-16	62.03	1346.34	75.08	1435.47	152.46	34.29
Dec-16	36.71	1397.74	54.18	1298.98	68.22	34.00
Jan-17	40.15	1418.40	143.97	745.50	81.99	34.06
Feb-17	30.66	1462.46	299.82	1293.01	102.99	34.49
Mar-17	40.70	1535.14	336.16	1253.48	95.81	34.49
Apr-17	40.87	1562.68	289.82	1296.74	101.41	34.78
May-17	39.80	1623.06	69.08	1184.82	87.99	34.06
Jun-17	39.40	1676.82	43.12	1211.53	74.97	34.33
Jul-17	62.88	1564.78	58.87	1310.88	153.48	38.49
Aug-17	62.62	1489.75	71.77	1320.49	157.62	36.90
Sep-17	55.00	1413.29	67.75	1252.77	146.79	35.47

ACCT # 43790002

Oct-16	78.20
Nov-16	62.03
Dec-16	36.71
Jan-17	40.15
Feb-17	30.66
Mar-17	40.70
Apr-17	40.87
May-17	39.80
Jun-17	39.40
Jul-17	62.88
Aug-17	62.62
Sep-17	55.00



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790002  
Service Address: LIFT PUMP-G C

Member Service: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precocoop](http://www.precocoop)



## Important Information

Contact PRECO through SmartHub 24 Hours a day. SmartHub's contact feature allows you to request account changes, service request and/or bill inquiries. Navigate to the Contact Us page, fill in the form and a Customer Care representative will contact you within 1 business day.

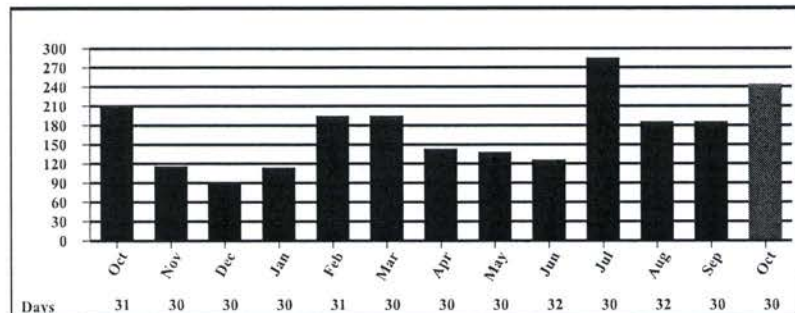
2389 1 MB 0.416 5 2389  
RIVER UTILITIES C-10 P-18  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Bill Date: 10/06/2016 Cycle: 3 Board District: 3  
Service Period: 08/31/2016 - 09/30/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235058	6093	6337	1	244	

Previous Balance	\$59.66
Payment(s) Received	\$-59.66
Adjustments	\$0.00
Late Fee	\$10.00
<b>Delinquent Balance</b>	<b>\$10.00</b>



Facilities Use Charge	\$25.00
Energy Charge	244 kWh @ 0.137772 \$33.62
CPA	244 kWh @ -0.0145 \$-3.54
Polk Property Tax	\$1.85
Gross Receipts Tax	\$1.46
Polk Public Service Tax	\$5.17
Florida Sales Tax	\$4.06
Polk County Tax	\$0.58
<b>Current Charges</b>	<b>\$68.20</b>
<b>Total Amount Due</b>	<b>\$78.20</b>

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Account: 43790002

**Total Balance due 10/27/2016 \$78.20**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790002000007820000008820100620162





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790002  
Service Address: LIFT PUMP-G C

Member Service: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precocoop](http://www.precocoop)



2431 1 MB 0.416 5 2431  
RIVER UTILITIES C-10 P-15  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

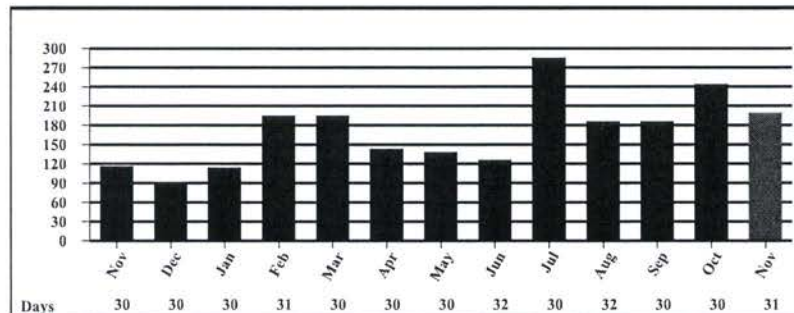


## Important Information

Contact PRECO through SmartHub 24 hours a day.  
Contact PRECO with account changes, service requests  
and/or bill inquiries through SmartHub. Navigate to  
the Contact Us page, fill in the form and a Customer  
Care representative will contact you within 1 business  
day.

Bill Date: 11/08/2016 Cycle: 3 Board District: 3  
Service Period: 09/30/2016 - 10/31/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235058	6337	6536	1	199	



Previous Balance	\$78.20
Payment(s) Received	\$-78.20
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	199 kWh @ 0.132792 \$26.43
CPA	199 kWh @ -0.0145 \$-2.89
Polk Property Tax	\$1.68
Gross Receipts Tax	\$1.33
Polk Public Service Tax	\$4.76
Florida Sales Tax	\$3.69
Polk County Tax	\$0.53
Current Charges	\$62.03
Total Amount Due	\$62.03

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Account: 43790002

Current Balance due 11/29/2016 \$62.03

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790002  
Service Address: LIFT PUMP-G C

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.presco.coop](http://www.presco.coop)



## Important Information

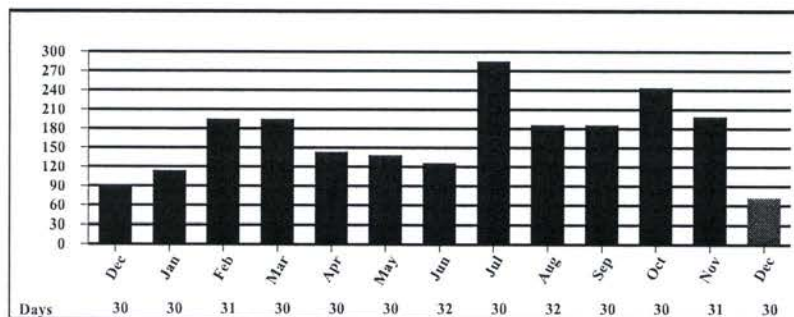
Did you recently receive a new credit card with the embedded security chip? Even though your credit card number didn't change, the expiration date and security code on the back of the card most likely did. To update your bill payment information, visit SmartHub or call us at 1-800-282-3824.

2398 1 MB 0.416 5 2398  
RIVER UTILITIES C-10 P-16  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Bill Date: 12/07/2016 Cycle: 3 Board District: 3  
Service Period: 10/31/2016 - 11/30/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235058	6536	6608	1	72	



Previous Balance	\$62.03
Payment(s) Received	\$-62.03
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	72 kWh @ 0.132792 \$9.56
CPA	72 kWh @ -0.0145 \$-1.04
Polk Property Tax	\$1.17
Gross Receipts Tax	\$0.93
Polk Public Service Tax	\$3.52
Florida Sales Tax	\$2.58
Polk County Tax	\$0.37
Current Charges	\$43.59

Total Amount Due \$43.59

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Account: 43790002

Current Balance due 12/28/2016 \$43.59

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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**Peace River Electric Cooperative, Inc.**

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative 

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.preco.coop](http://www.preco.coop)

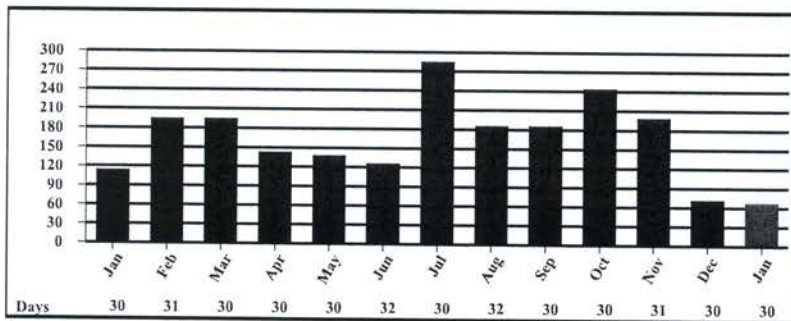


2359 1 MB 0.416 5 2359  
RIVER UTILITIES C-10 P-14 #  
WESTGATE RIVER RANCH RESORTS #  
ATTN: AP #  
PO BOX 690669  
ORLANDO FL 32869-0669



Bill Date: 01/10/2017	Cycle: 3	Board District: 3
Service Period: 11/30/2016 - 12/30/2016	Rate: GENERAL SERVICE	

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235058	6608	6676	1	68	



Account # 43790002  
Service Address: LIFT PUMP-G C

## Important Information

**\$75,000 in College Scholarships Available! Apply now for an Operation Round Up College Scholarship. Visit [www.preco.coop](http://www.preco.coop) for information. Applications must be postmarked by February 28, 2017.**

Previous Balance		\$43.59
Payment(s) Received		\$-43.59
Adjustments		\$-50.47
Late Fee		\$0.00
Balance Forward		\$-50.47
Facilities Use Charge		\$26.50
Energy Charge	68 kWh @ 0.132792	\$9.03
CPA	68 kWh @ -0.0145	\$-0.99
Polk Property Tax		\$1.21
Gross Receipts Tax		\$0.92
Polk Public Service Tax		\$3.48
Current Charges		\$40.15
Total Amount Due		\$-10.32

**Please return this portion with your payment**



**Peace River Electric Cooperative, Inc.**

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative 

**RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669**

**Main Contact #: (863) 692-2947**



**Credit Balance - DO NOT PAY** **\$-10.32**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547

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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790002  
Service Address: LIFT PUMP-G C

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.preco.coop](http://www.preco.coop)



2427 1 MB 0.420  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

5 2427  
C-10 P-19



## Important Information

PRECO members are invited to join us on Saturday, March 25, 2017 for PRECO's Annual Membership Meeting at PRECO Park, 220 Knight Road, Wauchula, FL. Registration opens at 10:00 a.m. and the business meeting begins at 1:00 p.m.

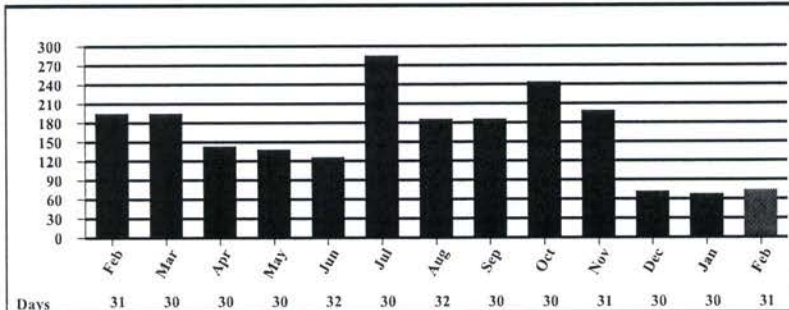
Bill Date: 02/07/2017 Cycle: 3 Board District: 3  
Service Period: 12/30/2016 - 01/30/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235058	6676	6750	1	74	

Previous Balance	\$-10.32
Payment(s) Received	\$0.00
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$-10.32

Facilities Use Charge	\$26.50
Energy Charge	74 kWh @ 0.132792 \$9.83
CPA	74 kWh @ -0.0145 \$-1.07
Polk Property Tax	\$1.24
Gross Receipts Tax	\$0.94
Polk Public Service Tax	\$3.54
Current Charges	\$40.98

Total Amount Due \$30.66



Please return this portion with your payment

Account: 43790002



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

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Current Balance due 02/28/2017 \$30.66

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



110260043790002000003066000003066020720178





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790002  
Service Address: LIFT PUMP-G C

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2461 1 MB 0.420  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

5 2461  
C-10 P-19



## Important Information

By participating on Operation Round Up, a few cents per month helps needy families, supports charity organizations and provides college scholarships in your local community. Learn more at [www.preco.coop](http://www.preco.coop).

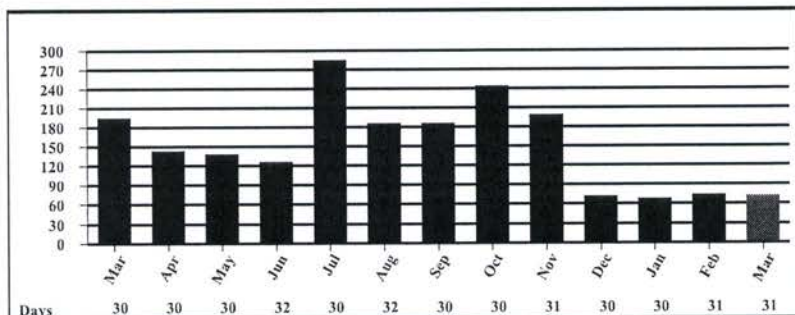
Bill Date: 03/07/2017 Cycle: 3 Board District: 3  
Service Period: 01/30/2017 - 03/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235058	6750	6822	1	72	

Previous Balance	\$30.66
Payment(s) Received	\$-30.66
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	72 kWh @ 0.132792 \$9.56
CPA	72 kWh @ -0.0145 \$-1.04
Polk Property Tax	\$1.23
Gross Receipts Tax	\$0.93
Polk Public Service Tax	\$3.52
Current Charges	\$40.70

Total Amount Due \$40.70



Please return this portion with your payment

Account: 43790002



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

☐ Check here to indicate address or phone # change on back.

Current Balance due 03/28/2017 \$40.70

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



110260043790002000004070000005070030720171





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790002  
Service Address: LIFT PUMP-G C

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2463 1 MB 0.420  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

5 2463  
C-10 P-19



## Important Information

Reporting a power outage just got easier! Just send us a text. Text the word PRECO to 8002823824 to enroll or the word OUT to the same number to report an outage. Details at <http://www.preco.coop/member-services/outage-texting/>

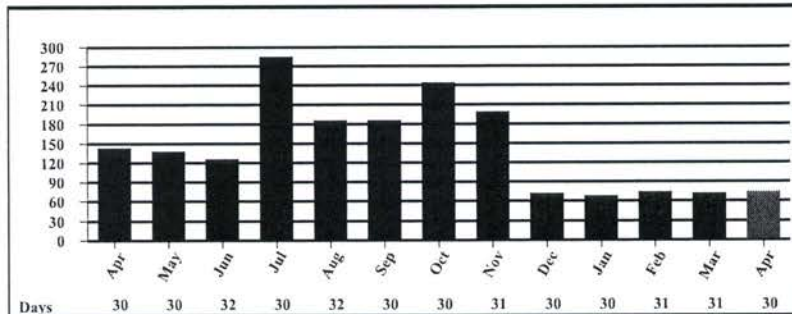
Bill Date: 04/06/2017 Cycle: 3 Board District: 3  
Service Period: 03/02/2017 - 04/01/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235058	6822	6896	1	74	

Previous Balance	\$40.70
Payment(s) Received	\$-40.70
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	74 kWh @ 0.132792 \$9.83
CPA	74 kWh @ -0.0155 \$-1.15
Polk Property Tax	\$1.23
Gross Receipts Tax	\$0.93
Polk Public Service Tax	\$3.53
Current Charges	\$40.87

Total Amount Due \$40.87



Please return this portion with your payment

Account: 43790002



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Current Balance due 04/27/2017 \$40.87

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790002000004087000005087040620174



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790002  
Service Address: LIFT PUMP-G C

Contact Us: 800-282-3824  
[www.presco.coop](http://www.presco.coop)



2503 1 MB 0.420  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

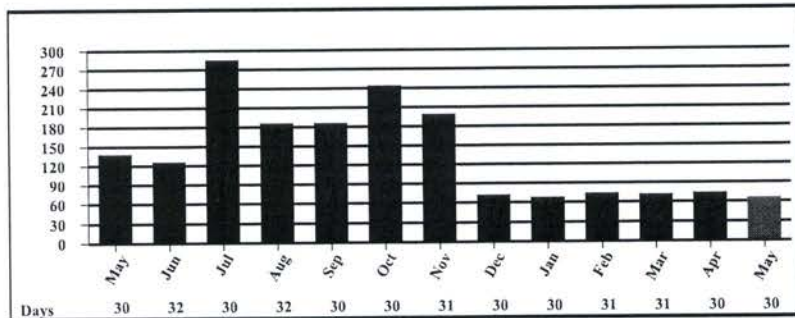
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C-10 P-20



## Important Information

Bill Date: 05/09/2017 Cycle: 3 Board District: 3  
Service Period: 04/01/2017 - 05/01/2017 Rate: GENERAL SERVICE

Meter #	Readings Previous	Present	Meter Multiplier	kWh	kW
917235058	6896	6962	1	66	



Previous Balance		\$40.87
Payment(s) Received		\$-40.87
Adjustments		\$0.00
Late Fee		\$0.00
Balance Forward		\$0.00
Facilities Use Charge		\$26.50
Energy Charge	66 kWh @ 0.132792	\$8.76
CPA	66 kWh @ -0.0155	\$-1.02
Polk Property Tax		\$1.20
Gross Receipts Tax		\$0.91
Polk Public Service Tax		\$3.45
Current Charges		\$39.80
Total Amount Due		\$39.80

Please return this portion with your payment

Account: 43790002



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 05/30/2017 \$39.80

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790002000003980000004980050920174





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790002  
Member # 0  
Service Address: LIFT PUMP-G C

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2469 1 MB 0.420 5 2469  
RIVER UTILITIES C-10 P-19  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

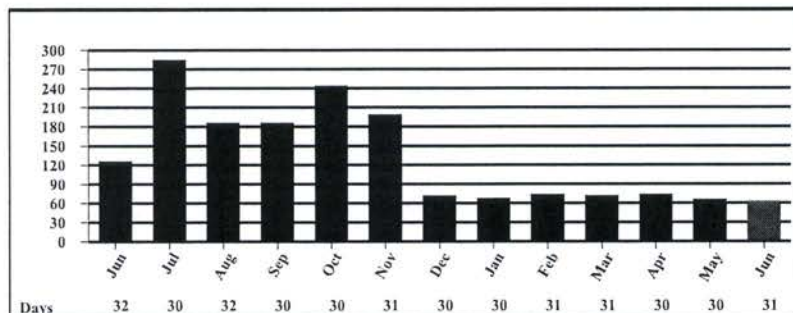


## Important Information

Beware of a current scam that involves an individual who calls and acts as a representative of PRECO. The scammer demands some type of payment and threatens to disconnect your electric service. PRECO does not call their members and demand payment. Be cautious and call PRECO at 1-800-282-3824.

Bill Date: 06/08/2017 Cycle: 3 Board District: 3  
Service Period: 05/01/2017 - 06/01/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235058	6962	7025	1	63	



Previous Balance	\$39.80
Payment(s) Received	\$-39.80
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	63 kWh @ 0.132792 \$8.37
CPA	63 kWh @ -0.0155 \$-0.98
Polk Property Tax	\$1.19
Gross Receipts Tax	\$0.90
Polk Public Service Tax	\$3.42
Current Charges	\$39.40

Total Amount Due \$39.40

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Member #: 0

Account: 43790002

Current Balance due 06/29/2017 \$39.40

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790002000003940000004940060820177





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790002  
Member # 0  
Service Address: LIFT PUMP-G C

Contact Us: 800-282-3824  
[www.presco.coop](http://www.presco.coop)



2508 1 MB 0.420 5 2508  
RIVER UTILITIES C-10 P-20  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



## Important Information

PRECO is now accepting American Express. Use your American Express card for one time or recurring payments. Establishing a recurring payment with your American Express is easy through SmartHub.

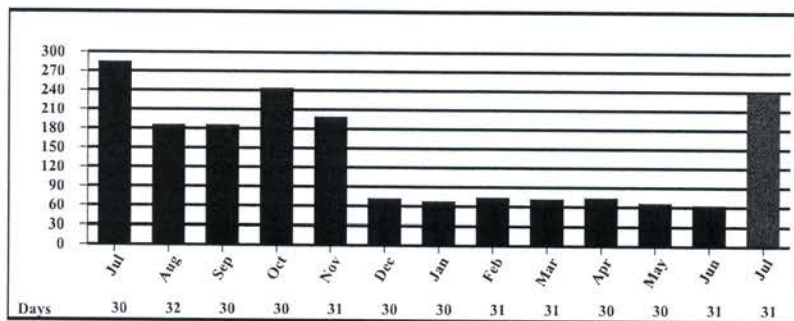
Bill Date: 07/10/2017 Cycle: 3 Board District: 3  
Service Period: 06/01/2017 - 07/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235058	7025	7264	1	239	

Previous Balance	\$39.40
Payment(s) Received	\$-39.40
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	239 kWh @ 0.132792 \$31.74
CPA	239 kWh @ -0.016 \$-3.82
Polk Property Tax	\$1.91
Gross Receipts Tax	\$1.44
Polk Public Service Tax	\$5.11
Current Charges	\$62.88

Total Amount Due \$62.88



Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Member #: 0

Account: 43790002

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 07/31/2017 \$62.88

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790002  
Member # 43790  
Service Address: LIFT PUMP-G C

Contact Us: 800-282-3824  
[www.presco.coop](http://www.presco.coop)



2559 1 MB 0.420 5 2559  
RIVER UTILITIES C-10 P-18  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

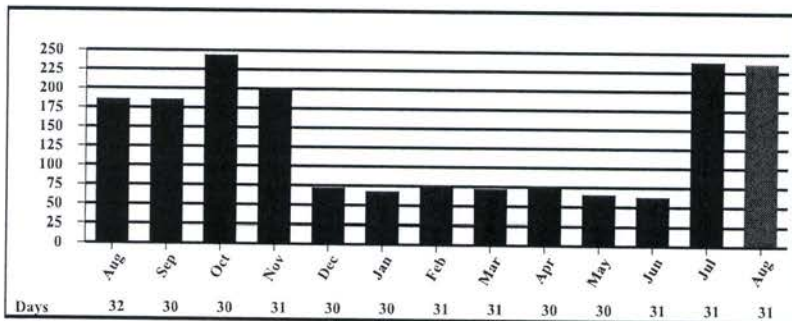


## Important Information

PRECO is now accepting American Express. Use your American Express card for one time or recurring payments. Establishing a recurring payment with your American Express is easy through SmartHub.

Bill Date: 08/10/2017 Cycle: 3 Board District: 3  
Service Period: 07/02/2017 - 08/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235058	7264	7501	1	237	



Previous Balance	\$62.88
Payment(s) Received	\$-62.88
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00
Facilities Use Charge	\$26.50
Energy Charge	237 kWh @ 0.132792 \$31.47
CPA	237 kWh @ -0.016 \$-3.79
Polk Property Tax	\$1.90
Gross Receipts Tax	\$1.44
Polk Public Service Tax	\$5.10
Current Charges	\$62.62
Total Amount Due	\$62.62

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Member #: 43790

Account: 43790002

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 08/31/2017 \$62.62

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Invoice #:

75

## Important Information

Do you need to update your name or add an authorized user to your account? Find the forms on our website at <http://www.presco.coop/member-services/forms/>

Contact Us: 800-282-3824  
[www.presco.coop](http://www.presco.coop)



2563 1 MB 0.420  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

5 2563  
C-10 P-18



Bill Date: 09/07/2017

Cycle: 3

Service Period: 08/02/2017 - 09/01/2017

Board District: 3

Account #	Meter #	Rate	Days	Readings		Meter Multiplier	kWh	kW
Facilities Charge	Energy Charge	Demand Charge	Outdoor Lights	Previous	Present	Current Charges	Balance Forward	Total Due
43790002	917235058	GS-S	30	7501	7681	1	180	0.0
\$26.50	\$21.02	\$0.00	\$0.00	\$0.00	\$7.48	\$55.00	\$0.00	\$55.00
Service Location: LIFT PUMP-G C								
43790008	918572563	GS-S	30	125083	134702	1	9619	35.568
\$26.50	\$1,123.43	\$0.00	\$0.00	\$0.00	\$263.36	\$1,413.29	\$0.00	\$1,413.29
Service Location: 3400 RIVER RANCH BLVD								
43790006	917235050	GS-S	30	12955	13196	1	241	0.0
\$26.50	\$28.14	\$0.00	\$0.00	\$0.00	\$13.11	\$67.75	\$0.00	\$67.75
Service Location:								
43790004	917235120	GS-S	30	317609	326753	1	9144	0.0
\$26.50	\$1,067.95	\$0.00	\$0.00	\$0.00	\$158.32	\$1,252.77	\$0.00	\$1,252.77
Service Location: SEWER PLANT								
43790005	917235122	GS-S	30	23275	24142	1	867	0.0
\$26.50	\$101.26	\$0.00	\$0.00	\$0.00	\$19.03	\$146.79	\$0.00	\$146.79
Service Location: LIFT STATION MAIN								
43790007	31994875	GS-S	25	610	626	1	16	0.0
\$26.50	\$1.86	\$0.00	\$0.00	\$0.00	\$7.11	\$35.47	\$0.00	\$35.47
Service Location: LIFT STATION								
				Total		\$2,971.07	\$0.00	
						Total Amount Due		\$2,971.07

Please return this portion with your payment

Member #: 43790

Invoice: 75



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 09/28/2017

\$2,971.07

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790002000297107000307545090720171



ACCT # 43790008

Oct-16 1348.13

Nov-16 1346.34

Dec-16 1397.74

Jan-17 1418.40

Feb-17 1462.46

Mar-17 1535.14

Apr-17 1562.68

May-17 1623.06

Jun-17 1676.82

Jul-17 1564.78

Aug-17 1489.75

Sep-17 1413.29



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790008  
Service Address: 3400 RIVER RANCH BLVD  
Service Description: WATER PLANT 3PHASE

Member Service: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precocoop](http://www.precocoop)



2387 1 MB 0.416 5 2387  
RIVER UTILITIES C-10 P-18 #  
WESTGATE RIVER RANCH RESORTS ATTN:AP #  
PO BOX 690669 #  
ORLANDO FL 32869-0669

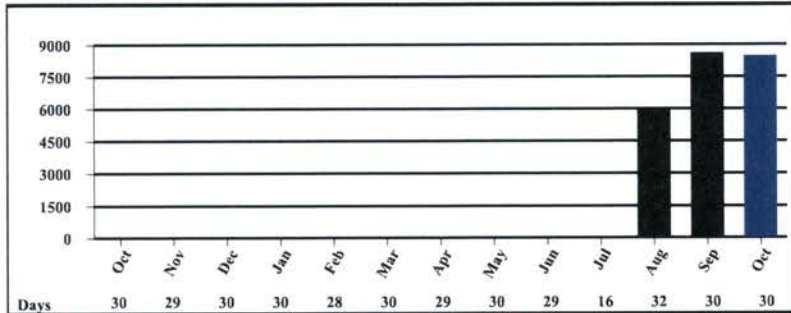


## Important Information

Contact PRECO through SmartHub 24 Hours a day. SmartHub's contact feature allows you to request account changes, service request and/or bill inquiries. Navigate to the Contact Us page, fill in the form and a Customer Care representative will contact you within 1 business day.

Bill Date: 10/06/2016 Cycle: 3 Board District: 3  
Service Period: 08/31/2016 - 09/30/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
918572563	14586	23065	1	8479	
		28.500	1		28.500



Previous Balance	\$1,346.70
Payment(s) Received	\$-1,346.70
Adjustments	\$0.00
Late Fee	\$33.33
<b>Delinquent Balance</b>	<b>\$33.33</b>
Facilities Use Charge	\$25.00
Energy Charge	8,479 kWh @ 0.137772 \$1,168.17
CPA	8,479 kWh @ -0.0145 \$-122.95
Polk Property Tax	\$35.85
Gross Receipts Tax	\$28.36
Polk Public Service Tax	\$90.19
Florida Sales Tax	\$78.84
Polk County Tax	\$11.34
<b>Current Charges</b>	<b>\$1,314.80</b>
<b>Total Amount Due</b>	<b>\$1,348.13</b>

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Account: 43790008

<b>Delinquent Balance due 10/11/2016</b>	<b>\$33.33</b>
<b>Current Balance due 10/27/2016</b>	<b>\$1,314.80</b>
<b>Total Amount due</b>	<b>\$1,348.13</b>

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790008000134813000138060100620167



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790008  
Service Address: 3400 RIVER RANCH BLVD  
Service Description: WATER PLANT 3PHASE

Member Service: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precocoop](http://www.precocoop)



2429 1 MB 0.416 5 2429  
RIVER UTILITIES C-10 P-15 #  
WESTGATE RIVER RANCH RESORTS ATTN:AP #  
PO BOX 690669 #  
ORLANDO FL 32869-0669

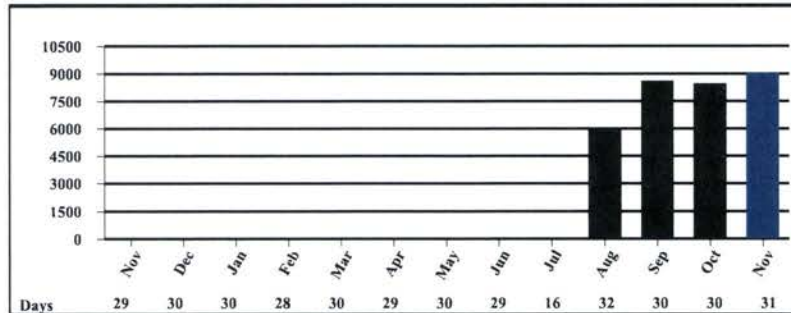


## Important Information

Contact PRECO through SmartHub 24 hours a day.  
Contact PRECO with account changes, service requests and/or bill inquiries through SmartHub. Navigate to the Contact Us page, fill in the form and a Customer Care representative will contact you within 1 business day.

Bill Date: 11/08/2016 Cycle: 3 Board District: 3  
Service Period: 09/30/2016 - 10/31/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
918572563	23065	32112	1	9047	
		30.534	1		30.534



Previous Balance	\$1,348.13
Payment(s) Received	\$-1,348.13
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	9,047 kWh @ 0.132792 \$1,201.37
CPA	9,047 kWh @ -0.0145 \$-131.18
Polk Property Tax	\$36.74
Gross Receipts Tax	\$29.06
Polk Public Service Tax	\$91.44
Florida Sales Tax	\$80.79
Polk County Tax	\$11.62
Current Charges	\$1,346.34

Total Amount Due \$1,346.34

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Account: 43790008

Current Balance due 11/29/2016 \$1,346.34

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790008000134634000137929110820167





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790008  
Service Address: 3400 RIVER RANCH BLVD  
Service Description: WATER PLANT 3PHASE

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.preco.coop](http://www.preco.coop)



2396 1 MB 0.416 5 2396  
RIVER UTILITIES C-10 P-15 #  
WESTGATE RIVER RANCH RESORTS ATTN:AP #  
PO BOX 690669 #  
ORLANDO FL 32869-0669

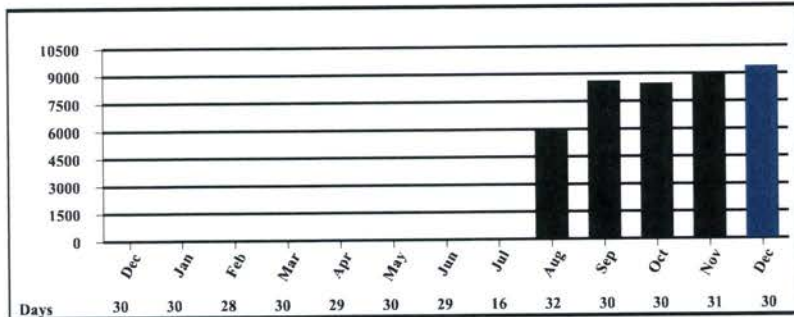


## Important Information

Did you recently receive a new credit card with the embedded security chip? Even though your credit card number didn't change, the expiration date and security code on the back of the card most likely did. To update your bill payment information, visit SmartHub or call us at 1-800-282-3824.

Bill Date: 12/07/2016 Cycle: 3 Board District: 3  
Service Period: 10/31/2016 - 11/30/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
918572563	32112	41513	1	9401	
		31.398	1		31.398



Previous Balance	\$1,346.34
Payment(s) Received	\$-1,346.34
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00
Facilities Use Charge	\$26.50
Energy Charge	9,401 kWh @ 0.132792 \$1,248.38
CPA	9,401 kWh @ -0.0145 \$-136.31
Polk Property Tax	\$38.14
Gross Receipts Tax	\$30.17
Polk Public Service Tax	\$94.91
Florida Sales Tax	\$83.88
Polk County Tax	\$12.07
Current Charges	\$1,397.74
<b>Total Amount Due</b>	<b>\$1,397.74</b>

Please return this portion with your payment

Account: 43790008



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



**Current Balance due 12/28/2016 \$1,397.74**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790008000139774000143194120720167



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790008  
Service Address: 3400 RIVER RANCH BLVD  
Service Description: WATER PLANT 3PHASE

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.presco.coop](http://www.presco.coop)



2357 1 MB 0.416 5 2357  
RIVER UTILITIES C-10 P-14  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

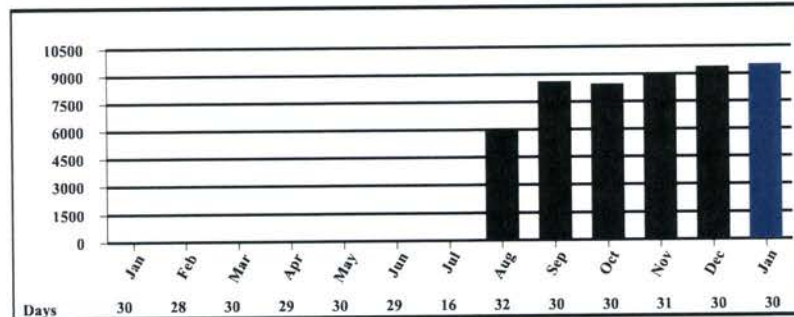


## Important Information

**\$75,000 in College Scholarships Available! Apply now for an Operation Round Up College Scholarship. Visit [www.presco.coop](http://www.presco.coop) for information. Applications must be postmarked by February 28, 2017.**

Bill Date: 01/10/2017 Cycle: 3 Board District: 3  
Service Period: 11/30/2016 - 12/30/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
918572563	41513	51041	1	9528	
		35.826	1		35.826



Previous Balance		\$1,397.74
Payment(s) Received		\$-1,397.74
Adjustments		\$0.00
Late Fee		\$0.00
Balance Forward		\$0.00
Facilities Use Charge		\$26.50
Energy Charge	9,528 kWh @ 0.132792	\$1,265.24
CPA	9,528 kWh @ -0.0145	\$-138.16
Polk Property Tax		\$40.49
Gross Receipts Tax		\$30.62
Polk Public Service Tax		\$96.34
Florida Sales Tax		\$85.12
Polk County Tax		\$12.25
Current Charges		\$1,418.40
Total Amount Due		\$1,418.40

Please return this portion with your payment

Account: 43790008



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

**Current Balance due 01/31/2017 \$1,418.40**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790008000141840000145311011020179





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precio.coop](http://www.precio.coop)



2425 1 MB 0.420 5 2425  
RIVER UTILITIES C-10 P-19  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669



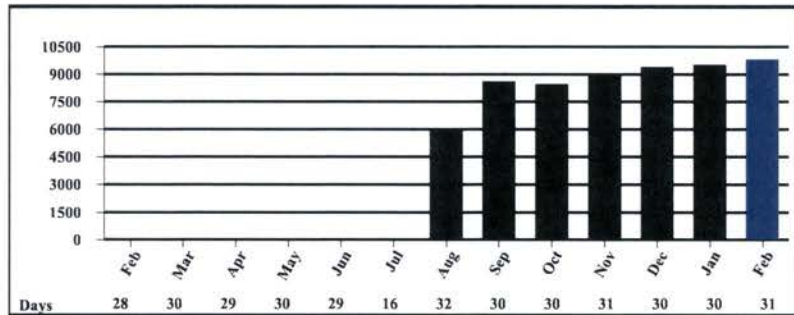
Account # 43790008  
Service Address: 3400 RIVER RANCH BLVD  
Service Description: WATER PLANT 3PHASE

## Important Information

PRECO members are invited to join us on Saturday, March 25, 2017 for PRECO's Annual Membership Meeting at PRECO Park, 220 Knight Road, Wauchula, FL. Registration opens at 10:00 a.m. and the business meeting begins at 1:00 p.m.

Bill Date: 02/07/2017 Cycle: 3 Board District: 3  
Service Period: 12/30/2016 - 01/30/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
918572563	51041	60872	1	9831	
		35.826	1		35.826



Previous Balance	\$1,418.40
Payment(s) Received	\$-1,418.40
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	9,831 kWh @ 0.132792 \$1,305.48
CPA	9,831 kWh @ -0.0145 \$-142.55
Polk Property Tax	\$41.75
Gross Receipts Tax	\$31.57
Polk Public Service Tax	\$99.32
Florida Sales Tax	\$87.76
Polk County Tax	\$12.63
Current Charges	\$1,462.46

Total Amount Due \$1,462.46

Please return this portion with your payment

Account: 43790008



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

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RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Current Balance due 02/28/2017 \$1,462.46

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790008000146246000149825020720173





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790008  
Service Address: 3400 RIVER RANCH BLVD  
Service Description: WATER PLANT 3PHASE

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2459 1 MB 0.420 5 2459  
RIVER UTILITIES C-10 P-19  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

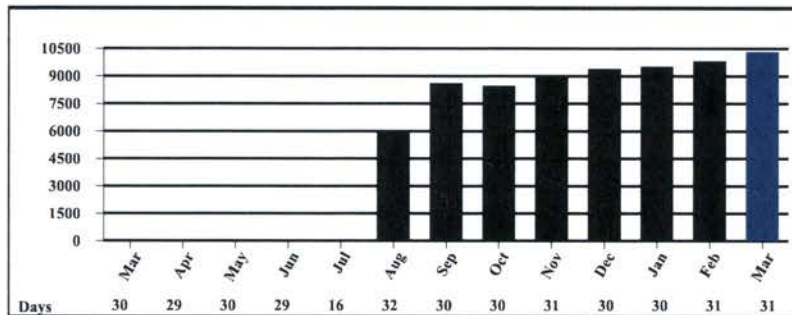


## Important Information

By participating on Operation Round Up, a few cents per month helps needy families, supports charity organizations and provides college scholarships in your local community. Learn more at [www.preco.coop](http://www.preco.coop).

Bill Date: 03/07/2017 Cycle: 3 Board District: 3  
Service Period: 01/30/2017 - 03/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
918572563	60872	71203	1	10331	
		36.570	1		36.570



Previous Balance	\$1,462.46
Payment(s) Received	\$-1,462.46
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	10,331 kWh @ 0.132792 \$1,371.87
CPA	10,331 kWh @ -0.0145 \$-149.80
Polk Property Tax	\$43.82
Gross Receipts Tax	\$33.14
Polk Public Service Tax	\$104.23
Florida Sales Tax	\$92.12
Polk County Tax	\$13.26
Current Charges	\$1,535.14

Total Amount Due \$1,535.14

Please return this portion with your payment

Account: 43790008



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Current Balance due 03/28/2017 \$1,535.14

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790008000153514000157270030720170



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790008  
Service Address: 3400 RIVER RANCH BLVD  
Service Description: WATER PLANT 3PHASE

Contact Us: 800-282-3824  
[www.precocoop.com](http://www.precocoop.com)



2461 1 MB 0.420 5 2461  
RIVER UTILITIES C-10 P-19  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

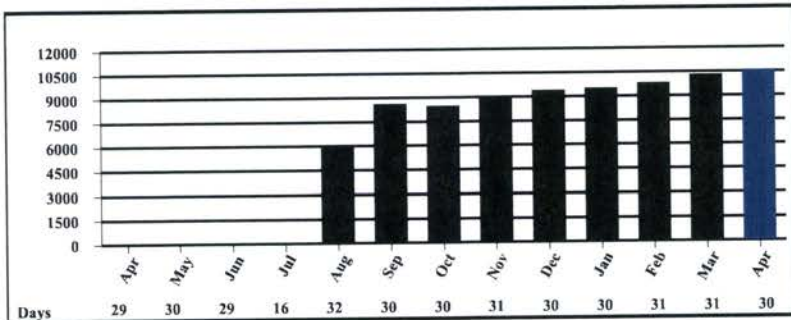


## Important Information

Reporting a power outage just got easier! Just send us a text. Text the word PRECO to 8002823824 to enroll or the word OUT to the same number to report an outage. Details at <http://www.precocoop.com/member-services/outage-texting/>

Bill Date: 04/06/2017 Cycle: 3 Board District: 3  
Service Period: 03/02/2017 - 04/01/2017 Rate: GENERAL SERVICE

Meter #	Readings Previous	Readings Present	Meter Multiplier	kWh	kW
918572563	71203	81817	1	10614	
		31.566	1		31.566



Previous Balance	\$1,535.14
Payment(s) Received	\$-1,535.14
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00
Facilities Use Charge	\$26.50
Energy Charge	10,614 kWh @ 0.132792 \$1,409.45
CPA	10,614 kWh @ -0.0155 \$-164.52
Polk Property Tax	\$44.63
Gross Receipts Tax	\$33.75
Polk Public Service Tax	\$105.56
Florida Sales Tax	\$93.81
Polk County Tax	\$13.50
Current Charges	\$1,562.68
Total Amount Due	\$1,562.68

Please return this portion with your payment

Account: 43790008



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Current Balance due 04/27/2017 \$1,562.68

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790008000156268000160073040620177





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790008  
Service Address: 3400 RIVER RANCH BLVD  
Service Description: WATER PLANT 3PHASE

Contact Us: 800-282-3824  
[www.presco.coop](http://www.presco.coop)



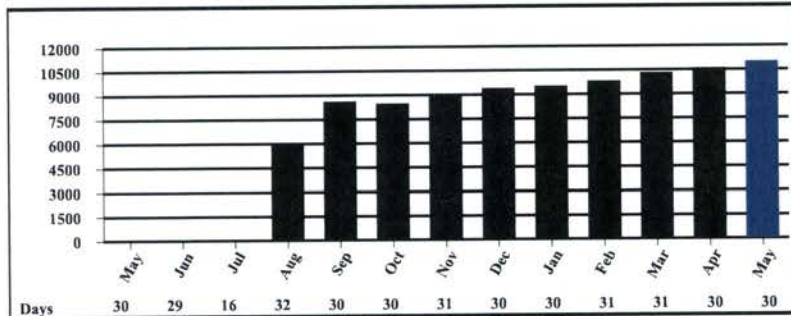
2501 1 MB 0.420 5 2501  
RIVER UTILITIES C-10 P-20  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669



## Important Information

Bill Date: 05/09/2017 Cycle: 3 Board District: 3  
Service Period: 04/01/2017 - 05/01/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
918572563	81817	92850	1	11033	
		37.902	1		37.902



Previous Balance		\$1,562.68
Payment(s) Received		\$-1,562.68
Adjustments		\$0.00
Late Fee		\$0.00
Balance Forward		\$0.00
Facilities Use Charge		\$26.50
Energy Charge	11,033 kWh @ 0.132792	\$1,465.09
CPA	11,033 kWh @ -0.0155	\$-171.01
Polk Property Tax		\$46.35
Gross Receipts Tax		\$35.05
Polk Public Service Tax		\$109.62
Florida Sales Tax		\$97.44
Polk County Tax		\$14.02
Current Charges		\$1,623.06
Total Amount Due		\$1,623.06

Please return this portion with your payment

Account: 43790008



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Current Balance due 05/30/2017 \$1,623.06

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790008000162306000166258050920176



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790008  
Member # 0  
Service Address: 3400 RIVER RANCH BLVD  
Service Description: WATER PLANT 3PHASE

Contact Us: 800-282-3824  
[www.precocoop.com](http://www.precocoop.com)



2467 1 MB 0.420 5 2467  
RIVER UTILITIES C-10 P-19  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

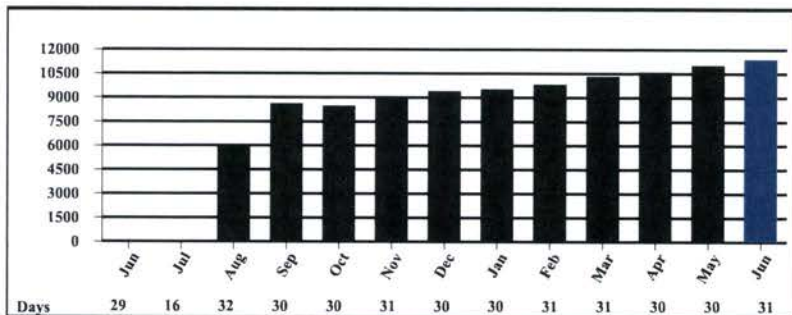


## Important Information

Beware of a current scam that involves an individual who calls and acts as a representative of PRECO. The scammer demands some type of payment and threatens to disconnect your electric service. PRECO does not call their members and demand payment. Be cautious and call PRECO at 1-800-282-3824.

Bill Date: 06/08/2017 Cycle: 3 Board District: 3  
Service Period: 05/01/2017 - 06/01/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
918572563	92850	104256	1	11406	
		38.400	1		38.400



Previous Balance	\$1,623.06
Payment(s) Received	\$-1,623.06
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00
Facilities Use Charge	\$26.50
Energy Charge	11,406 kWh @ 0.132792 \$1,514.63
CPA	11,406 kWh @ -0.0155 \$-176.79
Polk Property Tax	\$47.89
Gross Receipts Tax	\$36.21
Polk Public Service Tax	\$113.23
Florida Sales Tax	\$100.67
Polk County Tax	\$14.48
Current Charges	\$1,676.82
Total Amount Due	\$1,676.82

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Member #: 0

Account: 43790008

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Current Balance due 06/29/2017 \$1,676.82

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790008000167682000171764060820176





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790008  
Member # 0  
Service Address: 3400 RIVER RANCH BLVD  
Service Description: WATER PLANT 3PHASE

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2506 1 MB 0.420 5 2506  
RIVER UTILITIES C-10 P-20  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

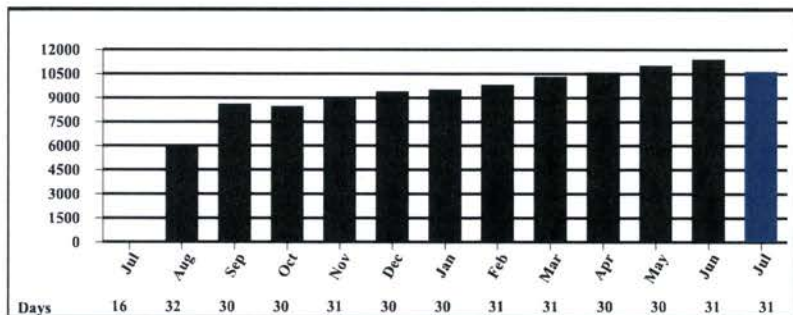


## Important Information

PRECO is now accepting American Express. Use your American Express card for one time or recurring payments. Establishing a recurring payment with your American Express is easy through SmartHub.

Bill Date: 07/10/2017 Cycle: 3 Board District: 3  
Service Period: 06/01/2017 - 07/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
918572563	104256	114931	1	10675	
		37.668	1		37.668



Previous Balance	\$1,676.82
Payment(s) Received	\$-1,676.82
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00
Facilities Use Charge	\$26.50
Energy Charge	10,675 kWh @ 0.132792 \$1,417.55
CPA	10,675 kWh @ -0.016 \$-170.80
Polk Property Tax	\$44.69
Gross Receipts Tax	\$33.79
Polk Public Service Tax	\$105.58
Florida Sales Tax	\$93.95
Polk County Tax	\$13.52
Current Charges	\$1,564.78
Total Amount Due	\$1,564.78

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

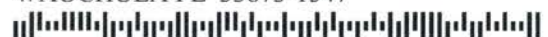


Member #: 0

Account: 43790008

Current Balance due 07/31/2017 \$1,564.78

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790008000156478000160285071020172



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790008  
Member # 43790  
Service Address: 3400 RIVER RANCH BLVD  
Service Description: WATER PLANT 3PHASE

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2557 1 MB 0.420 5 2557  
RIVER UTILITIES C-10 P-18  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

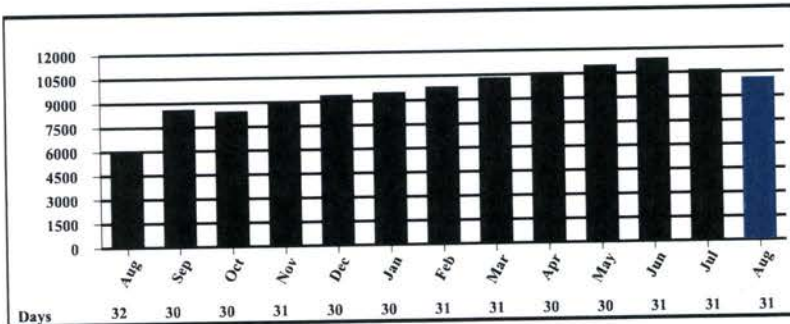


## Important Information

PRECO is now accepting American Express. Use your American Express card for one time or recurring payments. Establishing a recurring payment with your American Express is easy through SmartHub.

Bill Date: 08/10/2017 Cycle: 3 Board District: 3  
Service Period: 07/02/2017 - 08/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
918572563	114931	125083	1	10152	
		36.048	1		36.048



Previous Balance	\$1,564.78
Payment(s) Received	\$-1,564.78
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00
Facilities Use Charge	\$26.50
Energy Charge	10,152 kWh @ 0.132792 \$1,348.10
CPA	10,152 kWh @ -0.016 \$-162.43
Polk Property Tax	\$42.55
Gross Receipts Tax	\$32.17
Polk Public Service Tax	\$100.55
Florida Sales Tax	\$89.44
Polk County Tax	\$12.87
Current Charges	\$1,489.75
Total Amount Due	\$1,489.75

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Member #: 43790

Account: 43790008

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS ATTN:AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Current Balance due 08/31/2017 \$1,489.75

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Invoice #:

75

Contact Us: 800-282-3824  
[www.presco.coop](http://www.presco.coop)



2563 1 MB 0.420  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

5 2563  
C-10 P-18



## Important Information

Do you need to update your name or add an authorized user to your account? Find the forms on our website at <http://www.presco.coop/member-services/forms/>

Bill Date: 09/07/2017

Cycle: 3

Service Period: 08/02/2017 - 09/01/2017

Board District: 3

Account #	Meter #	Rate	Days	Readings		Meter Multiplier	kWh	kW
				Previous	Present			
Facilities Charge	Energy Charge	Demand Charge	Outdoor Lights	Other Charges	Taxes	Current Charges	Balance Forward	Total Due
43790002	917235058	GS-S	30	7501	7681	1	180	0.0
\$26.50	\$21.02	\$0.00	\$0.00	\$0.00	\$7.48	\$55.00	\$0.00	\$55.00
Service Location: LIFT PUMP-G C								
43790008	918572563	GS-S	30	125083	134702	1	9619	35.568
\$26.50	\$1,123.43	\$0.00	\$0.00	\$0.00	\$263.36	\$1,413.29	\$0.00	\$1,413.29
Service Location: 3400 RIVER RANCH BLVD								
43790006	917235050	GS-S	30	12955	13196	1	241	0.0
\$26.50	\$28.14	\$0.00	\$0.00	\$0.00	\$13.11	\$67.75	\$0.00	\$67.75
Service Location:								
43790004	917235120	GS-S	30	317609	326753	1	9144	0.0
\$26.50	\$1,067.95	\$0.00	\$0.00	\$0.00	\$158.32	\$1,252.77	\$0.00	\$1,252.77
Service Location: SEWER PLANT								
43790005	917235122	GS-S	30	23275	24142	1	867	0.0
\$26.50	\$101.26	\$0.00	\$0.00	\$0.00	\$19.03	\$146.79	\$0.00	\$146.79
Service Location: LIFT STATION MAIN								
43790007	31994875	GS-S	25	610	626	1	16	0.0
\$26.50	\$1.86	\$0.00	\$0.00	\$0.00	\$7.11	\$35.47	\$0.00	\$35.47
Service Location: LIFT STATION								
				Total		\$2,971.07	\$0.00	
						Total Amount Due		\$2,971.07

Please return this portion with your payment

Member #: 43790

Invoice: 75



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Current Balance due 09/28/2017

\$2,971.07

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

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ACCT # 43790006

Oct-16	106.35
Nov-16	75.08
Dec-16	54.18
Jan-17	143.97
Feb-17	299.82
Mar-17	336.16
Apr-17	289.82
May-17	69.08
Jun-17	43.12
Jul-17	58.87
Aug-17	71.77
Sep-17	67.75





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790006  
Service Address:

Member Service: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.presco.coop](http://www.presco.coop)



2388 1 MB 0.416 5 2388  
RIVER UTILITIES C-10 P-18  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

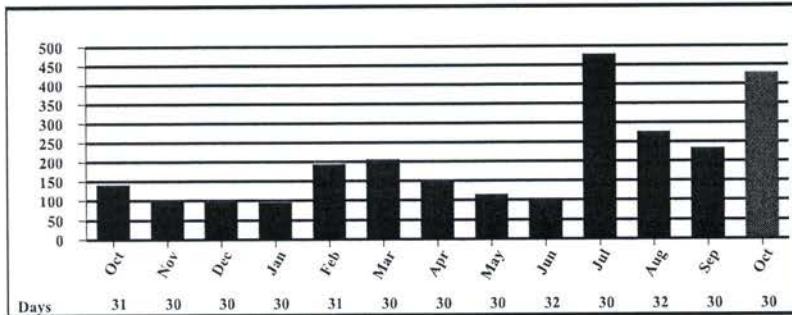


## Important Information

Contact PRECO through SmartHub 24 Hours a day. SmartHub's contact feature allows you to request account changes, service request and/or bill inquiries. Navigate to the Contact Us page, fill in the form and a Customer Care representative will contact you within 1 business day.

Bill Date: 10/06/2016 Cycle: 3 Board District: 3  
Service Period: 08/31/2016 - 09/30/2016 Rate: GENERAL SERVICE

Meter #	Readings Previous	Readings Present	Meter Multiplier	kWh	kW
917235050	4864	5294	1	430	



Previous Balance	\$66.96
Payment(s) Received	\$-66.96
Adjustments	\$0.00
Late Fee	\$10.00
<b>Delinquent Balance</b>	<b>\$10.00</b>
Facilities Use Charge	\$25.00
Energy Charge	430 kWh @ 0.137772 \$59.24
CPA	430 kWh @ -0.0145 \$-6.24
Polk Property Tax	\$2.61
Gross Receipts Tax	\$2.07
Polk Public Service Tax	\$7.09
Florida Sales Tax	\$5.75
Polk County Tax	\$0.83
<b>Current Charges</b>	<b>\$96.35</b>
<b>Total Amount Due</b>	<b>\$106.35</b>

Please return this portion with your payment

Account: 43790006



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



**Total Balance due 10/27/2016 \$106.35**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790006000010635000011635100620168



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790006  
Service Address:

Member Service: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precio.coop](http://www.precio.coop)



2430 1 MB 0.416  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

5 2430  
C-10 P-15

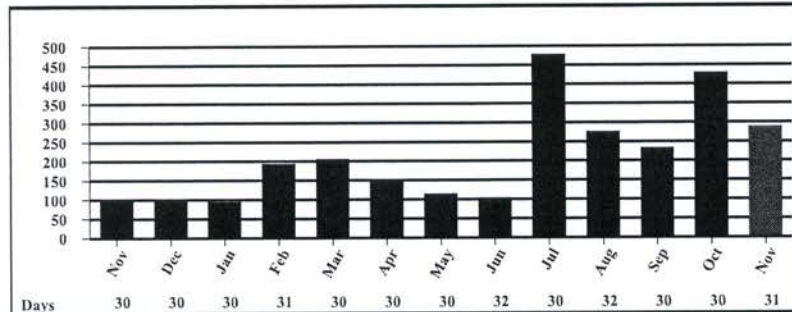


## Important Information

Contact PRECO through SmartHub 24 hours a day.  
Contact PRECO with account changes, service requests  
and/or bill inquiries through SmartHub. Navigate to  
the Contact Us page, fill in the form and a Customer  
Care representative will contact you within 1 business  
day.

Bill Date: 11/08/2016 Cycle: 3 Board District: 3  
Service Period: 09/30/2016 - 10/31/2016 Rate: GENERAL SERVICE

Meter #	Readings Previous	Readings Present	Meter Multiplier	kWh	kW
917235050	5294	5583	1	289	



Previous Balance	\$106.35
Payment(s) Received	\$-106.35
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00
Facilities Use Charge	\$26.50
Energy Charge	289 kWh @ 0.132792 \$38.38
CPA	289 kWh @ -0.0145 \$-4.19
Polk Property Tax	\$2.03
Gross Receipts Tax	\$1.61
Polk Public Service Tax	\$5.64
Florida Sales Tax	\$4.47
Polk County Tax	\$0.64
Current Charges	\$75.08
<b>Total Amount Due</b>	<b>\$75.08</b>

Please return this portion with your payment

Account: 43790006



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

**Current Balance due 11/29/2016 \$75.08**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790006000007508000008508110820166





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account #  
Service Address:

43790006

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.presco.coop](http://www.presco.coop)



2397 1 MB 0.416 5 2397  
RIVER UTILITIES C-10 P-16 #  
WESTGATE RIVER RANCH RESORTS #  
(LIFT STATION-RV) ATTN: AP #  
PO BOX 690669  
ORLANDO FL 32869-0669

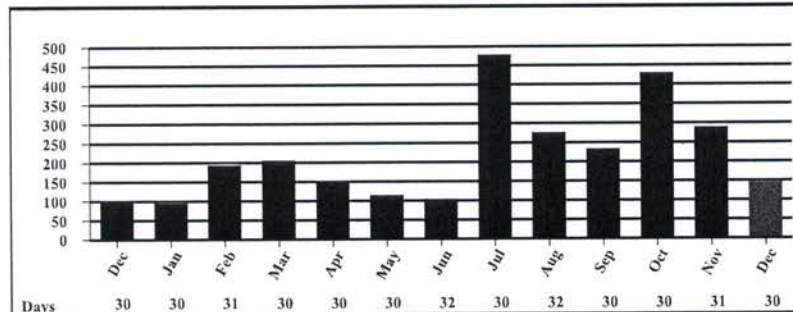


## Important Information

Did you recently receive a new credit card with the embedded security chip? Even though your credit card number didn't change, the expiration date and security code on the back of the card most likely did. To update your bill payment information, visit SmartHub or call us at 1-800-282-3824.

Bill Date: 12/07/2016 Cycle: 3 Board District: 3  
Service Period: 10/31/2016 - 11/30/2016 Rate: GENERAL SERVICE

Meter #	Readings Previous	Readings Present	Meter Multiplier	kWh	kW
917235050	5583	5728	1	145	



Previous Balance	\$75.08
Payment(s) Received	\$-75.08
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00
Facilities Use Charge	\$26.50
Energy Charge	145 kWh @ 0.132792 \$19.25
CPA	145 kWh @ -0.0145 \$-2.10
Polk Property Tax	\$1.46
Gross Receipts Tax	\$1.16
Polk Public Service Tax	\$4.23
Florida Sales Tax	\$3.22
Polk County Tax	\$0.46
Current Charges	\$54.18
Total Amount Due	\$54.18

Please return this portion with your payment

Account: 43790006



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 12/28/2016 \$54.18

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790006000005418000006418120720165



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account #  
Service Address:

43790006

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.presco.coop](http://www.presco.coop)



2358 1 MB 0.416 5 2358  
RIVER UTILITIES C-10 P-14  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

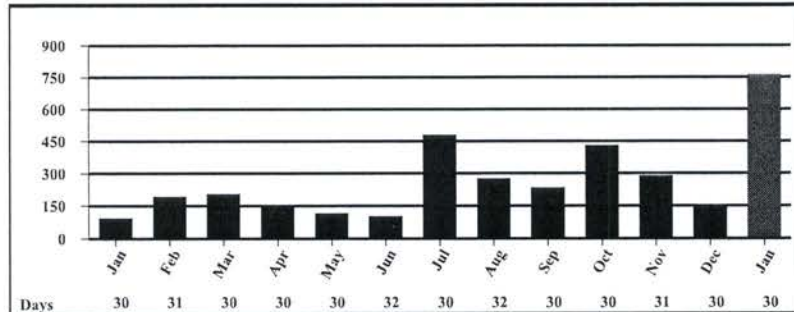


## Important Information

**\$75,000 in College Scholarships Available!** Apply now for an Operation Round Up College Scholarship. Visit [www.presco.coop](http://www.presco.coop) for information. Applications must be postmarked by February 28, 2017.

Bill Date: 01/10/2017 Cycle: 3 Board District: 3  
Service Period: 11/30/2016 - 12/30/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235050	5728	6490	1	762	



Previous Balance	\$54.18
Payment(s) Received	\$-54.18
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	762 kWh @ 0.132792 \$101.19
CPA	762 kWh @ -0.0145 \$-11.05
Polk Property Tax	\$4.09
Gross Receipts Tax	\$3.10
Polk Public Service Tax	\$10.29
Florida Sales Tax	\$8.61
Polk County Tax	\$1.24
Current Charges	\$143.97
<b>Total Amount Due</b>	<b>\$143.97</b>

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Account: 43790006

**Current Balance due 01/31/2017 \$143.97**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790006000014397000015397011020175





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790006  
Service Address:

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precocoop](http://www.precocoop)



2426 1 MB 0.420 5 2426  
RIVER UTILITIES C-10 P-19  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

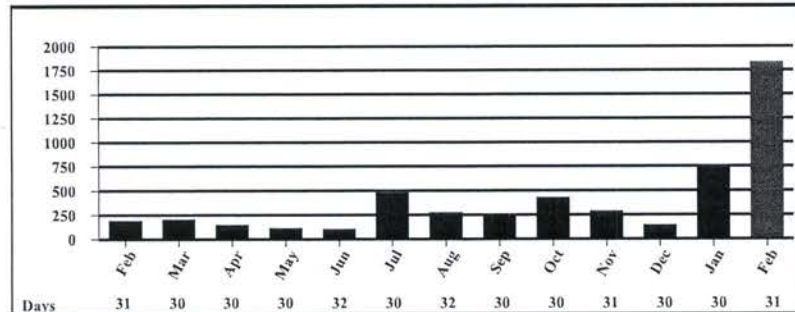


## Important Information

PRECO members are invited to join us on Saturday, March 25, 2017 for PRECO's Annual Membership Meeting at PRECO Park, 220 Knight Road, Wauchula, FL. Registration opens at 10:00 a.m. and the business meeting begins at 1:00 p.m.

Bill Date: 02/07/2017 Cycle: 3 Board District: 3  
Service Period: 12/30/2016 - 01/30/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235050	6490	8324	1	1834	



Previous Balance	\$143.97
Payment(s) Received	\$-143.97
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	1,834 kWh @ 0.132792 \$243.54
CPA	1,834 kWh @ -0.0145 \$-26.59
Polk Property Tax	\$8.55
Gross Receipts Tax	\$6.46
Polk Public Service Tax	\$20.82
Florida Sales Tax	\$17.96
Polk County Tax	\$2.58
Current Charges	\$299.82

Total Amount Due \$299.82

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

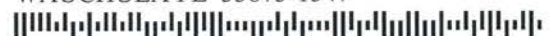
☐ Check here to indicate address or phone # change on back.



Account: 43790006

Current Balance due 02/28/2017 \$299.82

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



110260043790006000029982000030982020720173



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790006  
Service Address:

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2460 1 MB 0.420 5 2460  
RIVER UTILITIES C-10 P-19  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

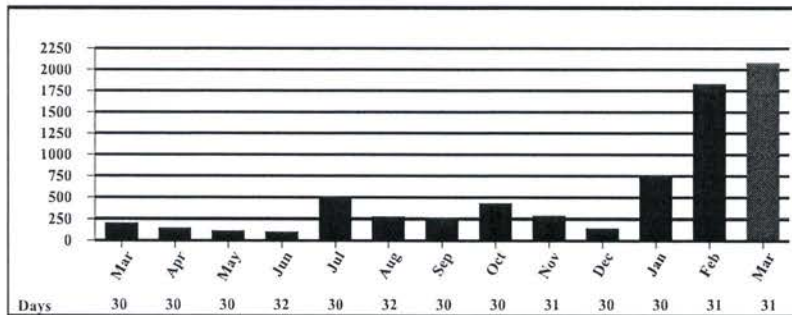


## Important Information

By participating on Operation Round Up, a few cents per month helps needy families, supports charity organizations and provides college scholarships in your local community. Learn more at [www.preco.coop](http://www.preco.coop).

Bill Date: 03/07/2017 Cycle: 3 Board District: 3  
Service Period: 01/30/2017 - 03/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235050	8324	10408	1	2084	



Previous Balance		\$299.82
Payment(s) Received		\$-299.82
Adjustments		\$0.00
Late Fee		\$0.00
Balance Forward		\$0.00
Facilities Use Charge		\$26.50
Energy Charge	2,084 kWh @ 0.132792	\$276.74
CPA	2,084 kWh @ -0.0145	\$-30.22
Polk Property Tax		\$9.58
Gross Receipts Tax		\$7.25
Polk Public Service Tax		\$23.27
Florida Sales Tax		\$20.14
Polk County Tax		\$2.90
Current Charges		\$336.16
Total Amount Due		\$336.16

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
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RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Account: 43790006

Current Balance due 03/28/2017 \$336.16

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790006000033616000034616030720177





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

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Account # 43790006  
Service Address:

Contact Us: 800-282-3824  
[www.precop.coop](http://www.precop.coop)



2462 1 MB 0.420 5 2462  
RIVER UTILITIES C-10 P-19  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

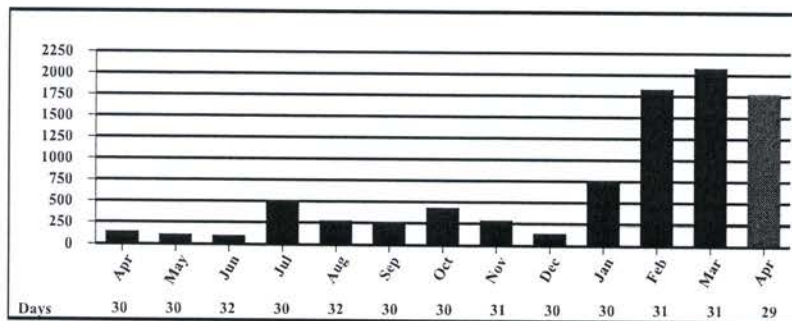


## Important Information

Reporting a power outage just got easier! Just send us a text. Text the word PRECO to 8002823824 to enroll or the word OUT to the same number to report an outage. Details at <http://www.precop.coop/member-services/outage-texting/>

Bill Date: 04/06/2017 Cycle: 3 Board District: 3  
Service Period: 03/02/2017 - 03/31/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235050	10408	12189	1	1781	



Previous Balance	\$336.16
Payment(s) Received	\$-336.16
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00
Facilities Use Charge	\$26.50
Energy Charge	1,781 kWh @ 0.132792 \$236.50
CPA	1,781 kWh @ -0.0155 \$-27.61
Polk Property Tax	\$8.26
Gross Receipts Tax	\$6.25
Polk Public Service Tax	\$20.05
Florida Sales Tax	\$17.37
Polk County Tax	\$2.50
Current Charges	\$289.82
<b>Total Amount Due</b>	<b>\$289.82</b>

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

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Account: 43790006

**Current Balance due 04/27/2017 \$289.82**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



110260043790006000028982000029982040620174



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790006  
Service Address:

## Important Information

Contact Us: 800-282-3824  
[www.presco.coop](http://www.presco.coop)

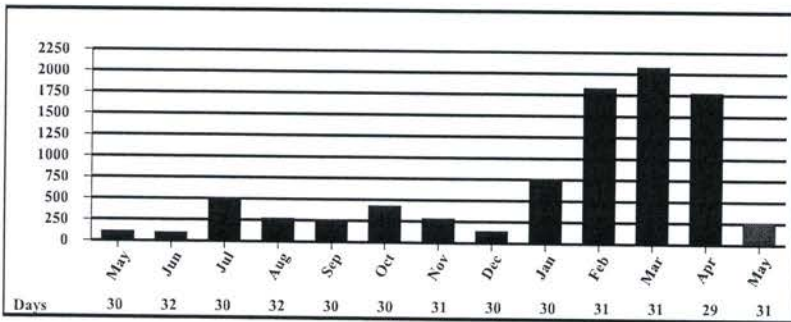


2502 1 MB 0.420 5 2502  
RIVER UTILITIES C-10 P-20  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Bill Date: 05/09/2017 Cycle: 3 Board District: 3  
Service Period: 03/31/2017 - 05/01/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235050	12189	12438	1	249	



Previous Balance	\$289.82
Payment(s) Received	\$-289.82
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	249 kWh @ 0.132792 \$33.07
CPA	249 kWh @ -0.0155 \$-3.86
Polk Property Tax	\$1.96
Gross Receipts Tax	\$1.48
Polk Public Service Tax	\$5.23
Florida Sales Tax	\$4.11
Polk County Tax	\$0.59
Current Charges	\$69.08
Total Amount Due	\$69.08

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account: 43790006

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Current Balance due 05/30/2017 \$69.08

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790006000006908000007908050920178





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790006  
Member # 0  
Service Address:

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2468 1 MB 0.420 5 2468  
RIVER UTILITIES C-10 P-19  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

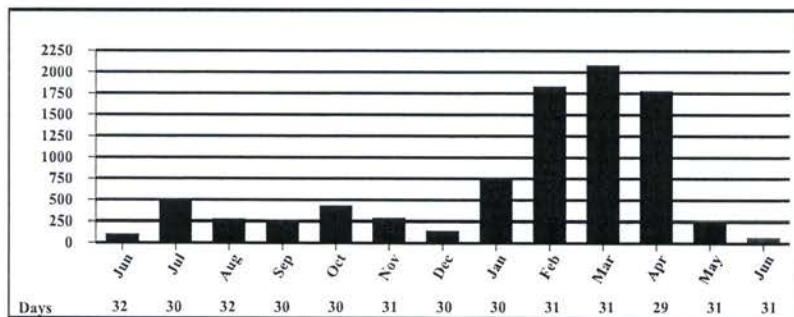


## Important Information

Beware of a current scam that involves an individual who calls and acts as a representative of PRECO. The scammer demands some type of payment and threatens to disconnect your electric service. PRECO does not call their members and demand payment. Be cautious and call PRECO at 1-800-282-3824.

Bill Date: 06/08/2017 Cycle: 3 Board District: 3  
Service Period: 05/01/2017 - 06/01/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235050	12438	12507	1	69	



Previous Balance	\$69.08
Payment(s) Received	\$-69.08
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	69 kWh @ 0.132792 \$9.16
CPA	69 kWh @ -0.0155 \$-1.07
Polk Property Tax	\$1.21
Gross Receipts Tax	\$0.92
Polk Public Service Tax	\$3.48
Florida Sales Tax	\$2.55
Polk County Tax	\$0.37
Current Charges	\$43.12
<b>Total Amount Due</b>	<b>\$43.12</b>

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Member #: 0

Account: 43790006

**Current Balance due 06/29/2017 \$43.12**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790006000004312000005312060820171



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790006  
Member # 0  
Service Address:

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2507 1 MB 0.420 5 2507  
RIVER UTILITIES C-10 P-20  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

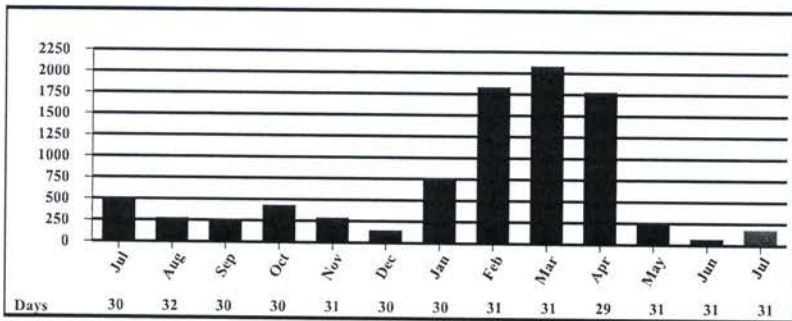


## Important Information

PRECO is now accepting American Express. Use your American Express card for one time or recurring payments. Establishing a recurring payment with your American Express is easy through SmartHub.

Bill Date: 07/10/2017 Cycle: 3 Board District: 3  
Service Period: 06/01/2017 - 07/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235050	12507	12686	1	179	



Previous Balance	\$43.12
Payment(s) Received	\$-43.12
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	179 kWh @ 0.132792 \$23.77
CPA	179 kWh @ -0.016 \$-2.86
Polk Property Tax	\$1.66
Gross Receipts Tax	\$1.26
Polk Public Service Tax	\$4.54
Florida Sales Tax	\$3.50
Polk County Tax	\$0.50
Current Charges	\$58.87
Total Amount Due	\$58.87

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Member #: 0 Account: 43790006

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Current Balance due 07/31/2017 \$58.87

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790006000005887000006887071020177





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790006  
Member # 43790  
Service Address:

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2558 1 MB 0.420 5 2558  
RIVER UTILITIES C-10 P-18  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

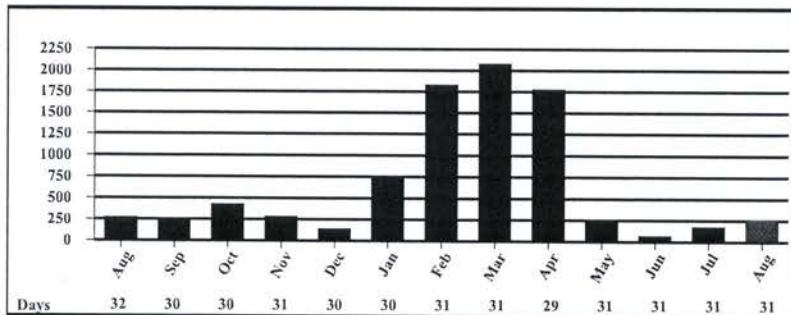


## Important Information

PRECO is now accepting American Express. Use your American Express card for one time or recurring payments. Establishing a recurring payment with your American Express is easy through SmartHub.

Bill Date: 08/10/2017 Cycle: 3 Board District: 3  
Service Period: 07/02/2017 - 08/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235050	12686	12955	1	269	



Previous Balance	\$58.87
Payment(s) Received	\$-58.87
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00
Facilities Use Charge	\$26.50
Energy Charge	269 kWh @ 0.132792 \$35.72
CPA	269 kWh @ -0.016 \$-4.30
Polk Property Tax	\$2.03
Gross Receipts Tax	\$1.54
Polk Public Service Tax	\$5.40
Florida Sales Tax	\$4.27
Polk County Tax	\$0.61
Current Charges	\$71.77
Total Amount Due	\$71.77

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
(LIFT STATION-RV) ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

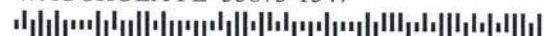


Member #: 43790

Account: 43790006

Current Balance due 08/31/2017 \$71.77

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790006000007177000008177081020177



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Invoice #:

75

Contact Us: 800-282-3824  
[www.precio.coop](http://www.precio.coop)



## Important Information

Do you need to update your name or add an authorized user to your account? Find the forms on our website at <http://www.precio.coop/member-services/forms/>

2563 1 MB 0.420 5 2563  
RIVER UTILITIES C-10 P-18  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Bill Date: 09/07/2017

Cycle: 3

Service Period: 08/02/2017 - 09/01/2017

Board District: 3

Account #	Meter #	Rate	Days	Readings		Meter Multiplier	kWh	kW
				Previous	Present			
Facilities Charge	Energy Charge	Demand Charge	Outdoor Lights	Other Charges	Taxes	Current Charges	Balance Forward	Total Due
43790002	917235058	GS-S	30	7501	7681	1	180	0.0
\$26.50	\$21.02	\$0.00	\$0.00	\$0.00	\$7.48	\$55.00	\$0.00	\$55.00
Service Location: LIFT PUMP-G C								
43790008	918572563	GS-S	30	125083	134702	1	9619	35.568
\$26.50	\$1,123.43	\$0.00	\$0.00	\$0.00	\$263.36	\$1,413.29	\$0.00	\$1,413.29
Service Location: 3400 RIVER RANCH BLVD								
43790006	917235050	GS-S	30	12955	13196	1	241	0.0
\$26.50	\$28.14	\$0.00	\$0.00	\$0.00	\$13.11	\$67.75	\$0.00	\$67.75
Service Location: Lift Station-RV								
43790004	917235120	GS-S	30	317609	326753	1	9144	0.0
\$26.50	\$1,067.95	\$0.00	\$0.00	\$0.00	\$158.32	\$1,252.77	\$0.00	\$1,252.77
Service Location: SEWER PLANT								
43790005	917235122	GS-S	30	23275	24142	1	867	0.0
\$26.50	\$101.26	\$0.00	\$0.00	\$0.00	\$19.03	\$146.79	\$0.00	\$146.79
Service Location: LIFT STATION MAIN								
43790007	31994875	GS-S	25	610	626	1	16	0.0
\$26.50	\$1.86	\$0.00	\$0.00	\$0.00	\$7.11	\$35.47	\$0.00	\$35.47
Service Location: LIFT STATION								
Total						\$2,971.07	\$0.00	
Total Amount Due								\$2,971.07

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

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RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
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PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Member #: 43790

Invoice: 75

Current Balance due 09/28/2017 \$2,971.07

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790002000297107000307545090720171



ACCT # 43790004

Oct-16	1550.64
Nov-16	1435.47
Dec-16	1298.98
Jan-17	745.50
Feb-17	1293.01
Mar-17	1253.48
Apr-17	1296.74
May-17	1184.82
Jun-17	1211.53
Jul-17	1310.88
Aug-17	1320.49
Sep-17	1252.77



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790004  
Service Address: SEWER PLANT

Member Service: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precop.coop](http://www.precop.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

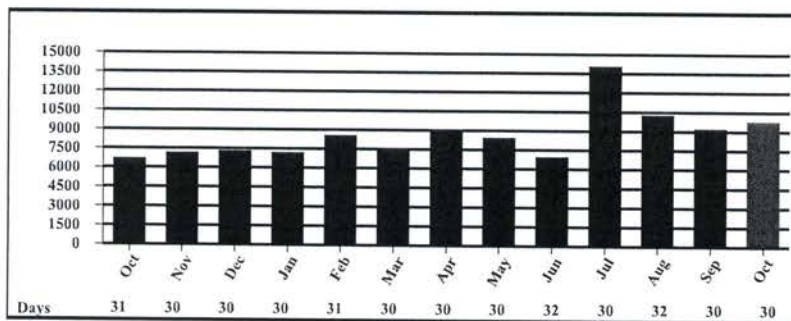


## Important Information

Contact PRECO through SmartHub 24 Hours a day. SmartHub's contact feature allows you to request account changes, service request and/or bill inquiries. Navigate to the Contact Us page, fill in the form and a Customer Care representative will contact you within 1 business day.

Bill Date: 10/06/2016 Cycle: 3 Board District: 3  
Service Period: 08/31/2016 - 09/30/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235120	215691	225493	1	9802	



Previous Balance	\$1,436.90
Payment(s) Received	\$-1,436.90
Adjustments	\$0.00
Late Fee	\$35.55
<b>Delinquent Balance</b>	<b>\$35.55</b>

Facilities Use Charge	\$25.00
Energy Charge	9,802 kWh @ 0.137772 \$1,350.44
CPA	9,802 kWh @ -0.0145 \$-142.13
Polk Property Tax	\$41.32
Gross Receipts Tax	\$32.68
Polk Public Service Tax	\$103.85
Florida Sales Tax	\$90.86
Polk County Tax	\$13.07
<b>Current Charges</b>	<b>\$1,515.09</b>

**Total Amount Due \$1,550.64**

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Account: 43790004

<b>Delinquent Balance due 10/11/2016</b>	<b>\$35.55</b>
<b>Current Balance due 10/27/2016</b>	<b>\$1,515.09</b>
<b>Total Amount due</b>	<b>\$1,550.64</b>

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790004  
Service Address: SEWER PLANT

Member Service: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precocoop](http://www.precocoop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

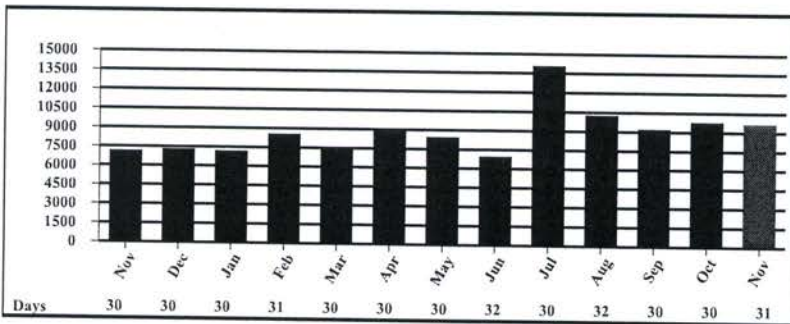


## Important Information

Contact PRECO through SmartHub 24 hours a day.  
Contact PRECO with account changes, service requests  
and/or bill inquiries through SmartHub. Navigate to  
the Contact Us page, fill in the form and a Customer  
Care representative will contact you within 1 business  
day.

Bill Date: 11/08/2016 Cycle: 3 Board District: 3  
Service Period: 09/30/2016 - 10/31/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235120	225493	235154	1	9661	



Previous Balance	\$1,550.64
Payment(s) Received	\$-1,550.64
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	9,661 kWh @ 0.132792 \$1,282.90
CPA	9,661 kWh @ -0.0145 \$-140.08
Polk Property Tax	\$39.17
Gross Receipts Tax	\$30.99
Polk Public Service Tax	\$97.46
Florida Sales Tax	\$86.14
Polk County Tax	\$12.39
Current Charges	\$1,435.47

Total Amount Due \$1,435.47

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account: 43790004

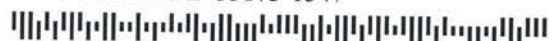
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 11/29/2016 \$1,435.47

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790004  
Service Address: SEWER PLANT

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.presco.coop](http://www.presco.coop)



## Important Information

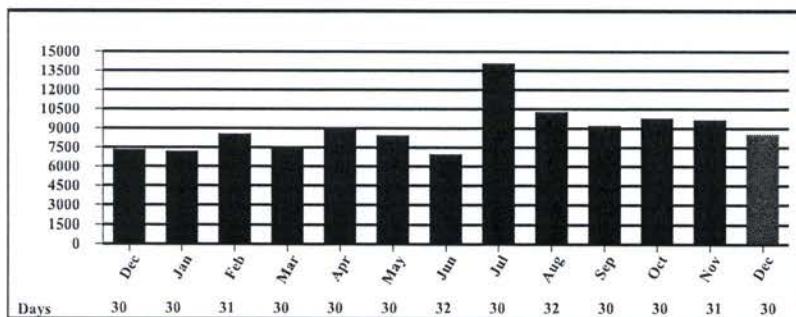
Did you recently receive a new credit card with the embedded security chip? Even though your credit card number didn't change, the expiration date and security code on the back of the card most likely did. To update your bill payment information, visit SmartHub or call us at 1-800-282-3824.

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Bill Date: 12/07/2016 Cycle: 3 Board District: 3  
Service Period: 10/31/2016 - 11/30/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235120	235154	243702	1	8548	



Previous Balance	\$1,435.47
Payment(s) Received	\$-1,435.47
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	8,548 kWh @ 0.132792 \$1,135.11
CPA	8,548 kWh @ -0.0145 \$-123.95
Polk Property Tax	\$34.76
Gross Receipts Tax	\$27.50
Polk Public Service Tax	\$86.55
Florida Sales Tax	\$76.44
Polk County Tax	\$11.00
Current Charges	\$1,273.91

Total Amount Due \$1,273.91

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Account: 43790004

Current Balance due 12/28/2016 \$1,273.91

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790004  
Service Address: SEWER PLANT

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.presco.coop](http://www.presco.coop)



1 1 SP 0.465  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

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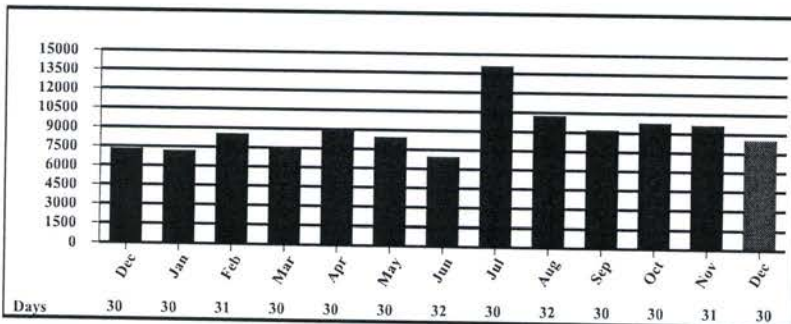


## Important Information

**\$75,000 in College Scholarships Available! Apply now for an Operation Round Up College Scholarship. Visit [www.presco.coop](http://www.presco.coop) for information. Applications must be postmarked by February 28, 2017.**

Bill Date: 12/07/2016 Cycle: 3 Board District: 3  
Service Period: 10/31/2016 - 11/30/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235120	235154	243702	1	8548	



Previous Balance	\$1,435.47
Payment(s) Received	\$-1,435.47
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	\$1,135.11
CPA	\$-123.95
Polk Property Tax	\$34.76
Gross Receipts Tax	\$27.50
Polk Public Service Tax	\$86.55
Florida Sales Tax	\$-1,015.31
Polk County Tax	\$-146.09
Current Charges	\$25.07

**Total Amount Due \$25.07**

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account: 43790004

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

**Current Balance due 12/28/2016 \$25.07**  
**Corrected Bill**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790004000002507000002507120720166

**Peace River Electric Cooperative, Inc.**

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative 

Account # 43790004  
Service Address: SEWER PLANT

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.preco.coop](http://www.preco.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

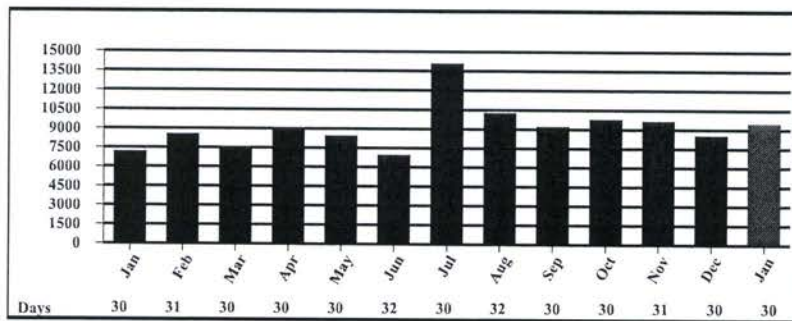


## Important Information

**\$75,000 in College Scholarships Available! Apply now for an Operation Round Up College Scholarship. Visit [www.preco.coop](http://www.preco.coop) for information. Applications must be postmarked by February 28, 2017.**

Bill Date: 01/10/2017	Cycle: 3	Board District: 3
Service Period: 11/30/2016 - 12/30/2016	Rate: GENERAL SERVICE	

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235120	243702	253202	1	9500	



Previous Balance		\$1,273.91
Payment(s) Received		\$-1,273.91
Adjustments		\$-1,248.84
Late Fee		\$0.00
Balance Forward		<u>\$-1,248.84</u>
Facilities Use Charge		\$26.50
Energy Charge	9,500 kWh @ 0.132792	\$1,261.52
CPA	9,500 kWh @ -0.0145	\$-137.75
Polk Property Tax		\$40.37
Gross Receipts Tax		\$30.53
Polk Public Service Tax		\$96.07
Transfer To/From AR		<u>\$-571.74</u>
Current Charges		<u>\$745.50</u>
Total Amount Due		<u>\$-503.34</u>

Please return this portion with your payment



**Peace River Electric Cooperative, Inc.**

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative 



**RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669**

**Main Contact #: (863) 692-2947**

Account: 43790004

**Credit Balance - DO NOT PAY** **\$-503.34**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547

☐ Check here to indicate address or phone # change on back.

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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790004  
Service Address: SEWER PLANT

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precop.coop](http://www.precop.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

## Important Information

PRECO members are invited to join us on Saturday, March 25, 2017 for PRECO's Annual Membership Meeting at PRECO Park, 220 Knight Road, Wauchula, FL. Registration opens at 10:00 a.m. and the business meeting begins at 1:00 p.m.



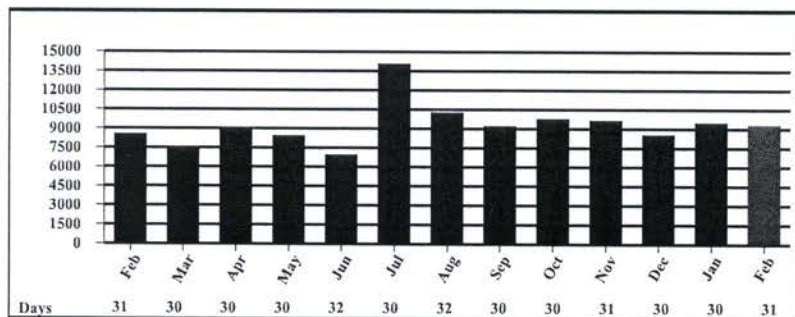
Bill Date: 02/07/2017 Cycle: 3 Board District: 3  
Service Period: 12/30/2016 - 01/30/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235120	253202	262523	1	9321	

Previous Balance	\$-503.34
Payment(s) Received	\$0.00
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$-503.34

Facilities Use Charge	\$26.50
Energy Charge	9,321 kWh @ 0.132792 \$1,237.75
CPA	9,321 kWh @ -0.0145 \$-135.15
Polk Property Tax	\$39.63
Gross Receipts Tax	\$29.97
Polk Public Service Tax	\$94.31
Current Charges	<b>\$1,293.01</b>

Total Amount Due \$789.67



Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account: 43790004

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 02/28/2017 \$789.67

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790004  
Service Address: SEWER PLANT

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



## Important Information

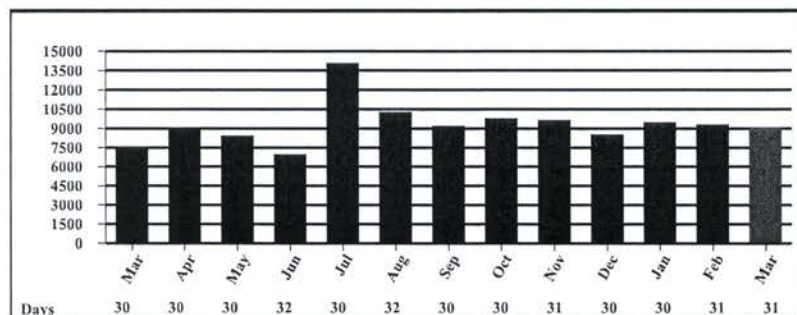
By participating on Operation Round Up, a few cents per month helps needy families, supports charity organizations and provides college scholarships in your local community. Learn more at [www.preco.coop](http://www.preco.coop).

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Bill Date: 03/07/2017 Cycle: 3 Board District: 3  
Service Period: 01/30/2017 - 03/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235120	262523	271552	1	9029	



Previous Balance	\$789.67
Payment(s) Received	\$-789.67
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	9,029 kWh @ 0.132792 \$1,198.98
CPA	9,029 kWh @ -0.0145 \$-130.92
Polk Property Tax	\$38.42
Gross Receipts Tax	\$29.05
Polk Public Service Tax	\$91.45
Current Charges	\$1,253.48

Total Amount Due \$1,253.48

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Account: 43790004

Current Balance due 03/28/2017 \$1,253.48

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790004  
Service Address: SEWER PLANT

Contact Us: 800-282-3824  
[www.precop.coop](http://www.precop.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

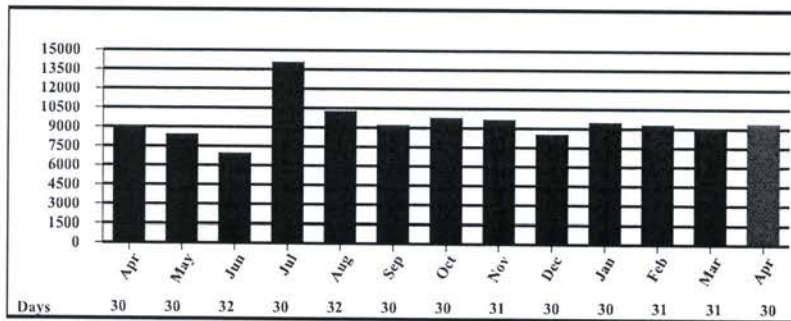


## Important Information

Reporting a power outage just got easier! Just send us a text. Text the word PRECO to 8002823824 to enroll or the word OUT to the same number to report an outage. Details at <http://www.precop.coop/member-services/outage-texting/>

Bill Date: 04/06/2017 Cycle: 3 Board District: 3  
Service Period: 03/02/2017 - 04/01/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235120	271552	280984	1	9432	



Previous Balance	\$1,253.48
Payment(s) Received	\$-1,253.48
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	9,432 kWh @ 0.132792 \$1,252.49
CPA	9,432 kWh @ -0.0155 \$-146.20
Polk Property Tax	\$39.76
Gross Receipts Tax	\$30.07
Polk Public Service Tax	\$94.12
Current Charges	\$1,296.74

Total Amount Due \$1,296.74

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account: 43790004

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Current Balance due 04/27/2017 \$1,296.74

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790004000129674000132780040620176



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790004  
Service Address: SEWER PLANT

## Important Information

**Capital Credit Allocation:** The amount of capital you provided PRECO for 2016 was \$1,156.36. Margins are allocated to each member in proportion to the amount of electricity purchased during the year. The Capital Credits are maintained until the Board of Directors determines it is financially feasible to disburse them through the retirement process. The total amount of unretired capital you have provided PRECO is \$20,063.79.

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)

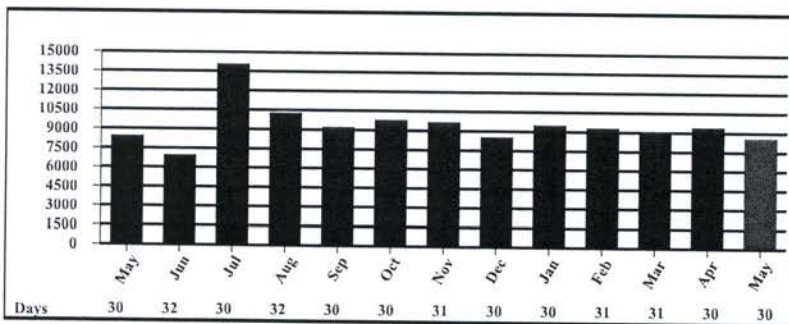


RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Bill Date: 05/09/2017 Cycle: 3 Board District: 3  
Service Period: 04/01/2017 - 05/01/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235120	280984	289582	1	8598	



Previous Balance	\$1,296.74
Payment(s) Received	\$-1,296.74
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	8,598 kWh @ 0.132792 \$1,141.75
CPA	8,598 kWh @ -0.0155 \$-133.27
Polk Property Tax	\$36.33
Gross Receipts Tax	\$27.47
Polk Public Service Tax	\$86.04
Current Charges	\$1,184.82

Total Amount Due \$1,184.82

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account: 43790004

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 05/30/2017 \$1,184.82

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790004  
Member # 43790  
Service Address: SEWER PLANT

Contact Us: 800-282-3824  
[www.precop.coop](http://www.precop.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

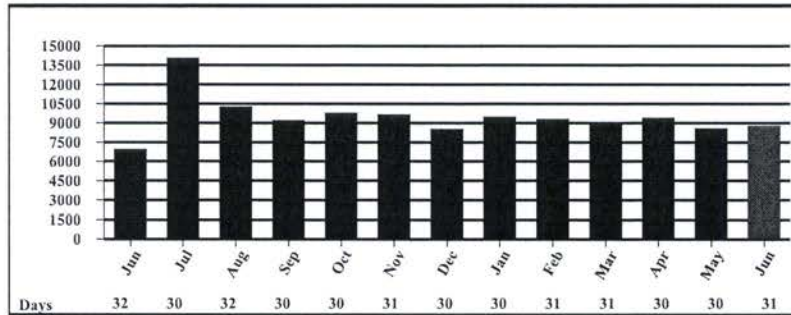


## Important Information

Beware of a current scam that involves an individual who calls and acts as a representative of PRECO. The scammer demands some type of payment and threatens to disconnect your electric service. PRECO does not call their members and demand payment. Be cautious and call PRECO at 1-800-282-3824.

Bill Date: 06/08/2017 Cycle: 3 Board District: 3  
Service Period: 05/01/2017 - 06/01/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235120	289582	298379	1	8797	



Previous Balance	\$1,184.82
Payment(s) Received	\$-1,184.82
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	8,797 kWh @ 0.132792 \$1,168.17
CPA	8,797 kWh @ -0.0155 \$-136.35
Polk Property Tax	\$37.15
Gross Receipts Tax	\$28.09
Polk Public Service Tax	\$87.97
Current Charges	\$1,211.53

Total Amount Due \$1,211.53

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Member #: 43790

Account: 43790004

Current Balance due 06/29/2017 \$1,211.53

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790004000121153000124056060820173



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790004  
Member # 43790  
Service Address: SEWER PLANT

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

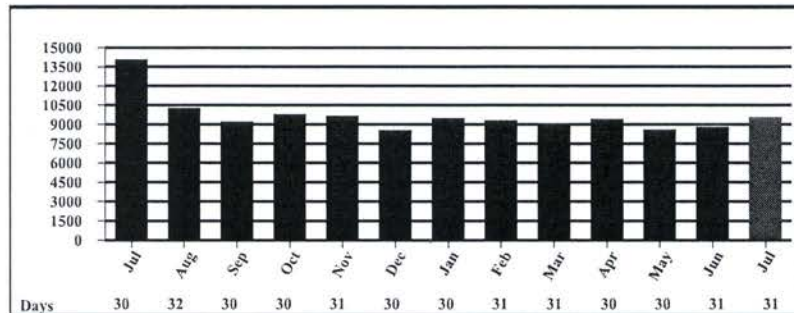


## Important Information

PRECO is now accepting American Express. Use your American Express card for one time or recurring payments. Establishing a recurring payment with your American Express is easy through SmartHub.

Bill Date: 07/10/2017 Cycle: 3 Board District: 3  
Service Period: 06/01/2017 - 07/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235120	298379	307958	1	9579	



Previous Balance	\$1,211.53
Payment(s) Received	\$-1,211.53
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	9,579 kWh @ 0.132792 \$1,272.01
CPA	9,579 kWh @ -0.016 \$-153.26
Polk Property Tax	\$40.20
Gross Receipts Tax	\$30.40
Polk Public Service Tax	\$95.03
Current Charges	\$1,310.88

Total Amount Due \$1,310.88

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

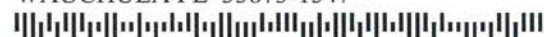


Member #: 43790

Account: 43790004

Current Balance due 07/31/2017 \$1,310.88

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790004000131088000134224071020177





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790004  
Member # 43790  
Service Address: SEWER PLANT

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

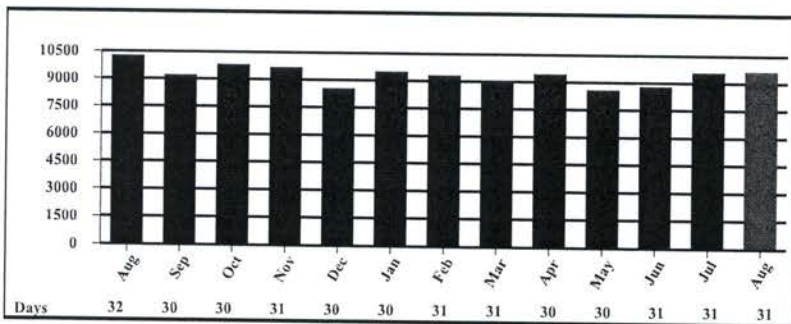


## Important Information

PRECO is now accepting American Express. Use your American Express card for one time or recurring payments. Establishing a recurring payment with your American Express is easy through SmartHub.

Bill Date: 08/10/2017 Cycle: 3 Board District: 3  
Service Period: 07/02/2017 - 08/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235120	307958	317609	1	9651	



Previous Balance	\$1,310.88
Payment(s) Received	\$-1,310.88
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	9,651 kWh @ 0.132792 \$1,281.58
CPA	9,651 kWh @ -0.016 \$-154.42
Polk Property Tax	\$40.49
Gross Receipts Tax	\$30.62
Polk Public Service Tax	\$95.72
Current Charges	\$1,320.49

Total Amount Due \$1,320.49

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Member #: 43790

Account: 43790004

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 08/31/2017 \$1,320.49

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790004000132049000135208081020176



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Invoice #:

75

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2563 1 MB 0.420  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

5 2563  
C-10 P-18



## Important Information

Do you need to update your name or add an authorized user to your account? Find the forms on our website at <http://www.preco.coop/member-services/forms/>

Bill Date: 09/07/2017

Cycle: 3

Service Period: 08/02/2017 - 09/01/2017

Board District: 3

Account #	Meter #	Rate	Days	Readings		Meter Multiplier	kWh	kW
Facilities Charge	Energy Charge	Demand Charge	Outdoor Lights	Previous Other Charges	Present Taxes	Current Charges	Balance Forward	Total Due
43790002	917235058	GS-S	30	7501	7681	1	180	0.0
\$26.50	\$21.02	\$0.00	\$0.00	\$0.00	\$7.48	\$55.00	\$0.00	\$55.00
Service Location: LIFT PUMP-G C								
43790008	918572563	GS-S	30	125083	134702	1	9619	35.568
\$26.50	\$1,123.43	\$0.00	\$0.00	\$0.00	\$263.36	\$1,413.29	\$0.00	\$1,413.29
Service Location: 3400 RIVER RANCH BLVD								
43790006	917235050	GS-S	30	12955	13196	1	241	0.0
\$26.50	\$28.14	\$0.00	\$0.00	\$0.00	\$13.11	\$67.75	\$0.00	\$67.75
Service Location:								
43790004	917235120	GS-S	30	317609	326753	1	9144	0.0
\$26.50	\$1,067.95	\$0.00	\$0.00	\$0.00	\$158.32	\$1,252.77	\$0.00	\$1,252.77
Service Location: SEWER PLANT								
43790005	917235122	GS-S	30	23275	24142	1	867	0.0
\$26.50	\$101.26	\$0.00	\$0.00	\$0.00	\$19.03	\$146.79	\$0.00	\$146.79
Service Location: LIFT STATION MAIN								
43790007	31994875	GS-S	25	610	626	1	16	0.0
\$26.50	\$1.86	\$0.00	\$0.00	\$0.00	\$7.11	\$35.47	\$0.00	\$35.47
Service Location: LIFT STATION								
Total						\$2,971.07	\$0.00	
Total Amount Due								\$2,971.07

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Member #: 43790

Invoice: 75

Current Balance due 09/28/2017

\$2,971.07

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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ACCT # 43790005

Oct-16	190.38
Nov-16	152.46
Dec-16	68.22
Jan-17	81.99
Feb-17	102.99
Mar-17	95.81
Apr-17	101.41
May-17	87.99
Jun-17	74.97
Jul-17	153.48
Aug-17	157.62
Sep-17	146.79



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Member Service: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precio.coop](http://www.precio.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



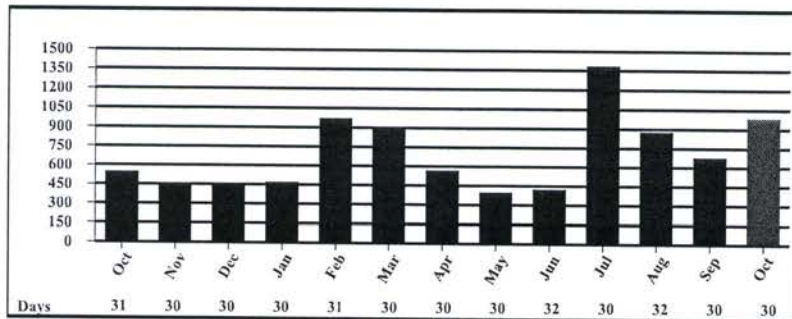
Account # 43790005  
Service Address: LIFT STATION MAIN

## Important Information

Contact PRECO through SmartHub 24 Hours a day. SmartHub's contact feature allows you to request account changes, service request and/or bill inquiries. Navigate to the Contact Us page, fill in the form and a Customer Care representative will contact you within 1 business day.

Bill Date: 10/06/2016 Cycle: 3 Board District: 3  
Service Period: 08/31/2016 - 09/30/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235122	16496	17481	1	985	



Previous Balance	\$134.90
Payment(s) Received	\$-134.90
Adjustments	\$0.00
Late Fee	\$10.00
<b>Delinquent Balance</b>	<b>\$10.00</b>
Facilities Use Charge	\$25.00
Energy Charge	985 kWh @ 0.137772 \$135.71
CPA	985 kWh @ -0.0145 \$-14.28
Polk Property Tax	\$4.91
Gross Receipts Tax	\$3.88
Polk Public Service Tax	\$12.82
Florida Sales Tax	\$10.79
Polk County Tax	\$1.55
<b>Current Charges</b>	<b>\$180.38</b>
<b>Total Amount Due</b>	<b>\$190.38</b>

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

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Account: 43790005

**Total Balance due 10/27/2016 \$190.38**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790005  
Service Address: LIFT STATION MAIN

Member Service: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precio.coop](http://www.precio.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

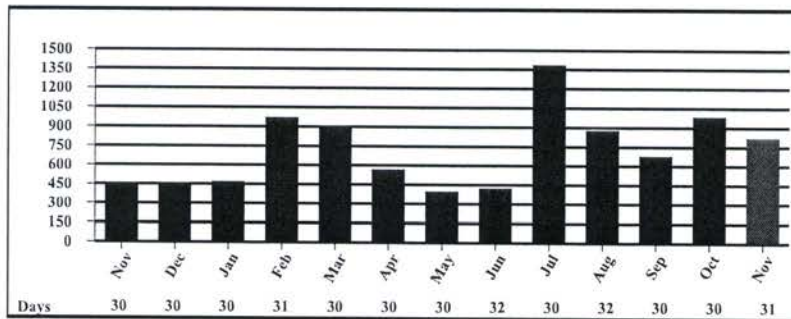


## Important Information

Contact PRECO through SmartHub 24 hours a day.  
Contact PRECO with account changes, service requests  
and/or bill inquiries through SmartHub. Navigate to  
the Contact Us page, fill in the form and a Customer  
Care representative will contact you within 1 business  
day.

Bill Date: 11/08/2016 Cycle: 3 Board District: 3  
Service Period: 09/30/2016 - 10/31/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235122	17481	18303	1	822	



Previous Balance	\$190.38
Payment(s) Received	\$-190.38
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	822 kWh @ 0.132792 \$109.16
CPA	822 kWh @ -0.0145 \$-11.92
Polk Property Tax	\$4.15
Gross Receipts Tax	\$3.28
Polk Public Service Tax	\$10.86
Florida Sales Tax	\$9.12
Polk County Tax	\$1.31
Current Charges	\$152.46
Total Amount Due	\$152.46

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account: 43790005

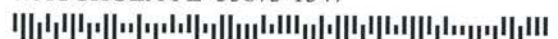
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 11/29/2016 \$152.46

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790005000015246000016246110820161



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790005  
Service Address: LIFT STATION MAIN

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.presco.coop](http://www.presco.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

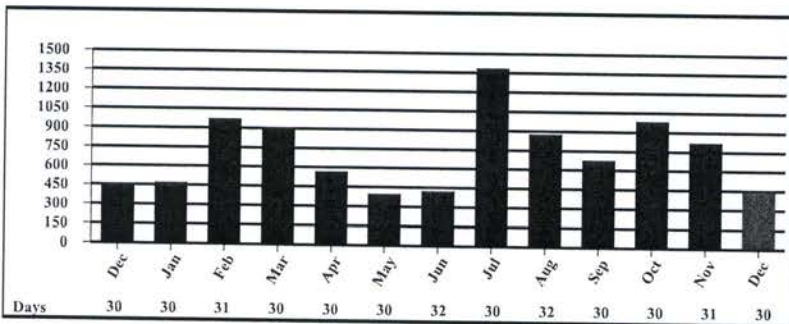


## Important Information

Did you recently receive a new credit card with the embedded security chip? Even though your credit card number didn't change, the expiration date and security code on the back of the card most likely did. To update your bill payment information, visit SmartHub or call us at 1-800-282-3824.

Bill Date: 12/07/2016 Cycle: 3 Board District: 3  
Service Period: 10/31/2016 - 11/30/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235122	18303	18744	1	441	



Previous Balance	\$152.46
Payment(s) Received	\$-152.46
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	441 kWh @ 0.132792 \$58.56
CPA	441 kWh @ -0.0145 \$-6.39
Polk Property Tax	\$2.64
Gross Receipts Tax	\$2.08
Polk Public Service Tax	\$7.13
Florida Sales Tax	\$5.80
Polk County Tax	\$0.83
Current Charges	\$97.15

Total Amount Due \$97.15

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account: 43790005

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 12/28/2016 \$97.15

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790005000009715000010715120720163



**Peace River Electric Cooperative, Inc.**

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative 

Account # 43790005  
Service Address: LIFT STATION MAIN

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.preco.coop](http://www.preco.coop)



1 1 SP 0.465  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

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		#	#
		#	#

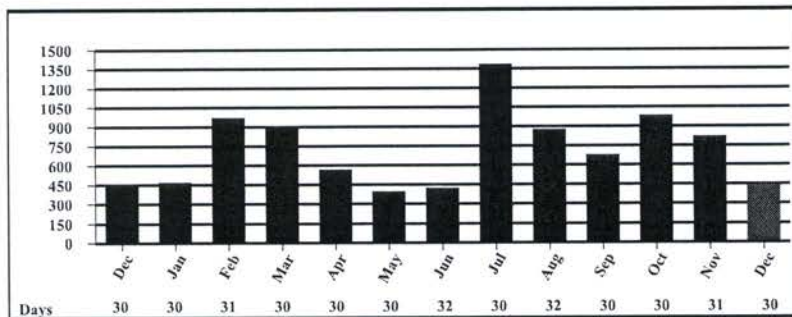


## Important Information

**\$75,000 in College Scholarships Available! Apply now for an Operation Round Up College Scholarship. Visit [www.preco.coop](http://www.preco.coop) for information. Applications must be postmarked by February 28, 2017.**

Bill Date: 12/07/2016	Cycle: 3	Board District: 3
Service Period: 10/31/2016 - 11/30/2016	Rate: GENERAL SERVICE	

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235122	18303	18744	1	441	



Previous Balance	\$152.46
Payment(s) Received	\$-152.46
Adjustments	\$0.00
Late Fee	\$0.00
<b>Balance Forward</b>	<b>\$0.00</b>

Facilities Use Charge	\$26.50
Energy Charge	\$58.56
CPA	\$-6.39
Polk Property Tax	\$2.64
Gross Receipts Tax	\$2.08
Polk Public Service Tax	\$7.13
Florida Sales Tax	\$-104.42
Polk County Tax	\$-15.03
<b>Current Charges</b>	<b>\$-28.93</b>

Total Amount Due	\$-28.93
------------------	----------

**Please return this portion with your payment**



**Peace River Electric Cooperative, Inc.**

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative 

**RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669**



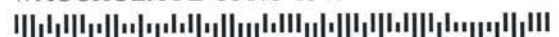
**Main Contact #: (863) 692-2947**

☐ Check here to indicate address or phone # change on back.

Account: 43790005

<b>Credit Balance - DO NOT PAY</b>	<b>\$-28.93</b>
<b>Corrected Bill</b>	

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547

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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790005  
Service Address: LIFT STATION MAIN

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precio.coop](http://www.precio.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

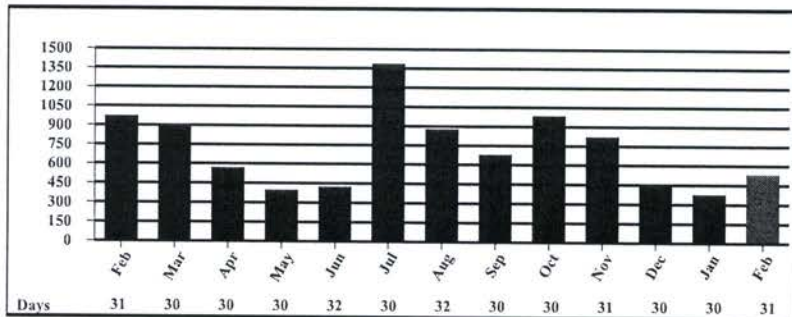


## Important Information

PRECO members are invited to join us on Saturday, March 25, 2017 for PRECO's Annual Membership Meeting at PRECO Park, 220 Knight Road, Wauchula, FL. Registration opens at 10:00 a.m. and the business meeting begins at 1:00 p.m.

Bill Date: 02/07/2017 Cycle: 3 Board District: 3  
Service Period: 12/30/2016 - 01/30/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235122	19121	19653	1	532	



Previous Balance	\$-44.09
Payment(s) Received	\$0.00
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$-44.09

Facilities Use Charge	\$26.50
Energy Charge	532 kWh @ 0.132792 \$70.65
CPA	532 kWh @ -0.0145 \$-7.71
Polk Property Tax	\$3.14
Gross Receipts Tax	\$2.37
Polk Public Service Tax	\$8.04
Current Charges	<b>\$102.99</b>

Total Amount Due **\$58.90**

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account: 43790005

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 02/28/2017 **\$58.90**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790005000005890000006890020720172



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790005  
Service Address: LIFT STATION MAIN

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

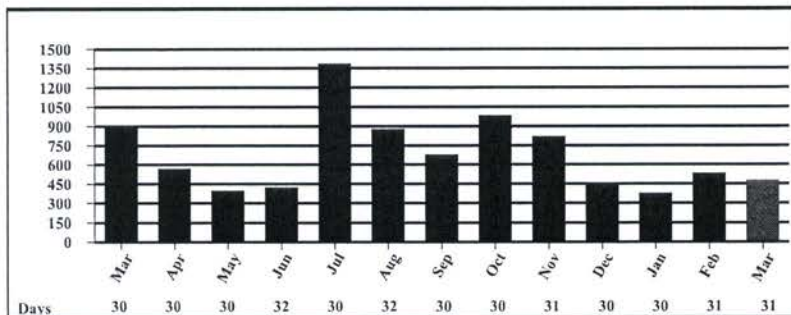


## Important Information

By participating on Operation Round Up, a few cents per month helps needy families, supports charity organizations and provides college scholarships in your local community. Learn more at [www.preco.coop](http://www.preco.coop).

Bill Date: 03/07/2017 Cycle: 3 Board District: 3  
Service Period: 01/30/2017 - 03/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235122	19653	20132	1	479	



Previous Balance	\$58.90
Payment(s) Received	\$-58.90
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	479 kWh @ 0.132792 \$63.61
CPA	479 kWh @ -0.0145 \$-6.95
Polk Property Tax	\$2.92
Gross Receipts Tax	\$2.21
Polk Public Service Tax	\$7.52
Current Charges	\$95.81

Total Amount Due \$95.81

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Account: 43790005

Current Balance due 03/28/2017 \$95.81

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790005  
Service Address: LIFT STATION MAIN

Contact Us: 800-282-3824  
[www.precio.coop](http://www.precio.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

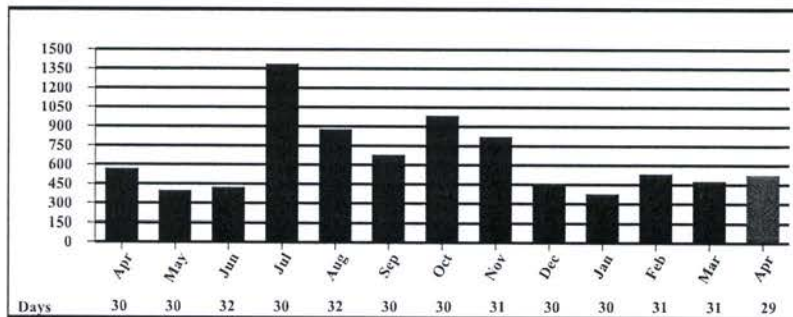
## Important Information

Reporting a power outage just got easier! Just send us a text. Text the word PRECO to 8002823824 to enroll or the word OUT to the same number to report an outage. Details at <http://www.precio.coop/member-services/outage-texting/>



Bill Date: 04/06/2017 Cycle: 3 Board District: 3  
Service Period: 03/02/2017 - 03/31/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235122	20132	20657	1	525	



Previous Balance		\$95.81
Payment(s) Received		\$-95.81
Adjustments		\$0.00
Late Fee		\$0.00
Balance Forward		\$0.00
Facilities Use Charge		\$26.50
Energy Charge	525 kWh @ 0.132792	\$69.72
CPA	525 kWh @ -0.0155	\$-8.14
Polk Property Tax		\$3.09
Gross Receipts Tax		\$2.34
Polk Public Service Tax		\$7.90
Current Charges		\$101.41
Total Amount Due		\$101.41

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



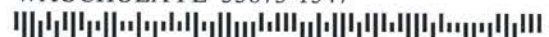
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Account: 43790005

Current Balance due 04/27/2017 \$101.41

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790005000010141000011141040620175



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790005  
Service Address: LIFT STATION MAIN

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



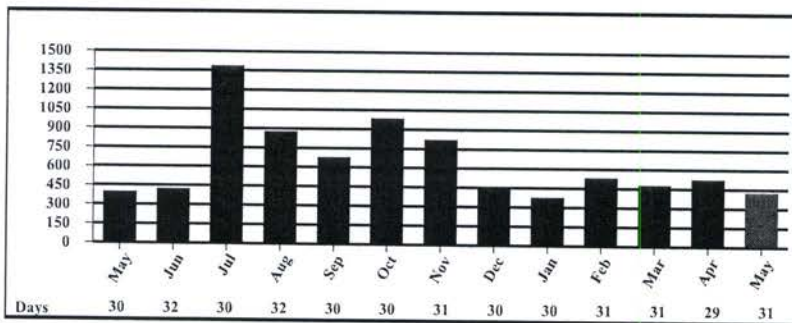
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



## Important Information

Bill Date: 05/09/2017 Cycle: 3 Board District: 3  
Service Period: 03/31/2017 - 05/01/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235122	20657	21082	1	425	



Previous Balance	\$101.41
Payment(s) Received	\$-101.41
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	425 kWh @ 0.132792 \$56.44
CPA	425 kWh @ -0.0155 \$-6.59
Polk Property Tax	\$2.68
Gross Receipts Tax	\$2.03
Polk Public Service Tax	\$6.93
Current Charges	\$87.99

Total Amount Due \$87.99

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account: 43790005

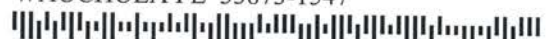
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 05/30/2017 \$87.99

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790005  
Member # 0  
Service Address: LIFT STATION MAIN

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

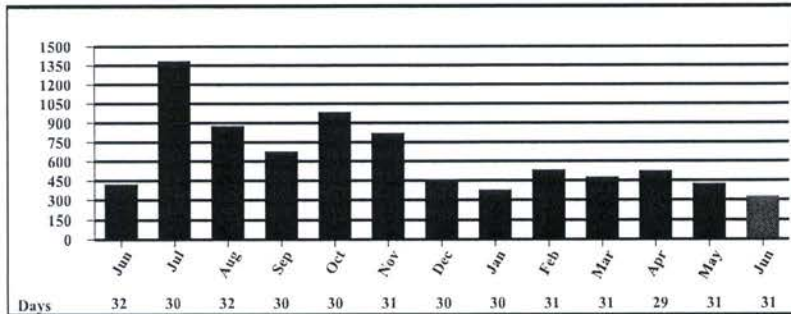


## Important Information

Beware of a current scam that involves an individual who calls and acts as a representative of PRECO. The scammer demands some type of payment and threatens to disconnect your electric service. PRECO does not call their members and demand payment. Be cautious and call PRECO at 1-800-282-3824.

Bill Date: 06/08/2017 Cycle: 3 Board District: 3  
Service Period: 05/01/2017 - 06/01/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235122	21082	21410	1	328	



Previous Balance	\$87.99
Payment(s) Received	\$-87.99
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	328 kWh @ 0.132792 \$43.56
CPA	328 kWh @ -0.0155 \$-5.08
Polk Property Tax	\$2.28
Gross Receipts Tax	\$1.72
Polk Public Service Tax	\$5.99
Current Charges	\$74.97

Total Amount Due \$74.97

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

☐ Check here to indicate address or phone # change on back.

Member #: 0 Account: 43790005

Current Balance due 06/29/2017 \$74.97

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



110260043790005000007497000008497060820178



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790005  
Member # 0  
Service Address: LIFT STATION MAIN

Contact Us: 800-282-3824  
[www.presco.coop](http://www.presco.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



## Important Information

PRECO is now accepting American Express. Use your American Express card for one time or recurring payments. Establishing a recurring payment with your American Express is easy through SmartHub.

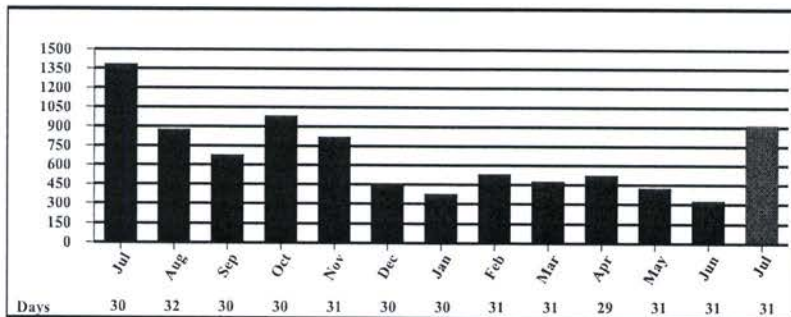
Bill Date: 07/10/2017 Cycle: 3 Board District: 3  
Service Period: 06/01/2017 - 07/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235122	21410	22327	1	917	

Previous Balance	\$74.97
Payment(s) Received	\$-74.97
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	917 kWh @ 0.132792 \$121.77
CPA	917 kWh @ -0.016 \$-14.67
Polk Property Tax	\$4.69
Gross Receipts Tax	\$3.55
Polk Public Service Tax	\$11.64
Current Charges	\$153.48

Total Amount Due \$153.48



Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Member #: 0

Account: 43790005

Current Balance due 07/31/2017 \$153.48

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790005  
Member # 43790  
Service Address: LIFT STATION MAIN

Contact Us: 800-282-3824  
[www.presco.coop](http://www.presco.coop)



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

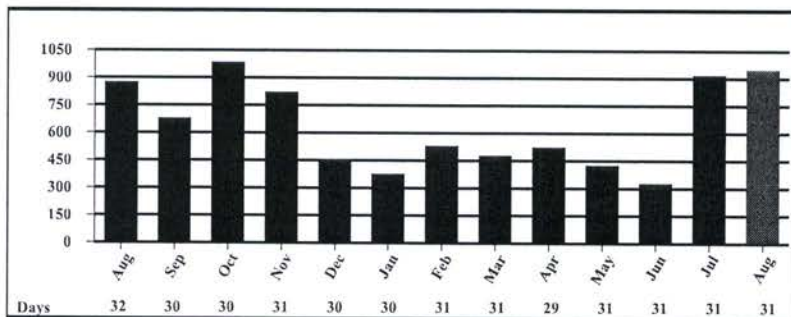


## Important Information

PRECO is now accepting American Express. Use your American Express card for one time or recurring payments. Establishing a recurring payment with your American Express is easy through SmartHub.

Bill Date: 08/10/2017 Cycle: 3 Board District: 3  
Service Period: 07/02/2017 - 08/02/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
917235122	22327	23275	1	948	



Previous Balance	\$153.48
Payment(s) Received	\$-153.48
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	948 kWh @ 0.132792 \$125.89
CPA	948 kWh @ -0.016 \$-15.17
Polk Property Tax	\$4.82
Gross Receipts Tax	\$3.64
Polk Public Service Tax	\$11.94
Current Charges	\$157.62

Total Amount Due \$157.62

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

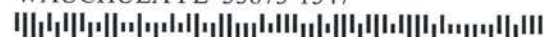
Main Contact #: (863) 692-2947

Member #: 43790

Account: 43790005

Current Balance due 08/31/2017 \$157.62

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790005000015762000016762081020172



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Invoice #:

75

Contact Us: 800-282-3824  
[www.precio.coop](http://www.precio.coop)



2563 1 MB 0.420  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

5 2563  
C-10 P-18



## Important Information

Do you need to update your name or add an authorized user to your account? Find the forms on our website at <http://www.precio.coop/member-services/forms/>

Bill Date: 09/07/2017

Cycle: 3

Service Period: 08/02/2017 - 09/01/2017

Board District: 3

Account #	Meter #	Rate	Days	Readings		Meter Multiplier	kWh	kW
Facilities Charge	Energy Charge	Demand Charge	Outdoor Lights	Previous Other Charges	Present Taxes	Current Charges	Balance Forward	Total Due
43790002	917235058	GS-S	30	7501	7681	1	180	0.0
\$26.50	\$21.02	\$0.00	\$0.00	\$0.00	\$7.48	\$55.00	\$0.00	\$55.00
Service Location: LIFT PUMP-G C								
43790008	918572563	GS-S	30	125083	134702	1	9619	35.568
\$26.50	\$1,123.43	\$0.00	\$0.00	\$0.00	\$263.36	\$1,413.29	\$0.00	\$1,413.29
Service Location: 3400 RIVER RANCH BLVD								
43790006	917235050	GS-S	30	12955	13196	1	241	0.0
\$26.50	\$28.14	\$0.00	\$0.00	\$0.00	\$13.11	\$67.75	\$0.00	\$67.75
Service Location:								
43790004	917235120	GS-S	30	317609	326753	1	9144	0.0
\$26.50	\$1,067.95	\$0.00	\$0.00	\$0.00	\$158.32	\$1,252.77	\$0.00	\$1,252.77
Service Location: SEWER PLANT								
43790005	917235122	GS-S	30	23275	24142	1	867	0.0
\$26.50	\$101.26	\$0.00	\$0.00	\$0.00	\$19.03	\$146.79	\$0.00	\$146.79
Service Location: LIFT STATION MAIN								
43790007	31994875	GS-S	25	610	626	1	16	0.0
\$26.50	\$1.86	\$0.00	\$0.00	\$0.00	\$7.11	\$35.47	\$0.00	\$35.47
Service Location: LIFT STATION								
				Total		\$2,971.07	\$0.00	
					Total Amount Due \$2,971.07			

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Member #: 43790

Invoice: 75

Current Balance due 09/28/2017 \$2,971.07

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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ACCT #	4379007
Oct-16	36.71
Nov-16	34.29
Dec-16	34.00
Jan-17	34.06
Feb-17	34.49
Mar-17	34.49
Apr-17	34.78
May-17	34.06
Jun-17	34.33
Jul-17	38.49
Aug-17	36.90
Sep-17	35.47



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790007  
Service Address: LIFT STATION

Member Service: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.preco.coop](http://www.preco.coop)



1809 1 MB 0.416 5 1809  
RIVER UTILITIES C-11 P-18  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

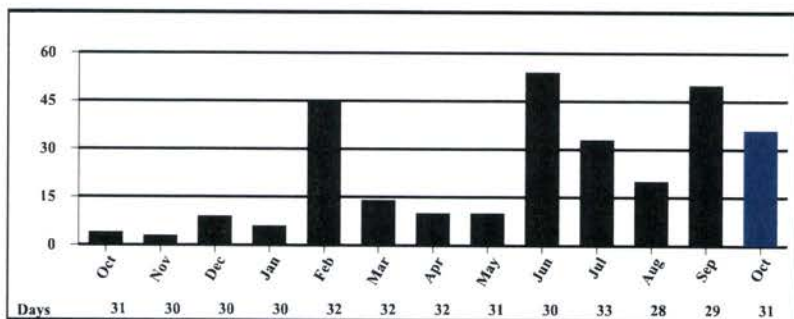


## Important Information

Contact PRECO through SmartHub 24 Hours a day. SmartHub's contact feature allows you to request account changes, service request and/or bill inquiries. Navigate to the Contact Us page, fill in the form and a Customer Care representative will contact you within 1 business day.

Bill Date: 10/12/2016 Cycle: 4 Board District: 3  
Service Period: 09/06/2016 - 10/07/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
31994875	448	484	1	36	



Previous Balance	\$38.89
Payment(s) Received	\$-38.89
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00
Facilities Use Charge	\$25.00
Energy Charge	36 kWh @ 0.137772 \$4.96
CPA	36 kWh @ -0.0145 \$-0.52
Polk Property Tax	\$0.99
Gross Receipts Tax	\$0.78
Polk Public Service Tax	\$3.02
Florida Sales Tax	\$2.17
Polk County Tax	\$0.31
Current Charges	\$36.71
Total Amount Due	\$36.71

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account: 43790007

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 11/01/2016 \$36.71

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790007000003671000004671101220161





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790007  
Service Address: LIFT STATION

Member Service: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precio.coop](http://www.precio.coop)



1800 1 MB 0.416 5 1800  
RIVER UTILITIES C-11 P-19  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



## Important Information

Contact PRECO through SmartHub 24 hours a day.  
Contact PRECO with account changes, service requests  
and/or bill inquiries through SmartHub. Navigate to  
the Contact Us page, fill in the form and a Customer  
Care representative will contact you within 1 business  
day.

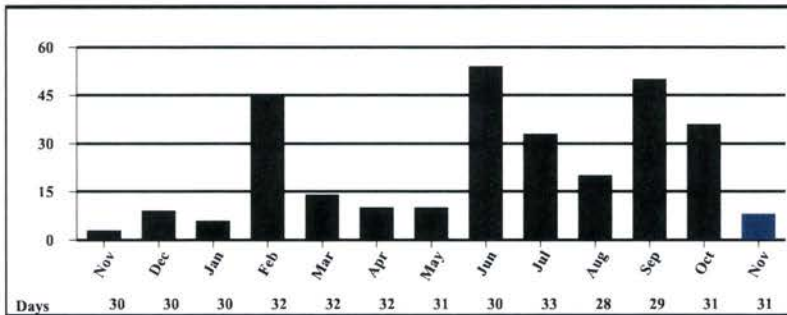
Bill Date: 11/09/2016 Cycle: 4 Board District: 3  
Service Period: 10/07/2016 - 11/07/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
31994875	484	492	1	8	

Previous Balance	\$36.71
Payment(s) Received	\$-36.71
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	8 kWh @ 0.132792 \$1.06
CPA	8 kWh @ -0.0145 \$-0.12
Polk Property Tax	\$0.92
Gross Receipts Tax	\$0.73
Polk Public Service Tax	\$2.89
Florida Sales Tax	\$2.02
Polk County Tax	\$0.29
Current Charges	\$34.29

Total Amount Due \$34.29



Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Account: 43790007

Current Balance due 11/30/2016 \$34.29

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790007000003429000004429110920168



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790007  
Service Address: LIFT STATION

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.presco.coop](http://www.presco.coop)



1795 1 MB 0.416 5 1795  
RIVER UTILITIES C-11 P-17  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

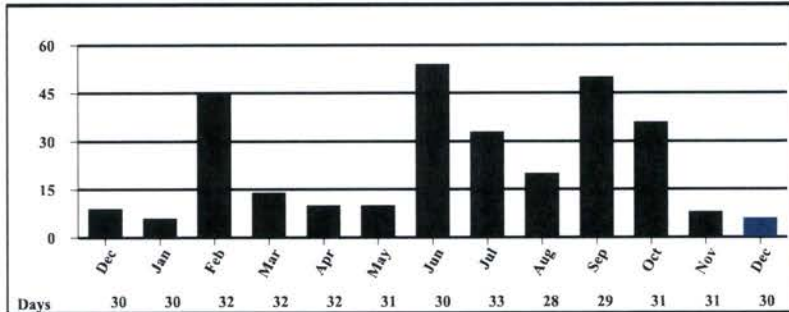


## Important Information

Did you recently receive a new credit card with the embedded security chip? Even though your credit card number didn't change, the expiration date and security code on the back of the card most likely did. To update your bill payment information, visit SmartHub or call us at 1-800-282-3824.

Bill Date: 12/08/2016 Cycle: 4 Board District: 3  
Service Period: 11/07/2016 - 12/07/2016 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
31994875	492	498	1	6	



Previous Balance	\$34.29
Payment(s) Received	\$-34.29
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	6 kWh @ 0.132792 \$0.80
CPA	6 kWh @ -0.0145 \$-0.09
Polk Property Tax	\$0.91
Gross Receipts Tax	\$0.72
Polk Public Service Tax	\$2.87
Florida Sales Tax	\$2.00
Polk County Tax	\$0.29
Current Charges	\$34.00
Total Amount Due	\$34.00

Please return this portion with your payment

Account: 43790007



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

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RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Current Balance due 12/29/2016 \$34.00

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790007000003400000004400120820165





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790007  
Service Address: LIFT STATION

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.presco.coop](http://www.presco.coop)



1953 1 MB 0.416 5 1953  
RIVER UTILITIES C-11 P-19  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

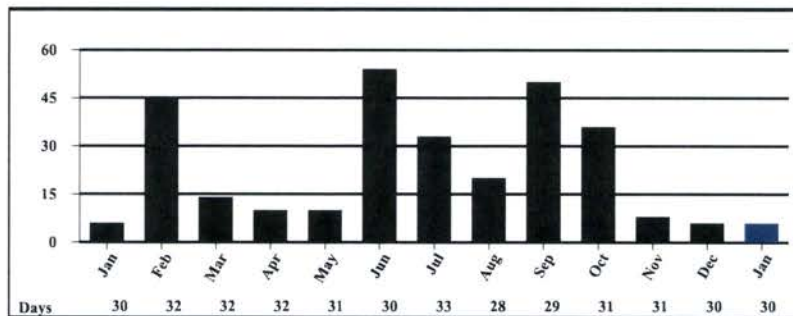


## Important Information

**\$75,000 in College Scholarships Available! Apply now for an Operation Round Up College Scholarship. Visit [www.presco.coop](http://www.presco.coop) for information. Applications must be postmarked by February 28, 2017.**

Bill Date: 01/11/2017 Cycle: 4 Board District: 3  
Service Period: 12/07/2016 - 01/06/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
31994875	498	504	1	6	



Previous Balance	\$34.00
Payment(s) Received	\$-34.00
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	6 kWh @ 0.132792 \$0.80
CPA	6 kWh @ -0.0145 \$-0.09
Polk Property Tax	\$0.96
Gross Receipts Tax	\$0.72
Polk Public Service Tax	\$2.87
Florida Sales Tax	\$2.01
Polk County Tax	\$0.29
Current Charges	\$34.06

**Total Amount Due \$34.06**

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Account: 43790007

**Current Balance due 02/01/2017 \$34.06**

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790007000003406000004406011120171



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790007  
Service Address: LIFT STATION

Customer Care: 800-282-3824  
Outage Reporting: 877-282-3656  
[www.precio.coop](http://www.precio.coop)



## Important Information

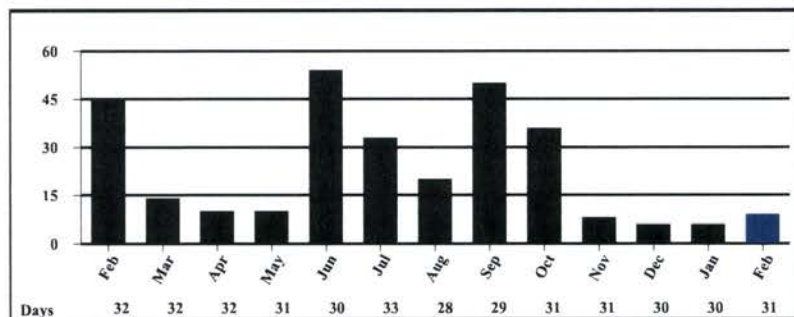
PRECO members are invited to join us on Saturday, March 25, 2017 for PRECO's Annual Membership Meeting at PRECO Park, 220 Knight Road, Wauchula, FL. Registration opens at 10:00 a.m. and the business meeting begins at 1:00 p.m.

2018 1 MB 0.420 5 2018  
RIVER UTILITIES C-9 P-18  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Bill Date: 02/14/2017 Cycle: 4 Board District: 3  
Service Period: 01/06/2017 - 02/06/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
31994875	504	513	1	9	



Previous Balance	\$34.06
Payment(s) Received	\$-34.06
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	9 kWh @ 0.132792 \$1.20
CPA	9 kWh @ -0.0145 \$-0.13
Polk Property Tax	\$0.97
Gross Receipts Tax	\$0.73
Polk Public Service Tax	\$2.90
Florida Sales Tax	\$2.03
Polk County Tax	\$0.29
Current Charges	\$34.49

Total Amount Due \$34.49

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

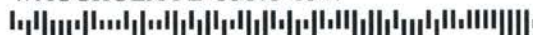
Main Contact #: (863) 692-2947



Account: 43790007

Current Balance due 03/07/2017 \$34.49

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

11026004379000700000344900000449021420175





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790007  
Service Address: LIFT STATION

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2015 1 MB 0.420  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

5 2015  
C-9 P-17



## Important Information

By participating on Operation Round Up, a few cents per month helps needy families, supports charity organizations and provides college scholarships in your local community. Learn more at [www.preco.coop](http://www.preco.coop).

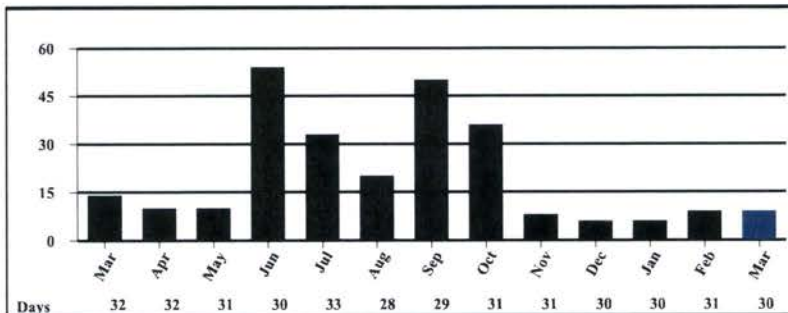
Bill Date: 03/14/2017 Cycle: 4 Board District: 3  
Service Period: 02/06/2017 - 03/08/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
31994875	513	522	1	9	

Previous Balance	\$34.49
Payment(s) Received	\$-34.49
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	9 kWh @ 0.132792 \$1.20
CPA	9 kWh @ -0.0145 \$-0.13
Polk Property Tax	\$0.97
Gross Receipts Tax	\$0.73
Polk Public Service Tax	\$2.90
Florida Sales Tax	\$2.03
Polk County Tax	\$0.29
Current Charges	\$34.49

Total Amount Due \$34.49



Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947



Account: 43790007

Current Balance due 04/04/2017 \$34.49

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790007000003449000004449031420173



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790007  
Service Address: LIFT STATION

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2027 1 MB 0.420  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

5 2027  
C-9 P-17

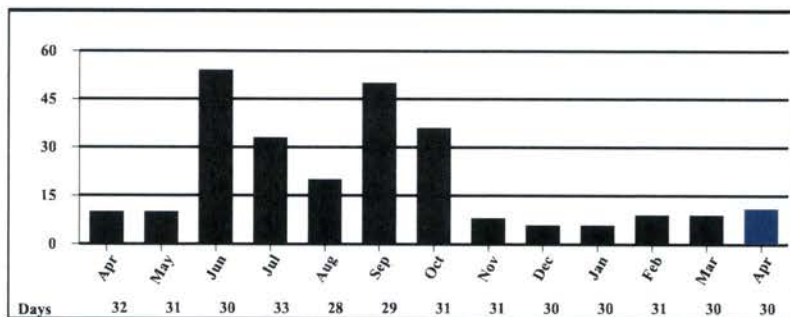


## Important Information

Reporting a power outage just got easier! Just send us a text. Text the word PRECO to 8002823824 to enroll or the word OUT to the same number to report an outage. Details at <http://www.preco.coop/member-services/outage-texting/>

Bill Date: 04/11/2017 Cycle: 4 Board District: 3  
Service Period: 03/08/2017 - 04/07/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
31994875	522	533	1	11	



Previous Balance	\$34.49
Payment(s) Received	\$-34.49
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00
Facilities Use Charge	\$26.50
Energy Charge	11 kWh @ 0.132792 \$1.46
CPA	11 kWh @ -0.0155 \$-0.17
Polk Property Tax	\$0.98
Gross Receipts Tax	\$0.74
Polk Public Service Tax	\$2.92
Florida Sales Tax	\$2.05
Polk County Tax	\$0.30
Current Charges	\$34.78
Total Amount Due	\$34.78

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Account: 43790007

Current Balance due 05/02/2017 \$34.78

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790007000003478000004478041120174





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790007  
Service Address: LIFT STATION

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2001 1 MB 0.420  
RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

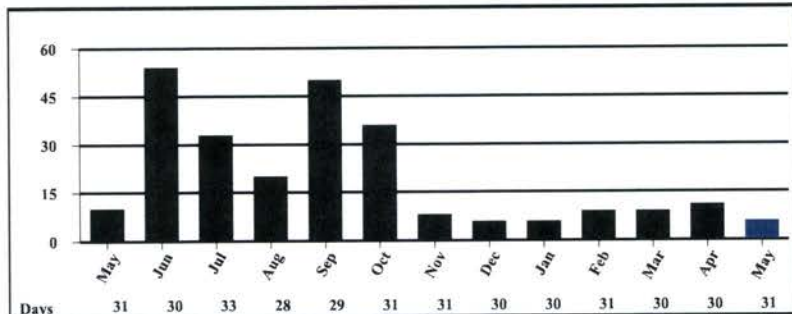
5 2001  
C-9 P-17



## Important Information

Bill Date: 05/11/2017 Cycle: 4 Board District: 3  
Service Period: 04/07/2017 - 05/08/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
31994875	533	539	1	6	



Previous Balance	\$34.78
Payment(s) Received	\$-34.78
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	6 kWh @ 0.132792 \$0.80
CPA	6 kWh @ -0.0155 \$-0.09
Polk Property Tax	\$0.96
Gross Receipts Tax	\$0.72
Polk Public Service Tax	\$2.87
Florida Sales Tax	\$2.01
Polk County Tax	\$0.29
Current Charges	\$34.06

Total Amount Due \$34.06

Please return this portion with your payment

Account: 43790007



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



Main Contact #: (863) 692-2947

Current Balance due 06/01/2017 \$34.06

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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110260043790007000003406000004406051120172



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790007  
Member # 0  
Service Address: LIFT STATION

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2043 1 MB 0.420 5 2043  
RIVER UTILITIES C-10 P-15  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

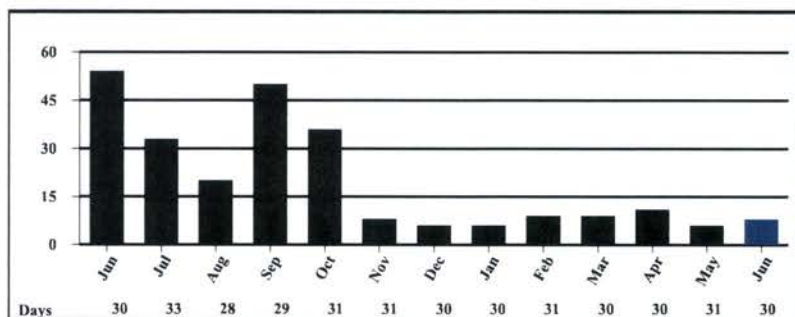


## Important Information

Beware of a current scam that involves an individual who calls and acts as a representative of PRECO. The scammer demands some type of payment and threatens to disconnect your electric service. PRECO does not call their members and demand payment. Be cautious and call PRECO at 1-800-282-3824.

Bill Date: 06/14/2017 Cycle: 4 Board District: 3  
Service Period: 05/08/2017 - 06/07/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
31994875	539	547	1	8	



Previous Balance	\$34.06
Payment(s) Received	\$-34.06
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	8 kWh @ 0.132792 \$1.06
CPA	8 kWh @ -0.0155 \$-0.12
Polk Property Tax	\$0.96
Gross Receipts Tax	\$0.73
Polk Public Service Tax	\$2.89
Florida Sales Tax	\$2.02
Polk County Tax	\$0.29
Current Charges	\$34.33

Total Amount Due \$34.33

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Member #: 0

Account: 43790007

Current Balance due 07/05/2017 \$34.33

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

110260043790007000003433000004433061420170





# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790007  
Member # 0  
Service Address: LIFT STATION

Contact Us: 800-282-3824  
[www.presco.coop](http://www.presco.coop)



2077 1 MB 0.420 5 2077  
RIVER UTILITIES C-10 P-14  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

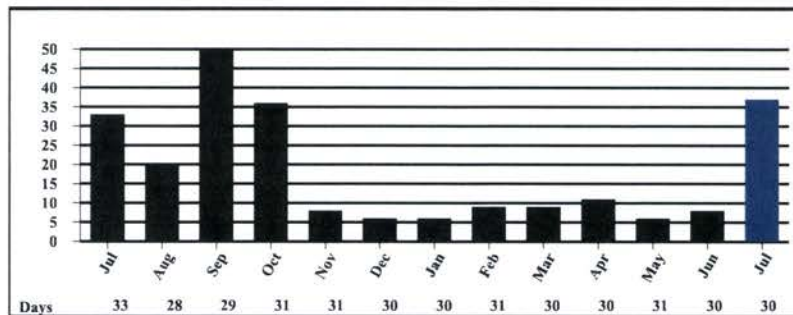


## Important Information

PRECO is now accepting American Express. Use your American Express card for one time or recurring payments. Establishing a recurring payment with your American Express is easy through SmartHub.

Bill Date: 07/13/2017 Cycle: 4 Board District: 3  
Service Period: 06/07/2017 - 07/07/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
31994875	547	584	1	37	



Previous Balance	\$34.33
Payment(s) Received	\$-34.33
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	37 kWh @ 0.132792 \$4.91
CPA	37 kWh @ -0.016 \$-0.59
Polk Property Tax	\$1.08
Gross Receipts Tax	\$0.82
Polk Public Service Tax	\$3.17
Florida Sales Tax	\$2.27
Polk County Tax	\$0.33
Current Charges	\$38.49

Total Amount Due \$38.49

Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

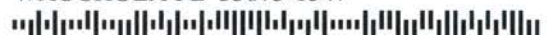


Member #: 0

Account: 43790007

Current Balance due 08/03/2017 \$38.49

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Account # 43790007  
Member # 43790  
Service Address: LIFT STATION

Contact Us: 800-282-3824  
[www.preco.coop](http://www.preco.coop)



2120 1 MB 0.420 5 2120  
RIVER UTILITIES C-10 P-16  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



## Important Information

PRECO is now accepting American Express. Use your American Express card for one time or recurring payments. Establishing a recurring payment with your American Express is easy through SmartHub.

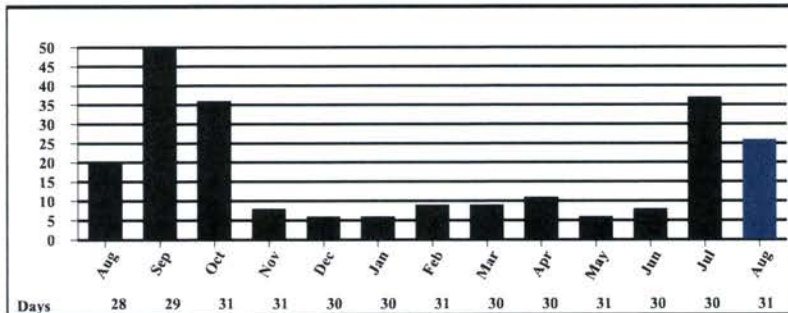
Bill Date: 08/15/2017 Cycle: 4 Board District: 3  
Service Period: 07/07/2017 - 08/07/2017 Rate: GENERAL SERVICE

Meter #	Readings		Meter Multiplier	kWh	kW
	Previous	Present			
31994875	584	610	1	26	

Previous Balance	\$38.49
Payment(s) Received	\$-38.49
Adjustments	\$0.00
Late Fee	\$0.00
Balance Forward	\$0.00

Facilities Use Charge	\$26.50
Energy Charge	26 kWh @ 0.132792 \$3.45
CPA	26 kWh @ -0.016 \$-0.42
Polk Property Tax	\$1.04
Gross Receipts Tax	\$0.78
Polk Public Service Tax	\$3.06
Florida Sales Tax	\$2.18
Polk County Tax	\$0.31
Current Charges	\$36.90

Total Amount Due \$36.90



Please return this portion with your payment



# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

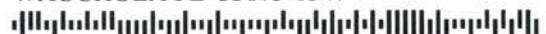


Member #: 43790

Account: 43790007

Current Balance due 09/05/2017 \$36.90

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



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# Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative

Invoice #:

75

Contact Us: 800-282-3824  
[www.presco.coop](http://www.presco.coop)



2563 1 MB 0.420 5 2563  
RIVER UTILITIES C-10 P-18  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669



## Important Information

Do you need to update your name or add an authorized user to your account? Find the forms on our website at <http://www.presco.coop/member-services/forms/>

Bill Date: 09/07/2017

Cycle: 3

Service Period: 08/02/2017 - 09/01/2017

Board District: 3

Account #	Meter #	Rate	Days	Readings		Meter Multiplier	kWh	kW
Facilities Charge	Energy Charge	Demand Charge	Outdoor Lights	Previous Other Charges	Present Taxes	Current Charges	Balance Forward	Total Due
43790002	917235058	GS-S	30	7501	7681	1	180	0.0
\$26.50	\$21.02	\$0.00	\$0.00	\$0.00	\$7.48	\$55.00	\$0.00	\$55.00
Service Location: LIFT PUMP-G C								
43790008	918572563	GS-S	30	125083	134702	1	9619	35.568
\$26.50	\$1,123.43	\$0.00	\$0.00	\$0.00	\$263.36	\$1,413.29	\$0.00	\$1,413.29
Service Location: 3400 RIVER RANCH BLVD								
43790006	917235050	GS-S	30	12955	13196	1	241	0.0
\$26.50	\$28.14	\$0.00	\$0.00	\$0.00	\$13.11	\$67.75	\$0.00	\$67.75
Service Location:								
43790004	917235120	GS-S	30	317609	326753	1	9144	0.0
\$26.50	\$1,067.95	\$0.00	\$0.00	\$0.00	\$158.32	\$1,252.77	\$0.00	\$1,252.77
Service Location: SEWER PLANT								
43790005	917235122	GS-S	30	23275	24142	1	867	0.0
\$26.50	\$101.26	\$0.00	\$0.00	\$0.00	\$19.03	\$146.79	\$0.00	\$146.79
Service Location: LIFT STATION MAIN								
43790007	31994875	GS-S	25	610	626	1	16	0.0
\$26.50	\$1.86	\$0.00	\$0.00	\$0.00	\$7.11	\$35.47	\$0.00	\$35.47
Service Location: LIFT STATION								
Total						\$2,971.07	\$0.00	
Total Amount Due								\$2,971.07

Please return this portion with your payment



## Peace River Electric Cooperative, Inc.

P.O. Box 1310  
Wauchula, FL 33873-1310

A Touchstone Energy® Cooperative



RIVER UTILITIES  
WESTGATE RIVER RANCH RESORTS  
ATTN: AP  
PO BOX 690669  
ORLANDO FL 32869-0669

Main Contact #: (863) 692-2947

Member #: 43790

Invoice: 75

Current Balance due 09/28/2017

\$2,971.07

PEACE RIVER ELECTRIC COOPERATIVE, INC.  
PO BOX 1547  
WAUCHULA FL 33873-1547



☐ Check here to indicate address or phone # change on back.

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- 3 Chemicals: A list of all chemicals used in the treatment of water, amounts purchased, quantity purchased, unit prices paid and dosage rates utilized.

## A&amp;D Bleach

Date	Product	Amount	Price	Dosage	Method
9/2/2016	Sodium Hypochlorite Solution	890	1.40	10.50%	Pumped
10/12/2016	Sodium Hypochlorite Solution	680	1.40	10.50%	Pumped
11/16/2016	Sodium Hypochlorite Solution	900	1.40	10.50%	Pumped
12/22/2016	Sodium Hypochlorite Solution	662	1.40	10.50%	Pumped
2/1/2017	Sodium Hypochlorite Solution	805	1.40	10.50%	Pumped
3/1/2017	Sodium Hypochlorite Solution	515	1.40	10.50%	Pumped
4/7/2017	Sodium Hypochlorite Solution	850	1.40	10.50%	Pumped
5/17/2017	Sodium Hypochlorite Solution	895	1.40	10.50%	Pumped
6/21/2017	Sodium Hypochlorite Solution	850	1.40	10.50%	Pumped
8/2/2017	Sodium Hypochlorite Solution	540	1.40	10.50%	Pumped
9/5/2017	Sodium Hypochlorite Solution	730	1.40	10.50%	Pumped
9/27/2017	Sodium Hypochlorite Solution	460	1.40	10.50%	Pumped
Total		8777			



A & D Bleach, Inc.

1530 N W 25th Drive  
Okeechobee, FL 34972

# Invoice

Date	Invoice #
9/2/2016	2711

Bill To
River Ranch Central Florida Investments, Inc. P.O Box 690669 Orlando, FL 32866

Ship To

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
	Net 30	10/2/2016	DB	9/2/2016	US Mail		
Quantity	Item Code	Description			U/M	Price Each	Amount
1,674	702A	Sodium Hypochlorite Solution, 10.5%, pumped				1.40	2,343.60T
		WP- 890 gal WW- 784 gal Okeechobee				7.00%	164.05
In the event of delinquency the above client will be responsible for any collection cost, court cost, filling cost, filing fees, interest cost, and any applicable attorney fees per the state of Florida.						Total	\$2,507.65

A & D Bleach, Inc.  
 1530 N W 25th Drive  
 Okeechobee, FL 34972

**Invoice**

Date	Invoice #
10/12/2016	2731

<b>Bill To</b>
River Ranch Central Florida Investments, Inc. P.O Box 690669 Orlando, Fl. 32866

<b>Ship To</b>

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
	Net 30	11/11/2016	DB	10/12/2016	US Mail		
Quantity	Item Code	Description	U/M	Price Each	Amount		
1,375	702A	Sodium Hypochlorite Solution, 10.5%, pumped		1.40	1,925.00T		
7	PLG--50-3050	POOL LOGIC 3" Cleaning Tablets 50lb pail		140.00	980.00T		
1	REF-50-1200	Calcium Hypochlorite, granulated, REFRESH 100lb pail		150.00	150.00T		
1	999	Delivery Charge		25.00	25.00		
		WP- 680 gal WW- 695 gal Okcechobee		7.00%	213.85		
In the event of delinquency the above client will be responsible for any collection cost, court cost, filing cost, filing fees, interest cost, and any applicable attorney fees per the state of Florida.							
Total					\$3,293.85		

www.adwatersystems.com



A &amp; D Bleach, Inc.

1530 N W 25th Drive  
Okeechobee, FL 34972**Invoice**

Date	Invoice #
11/16/2016	2745

<b>Bill To</b>
River Ranch Central Florida Investments, Inc. P.O Box 690669 Orlando, FL 32866

<b>Ship To</b>

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
	Net 30	12/16/2016	DB	11/16/2016	US Mail		
Quantity	Item Code	Description	U/M	Price Each	Amount		
1,630	702A	Sodium Hypochlorite Solution, 10.5%, pumped		1.40	2,282.00T		
1	999	Delivery Charge		25.00	25.00		
		WP- 900 gal WW- 730 gal Okeechobee		7.00%	159.74		
<b>Total</b>					\$2,466.74		

In the event of delinquency the above client will be responsible for any collection cost, court cost, filing cost, g fees, interest cost, and any applicable attorney fees per the state of Florida.

www.adwatersystems.com

In the event of delinquency the above client will be responsible for any collection cost, court cost, filling cost, g fees, interest cost, and any applicable attorney fees per the state of Florida.

[www.adwatersystems.com](http://www.adwatersystems.com)

A & D Bleach, Inc.  
1530 N W 25th Drive  
Okeechobee, FL 34972

420194

# Invoice

Date	Invoice #
12/22/2016	2763

Bill To
River Ranch Central Florida Investments, Inc. P.O Box 690669 Orlando, FL 32866

Ship To

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
Bill W.	Net 30	1/21/2017	DB	12/22/2016			

Quantity	Item Code	Description	U/M	Price Each	Amount
1,246	702A	Sodium Hypochlorite Solution, 10.5%, pumped		1.40	1,744.40T
1	999	Delivery Charge		25.00	25.00
		WW- 584 gal WP- 662 gal Okeechobee		7.00%	122.11

ACCOUNTS PAYABLE

2016 DEC 29 PM 3:26

In the event of delinquency the above client will be responsible for any collection cost, court cost, filing cost, fees, interest cost, and any applicable attorney fees per the state of Florida.

**Total** \$1,891.51

www.adwatersystems.com



A & D Bleach, Inc.  
1530 N W 25th Drive  
Okeechobee, FL 34972

# Invoice

*Michael V  
email 3/20*

Date	Invoice #
2/1/2017	2776

<b>Bill To</b>
River Ranch Central Florida Investments, Inc. P.O Box 690669 Orlando, FL 32866

<b>Ship To</b>
<i>430/60</i>

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
	Net 30	3/3/2017	DB	2/1/2017	US Mail		
Quantity	Item Code	Description	U/M	Price Each	Amount		
1,355	702A	Sodium Hypochlorite Solution, 10.5%, pumped		1.40	1,897.00T		
1	999	Delivery Charge		25.00	25.00		
		WP- 805 gal WW- 550 gal Okeechobee		7.00%	132.79		
ACCOUNTS PAYABLE 2017 FEB -7 PM 3:24							
In the event of delinquency the above client will be responsible for any collection cost, court cost, filing cost, filing fees, interest cost, and any applicable attorney fees per the state of Florida.							
Total					\$2,054.79		

www.adwatersystems.com

A & D Bleach, Inc.  
 1530 N W 25th Drive  
 Okeechobee, FL 34972

**Invoice**

M.V.

Date	Invoice #
3/1/2017	2787

<b>Bill To</b>
River Ranch Central Florida Investments, Inc. P.O Box 690669 Orlando, FL 32866

<b>Ship To</b>
430159 MAR 8 17 2:37 PM

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
	Net 30	3/31/2017	DB	3/1/2017			
Quantity	Item Code	Description	U/M	Price Each	Amount		
1,379 1	702A 999	Sodium Hypochlorite Solution, 10.5%, pumped Delivery Charge		1.40 25.00	1,930.60T 25.00		
		WP- 515 gal WW- 864 gal Okeechobee		7.00%	135.14		
In the event of delinquency the above client will be responsible for any collection cost, court cost, filing cost, filing fees, interest cost, and any applicable attorney fees per the state of Florida.						<b>Total</b>	\$2,090.74

www.adwatersystems.com



A & D Bleach, Inc.  
 1530 N W 25th Drive  
 Okeechobee, FL 34972

# Invoice

Date	Invoice #
4/7/2017	2806

<b>Bill To</b>
River Ranch Central Florida Investments, Inc. P.O Box 690669 Orlando, FL 32866

<b>Ship To</b>

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
	Net 30	5/7/2017	DB	4/7/2017			
Quantity	Item Code	Description	U/M	Price Each	Amount		
1,539	702A	Sodium Hypochlorite Solution, 10.5%, pumped		1.40	2,154.60		
1	999	Delivery Charge		25.00	25.00		
		WP- 850 gal WW- 689 gal Okeechobee		7.00%	150.82		
In the event of delinquency the above client will be responsible for any collection cost, court cost, filing cost, filing fees, interest cost, and any applicable attorney fees per the state of Florida.					<b>Total</b>	\$2,330.42	

www.adwatersystems.com

PO # 437665

**Invoice**

A &amp; D Bleach, Inc.

1530 N W 25th Drive  
Okeechobee, FL 34972

Date	Invoice #
5/12/2017	2822

<b>Bill To</b>
River Ranch Central Florida Investments, Inc. P.O. Box 690669 Orlando, FL 32866

<b>Ship To</b>

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
	Net 30	6/11/2017	DB	5/12/2017	US Mail		
Quantity	Item Code	Description	U/M	Price Each	Amount		
1,474	702A	Sodium Hypochlorite Solution, 10.5%, pumped		1.40	2,063.60T		
6	PLG--50-3050	POOL LOGIC 3" Cleaning Tablets 50lb pail		140.00	840.00T		
1	REF-50-1200	Calcium Hypochlorite, granulated, REFRESH 100lb pail		150.00	150.00T		
1	PTY-40-2085	Pelican Silt Net		49.57	49.57T		
1	SKM-40-2808	Extendable Pole 8-16Ft		86.18	86.18T		
1	999	Delivery Charge		25.00	25.00		
		WP- 895 gal WW- 579 gal Okeechobee		7.00%	223.25		
In the event of delinquency the above client will be responsible for any collection cost, court cost, filing cost, filing fees, interest cost, and any applicable attorney fees per the state of Florida.						<b>Total</b>	\$3,437.60

www.adwatersystems.com



PO # 448126

**Invoice**

A &amp; D Bleach, Inc.

1530 N W 25th Drive  
Okeechobee, FL 34972

Date	Invoice #
6/21/2017	2843

<b>Bill To</b>
River Ranch Central Florida Investments, Inc. P.O Box 690669 Orlando, Fl. 32866

<b>Ship To</b>

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
	Net 30	7/21/2017	DB	6/21/2017	EMAIL		
Quantity	Item Code	Description			U/M	Price Each	Amount
1,440 1	702A 999	Sodium Hypochlorite Solution, 10.5%, pumped Delivery Charge				1.40 25.00	2,016.00T 25.00
		WP- 850 gal WW- 590 gal Okeechobee				7.00%	141.12
In the event of delinquency the above client will be responsible for any collection cost, court cost, filing cost, filing fees, interest cost, and any applicable attorney fees per the state of Florida.						<b>Total</b>	\$2,182.12

www.adwatersystems.com

A & D Bleach, Inc.

1530 N W 25th Drive  
Okeechobee, FL 34972

# Invoice

Date	Invoice #
7/27/2017	2861

<b>Bill To</b>
River Ranch Central Florida Investments, Inc. P.O Box 690669 Orlando, FL 32866

<b>Ship To</b>

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
	Net 30	8/26/2017	DB	7/27/2017	EMAIL		
Quantity	Item Code	Description			U/M	Price Each	Amount
443	702A	Sodium Hypochlorite Solution, 10.5%, pumped Delivery Charge Okeechobee				1.40	620.20T
1	999					25.00	25.00
						7.00%	43.41
<i>all waste water</i>							

In the event of delinquency the above client will be responsible for any collection cost, court cost, filing cost, filing fees, interest cost, and any applicable attorney fees per the state of Florida.

**Total** \$688.61

[www.adwatersystems.com](http://www.adwatersystems.com)



A & D Bleach, Inc.

1530 N W 25th Drive  
Okeechobee, FL 34972

# Invoice

Date	Invoice #
8/2/2017	2862

<b>Bill To</b>
River Ranch Central Florida Investments, Inc. P.O Box 690669 Orlando, FL 32866

<b>Ship To</b>

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
	Net 30	9/1/2017	DB	8/2/2017	EMAIL		
Quantity	Item Code	Description			U/M	Price Each	Amount
779	702A	Sodium Hypochlorite Solution, 10.5%, pumped POOL LOGIC 3" Cleaning Tablets 50lb pail K4PHCI Kop Kit				1.40	1,090.60T
4	PLG--50-3050					140.00	560.00T
1	904A					86.55	86.55T
		WP- 540 gal WW- 239 gal Repaired 44 GPD pump Okeechobee				7.00%	121.60

In the event of delinquency the above client will be responsible for any collection cost, court cost, filing cost, filing fees, interest cost, and any applicable attorney fees per the state of Florida.

**Total**

\$1,858.75

[www.adwatersystems.com](http://www.adwatersystems.com)

A & D Bleach, Inc.

1530 N W 25th Drive  
Okeechobee, FL 34972

# Invoice

Date	Invoice #
9/5/2017	2881

Bill To
River Ranch Central Florida Investments, Inc. P.O Box 690669 Orlando, FL 32866

Ship To

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
	Net 30	10/5/2017	DB	9/5/2017	EMAIL		
Quantity	Item Code	Description	U/M	Price Each	Amount		
1,102 1	702A 999	Sodium Hypochlorite Solution, 10.5%, pumped Delivery Charge		1.40 25.00	1,542.80T 25.00		
		WP- 730 gal WW- 372 gal Okeechobee		7.00%	108.00		

In the event of delinquency the above client will be responsible for any collection cost, court cost, filing cost, filing fees, interest cost, and any applicable attorney fees per the state of Florida.

**Total** \$1,675.80



PO #448098

**Invoice**

A &amp; D Bleach, Inc.

1530 N W 25th Drive  
Okeechobee, FL 34972

Date	Invoice #
6/14/2017	2838

<b>Bill To</b>
River Ranch Central Florida Investments, Inc. P.O Box 690669 Orlando, FL 32866

<b>Ship To</b>

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
	Net 30	7/14/2017	DB	6/14/2017	EMAIL		
Quantity	Item Code	Description			U/M	Price Each	Amount
879 1	702A 999	Sodium Hypochlorite Solution, 10.5%, pumped Delivery Charge				1.40 25.00	1,230.60T 25.00
		WW- 879 gal WP- 0 Okeechobee				7.00%	86.14
In the event of delinquency the above client will be responsible for any collection cost, court cost, filing cost, filing fees, interest cost, and any applicable attorney fees per the state of Florida.						Total	\$1,341.74

www.adwatersystems.com

A & D Bleach, Inc.

1530 N W 25th Drive  
Okeechobee, FL 34972

# Invoice

Date	Invoice #
9/27/2017	2892

Bill To
River Ranch Central Florida Investments, Inc. P.O Box 690669 Orlando, FL 32866

Ship To

P.O. Number	Terms	Due Date	Rep	Ship	Via	F.O.B.	Project
	Net 30	10/27/2017	DB	9/27/2017	EMAIL		
Quantity	Item Code	Description			U/M	Price Each	Amount
1,205 1	702A 999	Sodium Hypochlorite Solution, 10.5%, pumped Delivery Charge				1.40 25.00	1,687.00T 25.00
		WP- 460 gal WW- 745 gal Okeechobee				7.00%	118.09

In the event of delinquency the above client will be responsible for any collection cost, court cost, filing cost, filing fees, interest cost, and any applicable attorney fees per the state of Florida.

**Total** \$1,830.09

[www.adwatersystems.com](http://www.adwatersystems.com)



River Ranch Water Management LLC

Response to PSC Letter Dated 12/07/2016

- 4 River Ranch Water Management has no expenses for Sludge Removal during the test period.

Do they have Sludge, what do they do with it.

River Ranch Water Management LLC  
Response to PSC Letter Dated 12/07/2016

5 Contractual Services - Testing

Date	Vendor	Testing	Cost
10/2/2016	Mid-Florida Water Lab	Phosphorus Sample	135.00
10/2/2016	Mid-Florida Water Lab	Nitrate Sample	135.00
11/2/2016	Mid-Florida Water Lab	Phosphorus Sample	135.00
11/2/2016	Mid-Florida Water Lab	Nitrate Sample	135.00
12/2/2016	Mid-Florida Water Lab	Phosphorus Sample	135.00
12/2/2016	Mid-Florida Water Lab	Nitrate Sample	135.00
1/2/2017	Mid-Florida Water Lab	Phosphorus Sample	135.00
1/2/2017	Mid-Florida Water Lab	Nitrate Sample	135.00
2/2/2017	Mid-Florida Water Lab	Phosphorus Sample	135.00
2/2/2017	Mid-Florida Water Lab	Nitrate Sample	135.00
3/2/2017	Mid-Florida Water Lab	Phosphorus Sample	135.00
3/2/2017	Mid-Florida Water Lab	Nitrate Sample	135.00
4/2/2017	Mid-Florida Water Lab	Phosphorus Sample	135.00
4/2/2017	Mid-Florida Water Lab	Nitrate Sample	135.00
5/2/2017	Mid-Florida Water Lab	Phosphorus Sample	135.00
5/2/2017	Mid-Florida Water Lab	Nitrate Sample	135.00
6/2/2017	Mid-Florida Water Lab	Phosphorus Sample	135.00
6/2/2017	Mid-Florida Water Lab	Nitrate Sample	135.00
7/2/2017	Mid-Florida Water Lab	Phosphorus Sample	135.00
7/2/2017	Mid-Florida Water Lab	Nitrate Sample	135.00
8/2/2017	Mid-Florida Water Lab	Phosphorus Sample	135.00
8/2/2017	Mid-Florida Water Lab	Nitrate Sample	135.00
9/2/2017	Mid-Florida Water Lab	Phosphorus Sample	135.00
9/2/2017	Mid-Florida Water Lab	Nitrate Sample	135.00
10/2/2016	Mid-Florida Water Lab	Monthly Bacteria Samples	100.00
11/2/2016	Mid-Florida Water Lab	Monthly Bacteria Samples	100.00
12/2/2016	Mid-Florida Water Lab	Monthly Bacteria Samples	100.00
1/1/2017	Tri Florida	Annual Nitrate/Nitrite Sample	86.75
1/2/2017	Mid-Florida Water Lab	Monthly Bacteria Samples	84.00
1/27/2017	Tri Florida	TTHM & HAA 5 Samples Stage 2	700.00
2/2/2017	Mid-Florida Water Lab	Monthly Bacteria Samples	94.00
3/2/2017	Mid-Florida Water Lab	Monthly Bacteria Samples	94.00
4/2/2017	Mid-Florida Water Lab	Monthly Bacteria Samples	94.00
5/2/2017	Mid-Florida Water Lab	Monthly Bacteria Samples	94.00
6/2/2017	Mid-Florida Water Lab	Monthly Bacteria Samples	94.00
7/2/2017	Mid-Florida Water Lab	Monthly Bacteria Samples	94.00
8/2/2017	Mid-Florida Water Lab	Monthly Bacteria Samples	94.00
9/2/2017	Mid-Florida Water Lab	Monthly Bacteria Samples	94.00
* 9/2/2017	Harrison Waste Water	3 days Bact Sample for Down line	175.00
10/26/2016	Mid-Florida Water Lab	Effluent Fecal	Included in Operators Fee
10/26/2016	Mid-Florida Water Lab	Influent CBOD5	Included in Operators Fee
10/26/2016	Mid-Florida Water Lab	Effluent CBOD5	Included in Operators Fee
10/26/2016	Mid-Florida Water Lab	Influent TSS	Included in Operators Fee
10/26/2016	Mid-Florida Water Lab	Effluent NO3-N	Included in Operators Fee
11/29/2016	Mid-Florida Water Lab	Effluent Fecal	Included in Operators Fee
11/29/2016	Mid-Florida Water Lab	Influent CBOD5	Included in Operators Fee
11/29/2016	Mid-Florida Water Lab	Effluent CBOD5	Included in Operators Fee
11/29/2016	Mid-Florida Water Lab	Influent TSS	Included in Operators Fee
11/29/2016	Mid-Florida Water Lab	Effluent NO3-N	Included in Operators Fee
12/27/2016	Mid-Florida Water Lab	Effluent Fecal	Included in Operators Fee
12/27/2016	Mid-Florida Water Lab	Influent CBOD5	Included in Operators Fee
12/27/2016	Mid-Florida Water Lab	Effluent CBOD5	Included in Operators Fee



## Response to PSC Letter Dated 12/07/2016

5,337.75

6 Contractural Services - Other

Date	Vendor	Description	Materials	Labor
10/5/2016	C&W Equip Repair	Elements/Oil/Grease	150.39	297.50
10/6/2016	Applied Aquatic	Service Retention Ponds		160.00
10/14/2016	C&W Equip Repair	Bearings/Seals/Gaskets	242.89	1,020.00
10/24/2016	Harrison Waste Water	Install Pump	4,205.00	1,790.00
10/24/2016	Harrison Waste Water	Emergency Serv		1,055.00
11/2/2016	Applied Aquatic	Service Retention Ponds		160.00
11/2/2016	Harrison Waste Water	Oct Operators Fees		2,781.00
11/16/2016	Vincent Plumbing	LineRepair/WaterMeter/BackflowP	4,606.24	4,825.00
11/30/2016	Applied Aquatic	Service Retention Ponds		160.00
12/2/2016	Harrison Waste Water	Nov Operators Fees		2,781.00
12/2/2016	Harrison Waste Water	Plant Inspections		130.00
12/2/2016	Harrison Waste Water	Call Outs for Alarms		380.00
12/15/2016	C&W Equip Repair	Bearings/Seals/Gaskets	242.89	1,020.00
1/2/2017	Harrison Waste Water	Dec Operators Fees		2,781.00
1/2/2017	Harrison Waste Water	Call out - Airport Lift Station		230.00
1/3/2017	Applied Aquatic	Service Retention Ponds		160.00
1/3/2017	C&W Equip Repair	Elements/Oil/Grease	151.70	255.00
1/3/2017	C&W Equip Repair	Control Repairs		272.85
1/23/2017	Universal Controls	Install Ultra 3 Level Controller		1,676.25
1/23/2017	Universal Controls	Install dB Mach3 Level Transducer		742.50
1/23/2017	Universal Controls	Replace and Calibrate Flowmeter		750.00
1/29/2017	RSM Builders	Replace Door / Metal Screen		625.00
2/2/2017	Harrison Waste Water	Jan Operators Fees		2,781.00
2/2/2017	Harrison Waste Water	4" Valve on #2 Blower		934.69
2/28/2017	Applied Aquatic	Service Retention Ponds		160.00
3/2/2017	Harrison Waste Water	Feb Operators Fees		2,781.00
3/2/2017	Harrison Waste Water	Collect Influent Samples		220.00
3/9/2017	Harrison Waste Water	Repair Aeration / Defusers		7,150.00
3/20/2017	C&W Equip Repair	Check Pumps and Irrigation Controls		255.00
3/21/2017	Harrison Waste Water	Emergency Serv		5,310.00
3/31/2017	Applied Aquatic	Service Retention Ponds		160.00



4/2/2017	Harrison Waste Water	Mar Operators Fees		2,781.00
4/5/2017	Harrison Waste Water	Pump - East Corral Lift Station	10,090.00	2,400.00
4/12/2017	Vincent Plumbing	Snake and clean out Sewer at SHG		766.00
4/13/2017	Vincent Plumbing	1-1/2" Drain Line Sewer Clean Out		228.00
4/23/2017	Vincent Plumbing	Sewer Cleanout - Main Stogage		796.00
4/30/2017	Applied Aquatic	Service Retention Ponds		160.00
5/2/2017	Harrison Waste Water	Apr Operators Fees		2,781.00
5/2/2017	Harrison Waste Water	Chain on Gear Drive 1		9,854.00
5/2/2017	Harrison Waste Water	Repair Surge Tank Overflow		380.00
5/4/2017	C&W Equip Repair	Elements/Oil/Greasse	152.74	255.00
5/31/2017	Applied Aquatic	Service Retention Ponds		160.00
6/2/2017	Harrison Waste Water	May Operators Fees		2,781.00
6/2/2017	Harrison Waste Water	Pump out chlorine tank		770.00
6/22/2017	C&W Equip Repair	Exercise Generator and Irrigation Pump		340.00
6/30/2017	Applied Aquatic	Service Retention Ponds		160.00
7/5/2017	Harrison Waste Water	June Operators Fee		2,781.00
7/5/2017	Harrison Waste Water	Call out East Corral Lift Station		130.00
7/5/2017	Harrison Waste Water	Call out - Alarms		380.00
7/7/2017	Harrison Waste Water	Repair Claifier #2	10,254.00	15,780.00
7/14/2018	Universal Controls	Annual Calibrations		576.00
7/31/2017	Applied Aquatic	Service Retention Ponds		160.00
8/2/2017	C&W Equip Repair	Check WTP Pumps/Wells and Programs		2,100.00
8/2/2017	Harrison Waste Water	Jul Operators Fees		2,781.00
8/2/2017	Harrison Waste Water	Call Outs for Alarms		195.00
9/2/2017	Harrison Waste Water	Aug Operators Fees		2,781.00
9/21/2017	Oar Electric	Connect Generator During Hurricane		265.00
9/26/2017	C&W Equip Repair	Elements/Oil/Greasse	146.00	255.00
10/2/2017	Harrison Waste Water	Sept Operators Fees		2,781.00
10/31/2016	WG Employee - Groundskeeping			353.19
11/30/2016	WG Employee - Groundskeeping			396.51
12/31/2016	WG Employee - Groundskeeping			779.42
1/31/2017	WG Employee - Groundskeeping			785.17
2/28/2017	WG Employee - Groundskeeping			380.20
3/31/2017	WG Employee - Groundskeeping			245.46

4/30/2017	WG Employee - Groundskeeping	140.30
5/31/2017	WG Employee - Groundskeeping	547.33
6/30/2017	WG Employee - Groundskeeping	4.94
7/31/2017	WG Employee - Groundskeeping	27.47
8/31/2017	WG Employee - Groundskeeping	684.98
9/30/2017	WG Employee - Groundskeeping	454.88
		<hr/>
		<b>30,241.85</b>
		<hr/>
		<b>104,180.64</b>
		<hr/>





C &amp; W Equipment Repair and Maintenance, Inc.

912 Roberts Rd. Unit #13  
Haines City, Fl. 33844  
863-585-7755-Phone

**Invoice**

Date	Invoice #
10/5/2016	2532

<b>Bill To</b>
ATTN: ACCOUNTS PAYABLE WESTGATE RESORTS/RIVER RANCH P.O. BOX 690669 ORLANDO, FL. 32869

P.O. Number	Terms	Rep	Project			
408903	Net 30	DEC	WWTP BLOWER MAINTENANCE			
Description			Quantity	Price Each	Amount	
2- F8-109 ELEMENTS				91.00	91.00T	
2 QTS SYNTHETIC BLOWER OIL				46.80	46.80T	
GREASE				2.75	2.75T	
SERVICE CHARGE FOR BLOWER MAINTENANCE, CHANGED OIL, CHECKED BELTS AND GREASED				297.50	297.50	
Sales Tax				7.00%	9.84	
Thank you for your business.			<b>Total</b> \$447.89			
All invoices not paid within 30 days will be subject to an 18% APR. to avoid any late charges please pay your invoice within a timely manner.						

**Applied Aquatic Management, Inc.**

P.O. Box 1469  
Eagle Lake, FL 33839-1469

**Invoice****ACCOUNTS PAYABLE**

2016 SEP -9 PM 4: 55

Invoice #: 156496  
Invoice Date: 9/6/2016  
Due Date: 10/6/2016  
Project:  
P.O. Number:

**Bill To:**

Westgate River Ranch Resort  
PO Box 690669  
Orlando, FL 32869

Description	Hours/Qty	Rate	Amount
Aquatic Plant Management Service			
Monthly Service-August 2016		160.00	160.00
Two (2) retention ponds @ wastewater treatment facility			
Supplier # 24590			

Thank you for your business.

<b>Total</b>	<b>\$160.00</b>
--------------	-----------------

<b>Payments/Credits</b>	<b>\$0.00</b>
-------------------------	---------------

<b>Balance Due</b>	<b>\$160.00</b>
--------------------	-----------------

Phone #	Fax:
863-533-8882 or 8...	863-534-3322





C &amp; W Equipment Repair and Maintenance, Inc.

912 Roberts Rd. Unit #13  
Haines City, FL 33844  
863-585-7755-Phone

**Invoice**

Date	Invoice #
10/14/2016	2548

<b>Bill To</b>
ATTN: ACCOUNTS PAYABLE WESTGATE RESORTS/RIVER RANCH P.O. BOX 690669 ORLANDO, FL 32869

*B. Wickiser*

P.O. Number	Terms	Rep	Project	
409867	Net 30	DEC	HS PUMP #2	
Description		Quantity	Price Each	Amount
2- 6306 BEARINGS			80.00	80.00T
2- ROTARY SEALS AND SS SEATS			109.00	109.00T
4- GASKETS			38.00	38.00T
SERVICE LABOR FOR PULLING ROTATING ELEMENT AND CHANGING BEARINGS AND SEAL GASKET, CLEAN UP, REINSTALL, START UP AND TEST			1,020.00	1,020.00
Sales Tax			7.00%	15.89
Thank you for your business.			<b>Total</b>  \$1,262.89	
All invoices not paid within 30 days will be subject to an 18% APR, to avoid any late charges please pay your invoice within a timely manner.				

QTY.

MATERIAL

PRICE

AMOUNT



## HARRISON WASTE WATER OPERATIONS

 1871 BETH LANE  
 WINTER HAVEN, FL 33880  
 OFFICE: (863) 299-2073

INVOICE 3786

JOB PHONE DATE OF ORDER

JOB LOCATION 10-24-16

 Sewer Plant  
 Surge Tank

TO West Gate Resorts

P.O. Box 690667

Orlando FL 32867

Terms

Due Date 11-15-16

DESCRIPTION OF WORK

AMOUNT

10-11-16 - Emergency Service.  
 Labor and Beend Truck to  
 pull #1 and Over Flow Pump  
 at Surge Tank, unstop and  
 Re Install Both Pumps.  
 Both pumps were stopped up.  
 Pulled pumps re installed.

1055.00

LABOR

HOURS

RATE

AMOUNT

TOTAL

LABOR 1055.00

TOTAL

MATERIALS

OTHER

OTHER

OTHER

TOTAL 1055.00

Signature

 [Signature]  
 Interact on next line invoice email service at 100% not available

Thank You



[illegible]

# Invoice

Invoice #: 158463  
Invoice Date: 11/30/2016  
Due Date: 12/30/2016  
Project:  
P.O. Number: 416023

Westgate River Ranch Resort  
PO Box 690669  
Orlando, FL 32869

Description	Hours/Qty	Rate	Amount
Aquatic Plant Management Service			
Monthly Service- November 2016		160.00	160.00
Two (2) retention ponds @ wastewater treatment facility			
Supplier # 24590			

Thank you for your business.

Total	\$160.00
Payments/Credits	\$0.00
Balance Due	\$160.00

Phone #	Fax:
863-533-8882 or 8...	863-534-3322





# **Vincent Plumbing Inc.**

5255 E 1st sq SW Vero Beach Fl. 32968  
Phone # 321-288-0088 Fax # 772-492-9049

INVOICE RR11816

JOB NAME: River Ranch

Description 6" Main Water Line Repair to River Ranch

Re-Pipe and add Blow off

New Water Line & Water Meter

New Backflow Preventor

MATERIAL: \$3,732.30  
TAX @ .06: \$223.94  
FREIGHT: \$0.00

**TOTAL MATERIAL: \$3,956.24**

## **DIRECT LABOR COST:**

PERSONAL	HOURS	RATE/HR	TOTAL
PROJECT MANGER	0.00	\$90.00	\$0.00
SUPERINTENDENT	0.00	\$85.00	\$0.00
PLUMBER	34.00	\$79.00	\$2,686.00
PLUMBER #2	0.00	\$75.00	\$0.00
Helper	31.00	\$69.00	\$2,139.00

**TOTAL DIRECT LABOR COST: \$4,825.00**

EQUIPMENT: Excavator

**TOTAL EQUIPMENT COST: \$650.00**

## **SUMMARY**

## **COMMENTS**

MATERIAL COST	\$3,956.24
DIRECT LABOR COST	\$4,825.00
TOTAL EQUIPMENT COST	\$650.00
JOB COST	\$9,431.24
SUB TOTAL	\$9,431.24
<b>TOTAL COST</b>	<b>\$9,431.24</b>

SHELLY



# Invoice

**Invoice #:** 157789  
**Invoice Date:** 11/2/2016  
**Due Date:** 12/2/2016  
**Project:**  
**P.O. Number:**

Westgate River Ranch Resort  
PO Box 690669  
Orlando, FL 32869

Thank you for your business.

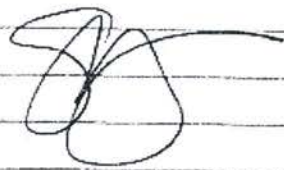
<b>Total</b>	\$160.00
<b>Payments/Credits</b>	\$0.00
<b>Balance Due</b>	\$160.00

Phone #	Fax:
863-533-8882 or 8...	863-534-3322

QTY.	MATERIAL	PRICE	AMOUNT
38	IBS Enzymes.	78 <sup>00</sup>	2964 00
7	Bact's Samples.	25 <sup>00</sup>	100 00
1	Set of Total Phosphorus	85 <sup>00</sup>	85 00
1	Set of Total Nitrate	85 <sup>00</sup>	85 00
1	Stenner Roller Assy. Kit.	89 <sup>40</sup>	89 40
1	New Stenner Pump.		
	Housing	118 <sup>00</sup>	118 00
1	Stenner Tube	48 <sup>00</sup>	48 00
15	IBS Pulmer	27 <sup>50</sup>	412 50

- GL Coding -

207-3500-1001-4412999- 3291.00  
 207-3500-1001-4411607 3901.90




HARRISON WASTE WATER OPERATIONS  
 1871 BETH LANE  
 WINTER HAVEN, FL 33880  
 OFFICE: (863) 299-2073

INVOICE 3795

U.S. PHONE	DATE OF ORDER
	12-2-14
JOB NAME/LOCATION	
SEWER PLANT	
WATER PLANT	
LIFT STATION	

TO WEST GATE RESORTS  
 PO BOX 1690667  
 ORLANDO FL 328169

Terms: DUE DATE 1-1-17

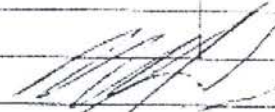
DESCRIPTION OF WORK	AMOUNT
OPERATIONS COST FOR NOVEMBER 17	2781 00

Water Plant Inspection  
 2 Hrs @ 65<sup>00</sup> 130 00

Water Plant Call Out for Control  
 Problems, Control Panels, Multi-function  
 Alarm Problems. 380 00

LABOR	HOURS	RATE	AMOUNT	TOTAL LABOR
				2781 00
				TOTAL MATERIALS
				3901 90
				OTHER
				130 00
				OTHER
				380 00
				OTHER
				TOTAL
				7192 90

Signature



12-2-17

Thank you



QTY.	MATERIAL	PRICE	AMOUNT
36	1Bs Enzymes.	78 <sup>00</sup>	2808 00
4	Bact's Samples	25 <sup>00</sup>	100 00
1	Set of Total-Phosphorus Samples. (Sewer Plant)	135 <sup>00</sup>	135 00
1	Set of Total - Nitrate. Samples. (Sewer Plant)	135 <sup>00</sup>	135 00
2	Stenner Tubes. chlorator	48 <sup>00</sup>	96 00
12	1Bs Palmer.	275 <sup>00</sup>	330 00

GL Codes  
207 3500 1001 4411607-3604.00

207 3500 1001 4412999 3011.00

*[Handwritten signature]*



HARRISON WASTE WATER OPERATIONS  
1871 BETH LANE  
WINTER HAVEN, FL 33880  
OFFICE: (863) 299-2073

INVOICE 002

JOB PHONE	DATE OF ORDER
	12/2017
JOB NAME/LOCATION	
SEWER WATER PLANT	
LIFT STATION	

TO WEST GATE RESORTS  
PO BOX 690647

ORLANDO FL 33869

Terms: DUE 2-1-2017

DESCRIPTION OF WORK	AMOUNT
OPERATIONS COST FOR DEC 2016	2781 00

Lift Station Airport. Call Out.  
checked Amps. checked Floats.  
Revised pump, pump plugged up. Reset 230 00

				TOTAL LABOR	2781 00
				TOTAL MATERIALS	3604 00
				OTHER	230 00
				OTHER	
				OTHER	
				TOTAL	6615 00

Signature *[Signature]* Date 12/17  
Interest on past due invoices shall accrue at 18% per annum.

Thank You

# Invoice

**Invoice #:** 159140  
**Invoice Date:** 1/3/2017  
**Due Date:** 2/2/2017  
**Project:**  
**P.O. Number:** 420319

Westgate River Ranch Resort  
PO Box 690669  
Orlando, FL 32869

Thank you for your business.

<b>Total</b>	<b>\$160.00</b>
<b>Payments/Credits</b>	<b>\$0.00</b>
<b>Balance Due</b>	<b>\$160.00</b>

Phone #	Fax:
863-533-8882 or 8...	863-534-3322





C &amp; W Equipment Repair and Maintenance, Inc.

912 Roberts Rd. Unit #13  
Haines City, FL 33844  
863-585-7755-Phone

**Invoice**

Date	Invoice #
1/3/2017	2695

<b>Bill To</b>
ATTN: ACCOUNTS PAYABLE WESTGATE RESORTS/RIVER RANCH P.O. BOX 690669 ORLANDO, FL. 32869

P.O. Number	Terms	Rep	Project		
420145	Net 30	DEC	WWTP BLOWER MAINTENANCE		
Description		Quantity	Price Each	Amount	
2 QTS SYNTHETIC BLOWER OIL			48.00	48.00T	
2- F8-109 ELEMENTS			91.00	91.00T	
GREASE			2.75	2.75T	
SERVICE LABOR FOR MAINTENANCE ON BLOWERS			255.00	255.00	
Sales Tax			7.00%	9.92	
Thank you for your business.			<b>Total</b> \$406.67		
All invoices not paid within 30 days will be subject to an 18% APR, to avoid any late charges please pay your invoice within a timely manner.					



C &amp; W Equipment Repair and Maintenance, Inc.

912 Roberts Rd. Unit #13  
Haines City, FL 33844  
863-585-7755-Phone

**Invoice**

Date	Invoice #
1/3/2017	2684

**Bill To**

ATTN: ACCOUNTS PAYABLE  
WESTGATE RESORTS/RIVER RANCH  
P.O. BOX 690669  
ORLANDO, FL. 32869

P.O. Number	Terms	Rep	Project		
419101	Net 30	DEC	IRRIGATION CONTROLS		
Description		Quantity	Price Each	Amount	
SERVICE CHARGE FOR CHECKING AND MAKING REPAIRS ON CONTROLS			255.00	255.00T	
Sales Tax			7.00%	17.85	
				ACCOUNTS PAYABLE 2017 JAN 12 PM 1:30	
Thank you for your business.					
All invoices not paid within 30 days will be subject to an 18% APR, to avoid any late charges please pay your invoice within a timely manner.				<b>Total</b> \$272.85	





C &amp; W Equipment Repair and Maintenance, Inc.

912 Roberts Rd. Unit #13  
Haines City, FL 33844  
863-585-7755-Phone

**Invoice**

Date	Invoice #
12/15/2016	2666

Bill To
ATTN: ACCOUNTS PAYABLE WESTGATE RESORTS/RIVER RANCH P.O. BOX 690669 ORLANDO, FL. 32869

P.O. Number	Terms	Rep	Project		
417016	Net 30	DEC	WTP HSP #1		
Description		Quantity	Price Each	Amount	
2- 6306 BEARINGS			80.00	80.00T	
2- ROTARY SEALS AND SS SEATS			109.00	109.00T	
4- GASKETS			38.00	38.00T	
SERVICE LABOR FOR PULLING ROTATING ELEMENT AND CHANGING BEARINGS AND SEAL GASKET, CLEAN UP, REINSTALL., START UP AND TEST			1,020.00	1,020.00	
Sales Tax			7.00%	15.89	
ACCOUNTS PAYABLE 2016 DEC 22 PM 4:11					
Thank you for your business.			<b>Total</b> \$1,262.89		
All invoices not paid within 30 days will be subject to an 18% APR. to avoid any late charges please pay your invoice within a timely manner.					



**INSTRUMENT SERVICE COMPANY**  
1906 Lake Ariana Blvd. Auburndale, FL 33823  
Ph: 863-965-2053 Fax: 863-967-7765

ACCOUNTS PAYABLE

2016 AUG 19 PM 1:53

DATE	INVOICE
8/15/2016	2016-186

**WESTGATE RESORTS LTD.**  
**RIVER RANCH RESORTS**  
**P.O. BOX 690669**  
**ORLANDO, FL 32869**

**WESTGATE RESORTS LTD  
RIVER RANCH RESORTS  
RIVER RANCH WWTP  
3200 RIVER RANCH BLVD.  
RIVER RANCH, FL 33867**

[illegible]



GOSSAMER BAY, INC. DBA



# UNIVERSAL CONTROLS

INSTRUMENT SERVICE COMPANY  
1906 Lake Ariana Blvd. Auburndale, FL 33823  
Ph: 863-965-2053 Fax: 863-967-7765

## INVOICE

DATE	INVOICE
1/23/2017	2017-019

<b>BILL TO</b>
WESTGATE RESORTS LTD. P.O. BOX 690669 ORLANDO, FL 32869

<b>SHIP TO</b>
WESTGATE RIVER RANCH RESORT WWTP

PURCHASE ORDER		TERMS		DUE DATE
419092		DUE UPON RECEIPT		1/23/2017
QUANTITY	DESCRIPTION	DATE	UNIT PRICE	AMOUNT
1	PULSAR ULTRA 3 LEVEL CONTROLLER WITH DATA LOGGING. ULTRA SERIES: 17 CONFIGURATION: STANDARD UNIT COMMUNICATIONS: RS-485 MODBUS & DATA LOGGING APPROVALS: UL/C-UL APPROVED, 4-20mA OUTPUT	1/16/2017	1,676.25	1,676.25
1	PULSAR dB MACH3 LEVELTRANSDUCER dB MACH3 TRANSDUCER SERIES: dBM3 CABLE LENGTH: 10 METERS UV PROTECTED OPTIONS: SUNSHIELD AND CONE APPROVALS: FM & FMC: CLASS 1, DIV1: GROUP A-D: CLASS 11, DIV 1,: GROUP E-G: ATEX EEX m 11 C		742.50	742.50
1	LABOR TO REMOVE OLD FLOWMETER, INSTALL NEW FLOWMETER, PROGRAM AND CALIBRATE UNIT		750.00	750.00
INTEREST WILL BE CHARGED AFTER 30 DAYS @ 1% PER MONTH			<b>Total</b>	\$3,168.75
			<b>Payments/Credits</b>	\$0.00
			<b>Balance Due</b>	\$3,168.75

ACCOUNTS PAYABLE  
2017 JAN 27 2:58

Richard Mann  
Lic. # RRC282811472  
Bonded & Insured



482 Heather Ct.  
Bartow, FL 33830

Phone (863) 537-1891  
Fax (863) 537-5907

January 29, 2017

CFI/Westgate Resorts Ltd.  
P.O. Box 690669  
Orlando, FL 32869

Invoice # 10025

Please Remit To: RSM Builders  
482 Heather Ct.  
Bartow, FL 33830

---

PO # 421601 Replace door and metal screen	\$625.00
---	----------

<b>TOTAL DUE</b>	<b>\$625.00</b>
------------------	-----------------



QTY.	MATERIAL	PRICE	AMOUNT
38	1Bs Enzymes.	2964	00
4	Bact's Samples	2100	84 00
1	Set of Total Phosphorus.	135	00
1	Set of Total Nitrate.	135	00
2	Stenner Tubes.	4800	96 00
16	1Bs Palmer.	2750	440 00
8	ballon's ARX 66.	2850	228 00
20735001001 4412999			
3715 69			
20735001001 4411607			
<del>934 69</del>			
4082 00			



HARRISON WASTE WATER OPERATIONS  
1871 BETH LANE  
WINTER HAVEN, FL 33880  
OFFICE: (863) 299-2073

INVOICE 3821

JOB PHONE	DATE OF ORDER
	2-2-17
JOB NAME/LOCATION	
Sewer Plant	
Water Plant	
& Lift Station's	

TO West Gate Resorts  
P.O Box 690667  
Orlando FL 33869

PHONE
ORDER TAKEN BY

Terms: Due Date 3-1-17

DESCRIPTION OF WORK	AMOUNT
Operation's Cost for Jan 2017	2781 00

Replaced, 4" Air Valve on #2 Blower Air Inductor	934 69
---	--------

				TOTAL LABOR	2781 00
				TOTAL MATERIALS	4082 00
				OTHER	934 69
				OTHER	
				OTHER	
				TOTAL	7797 69

Signature

Date 2-2-17

Thank You

Interest on past due invoices shall accrue at 18% per annum.

# Invoice

**Invoice #:** 160340  
**Invoice Date:** 2/28/2017  
**Due Date:** 3/30/2017  
**Project:**  
**P.O. Number:** 427711

**Westgate River Ranch Resort**  
PO Box 690669  
Orlando, FL 32869

Description	Hours/Qty	Rate	Amount
Aquatic Plant Management Service			
Monthly Service- February 2017		160.00	160.00
Two (2) retention ponds @ wastewater treatment facility			
Supplier # 24590			

Thank you for your business.

<b>Total</b>	<b>\$160.00</b>
<b>Payments/Credits</b>	<b>\$0.00</b>
<b>Balance Due</b>	<b>\$160.00</b>

Phone #	Fax:
863-533-8882 or 8...	863-534-3322



QTY.	MATERIAL	PRICE	AMOUNT
36	1Bs Enzymes.		2730 00
4	Bact's Samples	21 <sup>00</sup>	84 00
1	Set of Total Phosphorus.		135 00
1	Set of Total Nitrogen		135 00
2	Stenner Duck bills.	49 <sup>50</sup>	99 12
15	1Bs Palmer.	27 <sup>50</sup>	412 50
10	ballons Aix 66.	28 <sup>50</sup>	285 00
GL Coding			
207	3500 1001 4412999		2781 <sup>00</sup>
207	3500 1001 4411607		3830 <sup>62</sup>



HARRISON WASTE WATER OPERATIONS  
1871 BETH LANE  
WINTER HAVEN, FL 33880  
OFFICE: (863) 299-2073

INVOICE 3824

JOB PHONE	DATE OF ORDER
	3-2-17
JOB NAME/LOCATION	
Sewer Plant	
Water Plant	
4 Lift Stations	

TO Westgate Resorts.

P.O Box 690667

Orlando FL 33869

PHONE

ORDER TAKEN BY

Terms: Due Date 4-1-17

DESCRIPTION OF WORK	AMOUNT
operation's cost for Feb 2017	2781 00

1 Set of Influent Samples for Sewer Plant. Per Permitt.	220 00
---	--------

				TOTAL LABOR	2781 00
				TOTAL MATERIALS	3610 62
				OTHER	220 00
				OTHER	
				OTHER	
				TOTAL	6611 62

Signature

Date

3-2-17

Thank You

Interest on past due invoices shall accrue at 18% per annum.









C &amp; W Equipment Repair and Maintenance, Inc.

912 Roberts Rd. Unit #13  
Haines City, FL 33844  
863-585-7755-Phone

**Invoice**

Date	Invoice #
3/20/2017	2826

**Bill To**

ATTN: ACCOUNTS PAYABLE  
WESTGATE RESORTS/RIVER RANCH  
P.O. BOX 690669  
ORLANDO, FL. 32869

P.O. Number	Terms	Rep	Project		
429818	Net 30	DEC	WELL PUMPS & GOLF COURSE PUMP CONTROLS		
Description		Quantity	Price Each	Amount	
SERVICE LABOR FOR CHECKING WELL PUMPS, ADDING PACKING ON #1 AND #2 PUMPS AND CHECKING IRRIGATION CONTROLS			255.00	255.00	



QTY.	MATERIAL	PRICE	AMOUNT
1	Sewage Pump.	5460.00	
2	Lift pipes and fittings.	160.00	
1	Complete ELe Panel Box Control System with Control Board Alarm System and Busser Breakers and Switches and Contactors and Starters.	4280.00	
50	ft. New Wiring From Main Box to New Panel Box.	190.00	

304-0000-0000-1579999-0000



HARRISON WASTE WATER OPERATIONS  
1871 BETH LANE  
WINTER HAVEN, FL 33880  
OFFICE (863) 299-2073

INVOICE 3842

ORDER NO.	DATE OF ORDER
	4-5-17
JOB SITE LOCATION	
Lift Station	
East Corral	

TO Westlake Resorts  
P.O. Box 690667  
Orlando FL 33869

Terms Due Date 5-1-17

DESCRIPTION OF WORK	AMOUNT
East Corral Lift Station Replaced Sewage pump with new lift pump and new complete ELe Panel Box and new wiring and piping to both pumps.	

Labor for: Installing New pump & lift pipes and control panel and all wiring and Boom Truck.

\$215 per Hour - Labor - 2 men.	1290.00
\$185 per Hr - 6 Hrs.	1110.00

LABOR	HOURS	RATE	AMOUNT	TOTAL LABOR
				2400.00
				TOTAL MATERIALS
				10,090.00
				OTHER
				OTHER
				OTHER
				TOTAL
				12,490.00

Signature  Date 4-5-17

Interest on past due invoices shall accrue at 18% per annum

Thank You

# Invoice

**Invoice #:** 160961  
**Invoice Date:** 3/31/2017  
**Due Date:** 4/30/2017  
**Project:**  
**P.O. Number:** 432038

Westgate River Ranch Resort  
PO Box 690669  
Orlando, FL 32869

Thank you for your business.

<b>Total</b>	<b>\$160.00</b>
<b>Payments/Credits</b>	<b>\$0.00</b>
<b>Balance Due</b>	<b>\$160.00</b>

Phone #	Fax:
863-533-8882 or 8...	863-534-3322



# Invoice

**Invoice #:** 161742  
**Invoice Date:** 4/30/2017  
**Due Date:** 5/30/2017  
**Project:**  
**P.O. Number:** 432038

Westgate River Ranch Resort  
PO Box 690669  
Orlando, FL 32869

Thank you for your business.

<b>Total</b>	<b>\$160.00</b>
<b>Payments/Credits</b>	<b>\$0.00</b>
<b>Balance Due</b>	<b>\$160.00</b>

Phone #	Fax:
863-533-8882 or 8...	863-534-3322

QTY.	MATERIAL	PRICE	AMOUNT
30	IBs Enzymes	78 <sup>00</sup>	2730 00
4	Bact's Samples		
2	Stenner Duckbills	49 <sup>56</sup>	99 12
1	Set of Total Phosphorus		135 00
1	Set of Total Nitrates		135 00
30	IBs Palmer	27 <sup>50</sup>	825 00
10	Ballon's Aix 66	28 <sup>50</sup>	285 00
10	IBs Enzymes Special Event	78 <sup>00</sup>	780 00

GL Codes

207-3500 1001-441607 \$4989.12  
 207-3500 1001-4412999 2781.00

9770.12



HARRISON WASTE WATER OPERATIONS  
 1871 BETH LANE  
 WINTER HAVEN FL 33880  
 OFFICE (863) 299-2073

INVOICE 3836

JOB PHONE	DATE OF ORDER
	4-2-17
JOB NAME/LOCATION	
SEWER/Water Plants	

TO WESTGATE RESORTS  
 PO Box 690667  
 ORLANDO FL 33869

Terms DUE 5-1-2017

DESCRIPTION OF WORK	AMOUNT
OPERATIONS COST FOR MAR 17	2781 00

LABOR	HOURS	RATE	AMOUNT	TOTAL LABOR
				2781 00
				TOTAL MATERIALS
				4989 12
				OTHER
				OTHER
				OTHER
				TOTAL
				7770 12

Signature

4-2-17

Interest on past due invoices shall accrue at 18% per annum

Thank You



# **Vincent Plumbing Inc.**

P.O.Box 237234 Cocoa FL 32923

Phone # 321-288-0088

**INVOICE** RREC41317

**JOB NAME:** River Ranch East Corral  
Sewer Clean-out

**PO** 437296

**Description** 1-1/2" Drain Line Sewer Clean-out

**MATERIAL:** \$0.00  
**TAX @ .06:** \$0.00  
**FREIGHT:** \$0.00

**TOTAL MATERIAL:** **\$0.00**

## **DIRECT LABOR COST:**

PERSONAL	HOURS	RATE/HR	TOTAL
PROJECT MANGER	0.00	\$90.00	\$0.00
SUPERINTENDENT	0.00	\$85.00	\$0.00
PLUMBER	2.00	\$79.00	\$158.00
PLUMBER #2	0.00	\$75.00	\$0.00
Helper	0.00	\$69.00	\$0.00

**TOTAL DIRECT LABOR COST:** **\$158.00**

**EQUIPMENT:**

**Sewer Machine**

**TOTAL EQUIPMENT COST:** **\$70.00**

## **SUMMARY**

## **COMMENTS**

MATERIAL COST	\$0.00
DIRECT LABOR COST	\$158.00
TOTAL EQUIPMENT COST	\$70.00
JOB COST	\$228.00
SUB TOTAL	\$228.00
Tax on Material	\$0.00
<b>TOTAL COST</b>	<b>\$228.00</b>

**APPROVAL** \_\_\_\_\_ **DATE** \_\_\_\_\_

# **Vincent Plumbing Inc.**

P.O.Box 237234 Cocoa FL 32923

Phone # 321-288-0088

**INVOICE**    RRS-41217

**JOB NAME:** River Ranch Smoke House Restaurant    **PO** 437296  
Lift Station Problem

**Description** Sent 2 Plumbers out at 6:00pm to  
Smoke House to Clean out Sewer  
Ran Snake and found Lift Station was not Working

**MATERIAL:**                                \$0.00  
**TAX @ .06:**                              \$0.00  
**FREIGHT:**                                \$0.00

**TOTAL MATERIAL:**                                **\$0.00**

## **DIRECT LABOR COST:**

PERSONAL	HOURS	RATE/HR	TOTAL
PROJECT MANGER	0.00	\$90.00	\$0.00
SUPERINTENDENT	0.00	\$85.00	\$0.00
PLUMBER	4.00	\$79.00	\$316.00
PLUMBER #2	4.00	\$75.00	\$300.00
Helper	0.00	\$69.00	\$0.00

**TOTAL DIRECT LABOR COST:**                                **\$616.00**

**EQUIPMENT:**                                Sewer Machine

**TOTAL EQUIPMENT COST:**                                **\$150.00**

## **SUMMARY**

## **COMMENTS**

MATERIAL COST		\$0.00
DIRECT LABOR COST		\$616.00
TOTAL EQUIPMENT COST		\$150.00
JOB COST		\$766.00
SUB TOTAL		\$766.00
Tax on Material		\$0.00
<b>TOTAL COST</b>		<b>\$766.00</b>

**APPROVAL** \_\_\_\_\_ **DATE** \_\_\_\_\_



# **Vincent Plumbing Inc.**

P.O.Box 237234 Cocoa FL 32923

Phone # 321-288-0088

**INVOICE**    RRS-42317

**JOB NAME:** River Ranch Saloon

**PO** 437296

**Description** Sewer Clean-out  
Main Stopage  
Had to use Jet Machine

**MATERIAL:**                      \$0.00  
**TAX @ .06:**                    \$0.00  
**FREIGHT:**                      \$0.00

**TOTAL MATERIAL:**                      **\$0.00**

## **DIRECT LABOR COST:**

PERSONAL	HOURS	RATE/HR	TOTAL
PROJECT MANGER	0.00	\$90.00	\$0.00
SUPERINTENDENT	0.00	\$85.00	\$0.00
PLUMBER	4.00	\$79.00	\$316.00
PLUMBER #2	4.00	\$75.00	\$300.00
Helper	0.00	\$69.00	\$0.00

**TOTAL DIRECT LABOR COST:**                      **\$616.00**

**EQUIPMENT:**                      Jet Sewer Machine

**TOTAL EQUIPMENT COST:**                      **\$180.00**

## **SUMMARY**

## **COMMENTS**

MATERIAL COST		\$0.00
DIRECT LABOR COST		\$616.00
TOTAL EQUIPMENT COST		\$180.00
JOB COST		\$796.00
SUB TOTAL		\$796.00
Tax on Material		\$0.00
<b>TOTAL COST</b>		<b>\$796.00</b>

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

**Applied Aquatic Management, Inc.**

P.O. Box 1469  
Eagle Lake, FL 33839-1469

**Invoice**

Invoice #: 162441  
Invoice Date: 5/31/2017  
Due Date: 6/30/2017  
Project:  
P.O. Number: 432038

**Bill To:**

Westgate River Ranch Resort  
PO Box 690669  
Orlando, FL 32869

Description	Hours/Qty	Rate	Amount
Aquatic Plant Management Service			
Monthly Service- May 2017		160.00	160.00
Two (2) retention ponds @ wastewater treatment facility			
Supplier # 24590			
PO 432038 (use for remainder of contract)			

Thank you for your business.

**Total** \$160.00

**Payments/Credits** \$0.00

**Balance Due** \$160.00

Phone #	Fax:
863-533-8882 or 8...	863-534-3322



QTY	MATERIAL	PRICE	AMOUNT
30	185 EA ZIMES.	78.00	2340.00
4	Back's Samples.	23.00	94.00
2	Stenner Variable Iams.	41.00	83.20
2	Stenner Elder Plates.	48.00	96.00
1	Stenner Phenolic bear	79.00	79.00
28	185 Palmer.		602.00
1	Set of Total Phosphores		
	Samples Sewer Plant.	130.00	135.00
1	Set of Total Nitrites		
	Sewer Plant.	135.00	135.00

307-30001001-4411607 3964.20  
 307-30001001-4413999 4975.00

*[Handwritten signature]*

**HARRISON**  
 HARRISON WASTE WATER OPERATIONS  
 1571 BETH LANE  
 WINTER HAVEN FL 33890  
 OFFICE (888) 298-2011

INVOICE 308  
 DATE: 5-2-17  
 SENDER: Sewer Plant  
 PLANTS

WESTGATE RESIDENTS  
 PO Box 490667  
 DREHND 40 335269  
 Terms DUE DATE 6-1-2017

DESCRIPTION OF WORK AMOUNT  
 OPERATIONS COST FOR APRIL 2017 2781.00  
 Replaced chain on Gear Drive #1  
 Chairlift, and bear oil box. 954.00  
 Pulled Surge tank. Over Flow pump,  
 and unpluged Rags. Reset and cleared  
 Rags and Debris in Surge tank.  
 4 Hrs @ 95.00 per Hour. 380.00

1 Set of 503 Skudge Sample  
 for Digester Haul Termitt. 860.00

LABOR	HOURS	RATE	AMOUNT	TOTAL
				LABOR 2781.00
				TOTAL MATERIALS 3954.20
OTHER			954.00	
OTHER			380.00	
OTHER			860.00	
<b>TOTAL</b>				<b>8929.20</b>

Interest on past due invoices shall accrue at 18% per annum.  
 S-2-17  
 Thank You



C &amp; W Equipment Repair and Maintenance, Inc.

912 Roberts Rd. Unit #13  
Haines City, FL 33844  
863-585-7755-Phone

**Invoice**

Date	Invoice #
5/4/2017	2918

**Bill To**

ATTN: ACCOUNTS PAYABLE  
WESTGATE RESORTS/RIVER RANCH  
P.O. BOX 690669  
ORLANDO, FL. 32869

P.O. Number	Terms	Rep	Project	
435916	Net 30	DEC	WWTP BLOWER MAINTENANCE	
Description		Quantity	Price Each	Amount
1- F8-109 ELEMENTS			91.00	91.00T
2 QTS SYNTHETIC BLOWER OIL			49.00	49.00T
GREASE			2.75	2.75T
SERVICE LABOR TO INSPECT AND SERVICE BLOWERS			255.00	255.00
Sales Tax			7.00%	9.99



QTY.	MATERIAL	PRICE	AMOUNT
30	18s Enzims.	78 <sup>00</sup>	2340 00
4	Bact's Samples.	23 <sup>50</sup>	94 00
3	Stenner Duck bills.	49 <sup>00</sup>	147 00
20	18s Palmer	27 <sup>50</sup>	550 00
1	Set of Total Phosphours Sample Sewer Plant	135 <sup>00</sup>	135 00
1	Set of Total Nitrates	135 <sup>00</sup>	135 00
5	balls Air 66	28 <sup>00</sup>	142 00
12	Ft 1/4 Black Tubing Water Plant. CL <sup>2</sup> .		24 00

GL Cooling.

207 3500 1001 4411607 \$ 3567.50

207 3500 1001 4412999 \$ 3551.00

7118.50

*[Signature]*



HARRISON WASTE WATER OPERATIONS  
1871 BETH LANE  
WINTER HAVEN, FL 33880  
OFFICE: (863) 299-2073

INVOICE 3856

JOB PHONE	DATE OF ORDER
JOB NAME/LOCATION	6-2-17
SEWER/WATER	

TO WEST GATE RESORTS

PO BOX 12906 LEW  
ORLANDO FL 32819

Terms: DUE 7-1-2017

DESCRIPTION OF WORK	AMOUNT
OPERATION COST for May 2017	2781 00

Pump Out Chlorine Contact Tank for  
Sewer Plant.

770 00.

LABOR	HOURS	RATE	AMOUNT	TOTAL LABOR
				2781 00
				TOTAL MATERIALS
				3567 50
				OTHER
				770 00
				OTHER
				OTHER
				TOTAL
				7118 50

Signature

Date

6-2-17

Thank you

Interest on next due invoices shall accrue at 18% per annum



C &amp; W Equipment Repair and Maintenance, Inc.

912 Roberts Rd. Unit #13  
Haines City, FL 33844  
863-585-7755-Phone

**Invoice**

Date	Invoice #
6/22/2017	2985

<b>Bill To</b>
ATTN: ACCOUNTS PAYABLE WESTGATE RESORTS/RIVER RANCH P.O. BOX 690669 ORLANDO, FL. 32869

P.O. Number	Terms	Rep	Project		
441813	Net 30	DEC	WTP & GOLF COURSE IRRIGATION		
Description		Quantity	Price Each	Amount	
SERVICE LABOR FOR CHECKING AND EXERCISING GENERATOR AND PUMPS, REPACKED 60HP IRRIGATION PUMP			340.00	340.00	
<p><i>We now accept Visa, M/C, Discover &amp; A/E (5% fee applies) Email <a href="mailto:info@cwerm.com">info@cwerm.com</a> for authorization form or go to <a href="http://www.cwerm.com">www.cwerm.com</a></i></p> <p>Thank you for your business.</p> <p>All invoices not paid within 30 days will be subject to an 18% APR, to avoid any late charges please pay your invoice within a timely manner.</p>					
			<b>Total</b>	5340.00	



# Invoice

**Invoice #:** 163096  
**Invoice Date:** 6/30/2017  
**Due Date:** 7/30/2017  
**Project:**  
**P.O. Number:** 432038

Westgate River Ranch Resort  
PO Box 690669  
Orlando, FL 32869

Thank you for your business.

<b>Total</b>	<b>\$160.00</b>
<b>Payments/Credits</b>	<b>\$0.00</b>
<b>Balance Due</b>	<b>\$160.00</b>

Phone #	Fax:
863-533-8882 or 8...	863-534-3322

QTY	MATERIAL	PRICE	AMOUNT
34	IBs Enzims.	78 <sup>00</sup>	2652 00
64	Ft. 1/4 Black Tubing	2.00	128 00
1	Stenner Connecting Nut.	4.50	4 50
4	Stenner Duck bill Housing	19 <sup>50</sup>	78 00
15	IBs Palmer Samples.	27 <sup>50</sup>	412 50
1	Set of Total Phosphours	135 <sup>00</sup>	135 00
1	Set of Total Nitrates	135 <sup>00</sup>	135 00
4	Bart's Samples	23 <sup>50</sup>	94 00
15	bulbon AIX 66		420 00

BL Coding

2073500 1001 4411607 4059 00  
 2073500 1001 4412999 3291 00



HARRISON WASTE WATER OPERATIONS  
 1871 BETH LANE  
 WINTER HAVEN, FL 33880  
 OFFICE: (863) 299-2073

INVOICE 3857

JOB PHONE	DATE OF ORDER
	7-5-17
JOB NAME/LOCATION	
SEWER/WATER	

TO WEST GATE RESORTS

Po Box 690667

ORLANDO FL 33869

Terms: DUE DATE 8-1-2017

DESCRIPTION OF WORK	AMOUNT
OPERATIONS COST FOR JUNE 2017	2781 00
6-17-17 Cull Out Lift Station-East Canal	130 00
Cull Out on 7-3-17	
Water Plant, 4 Hrs @ 95 <sup>00</sup>	380 00

				TOTAL LABOR	2781 00
				TOTAL MATERIALS	4059 00
				OTHER	130 00
				OTHER	380 00
				OTHER	
				TOTAL	7350 00.

Signature

7-2-17

Thank You

Interest on past due invoices shall accrue at 12% per annum





**HARRISON WASTE WATER OPERATIONS**  
 1871 BETH LANE  
 WINTER HAVEN, FL 33880  
 OFFICE: (863) 299-2073

**INVOICE 3864**

JOB PHONE	DATE OF ORDER 7-7-17
JOB NAME/LOCATION Sewer Plant	
Repair.	
P.O # 438 396	

QTY	MATERIAL	PRICE	AMOUNT
1	Chaffier Drum	5500 00	
1	Pump Down Pump Truck	1200 00	
1	Main shaft and Support builds, main Bearing Kit, Sprockes and chain Main shaft couplings.	3900 00	
1	Swipe Arms, Blades chain Support Arms, cross members, shaft connectors.	3900 00	
1	Bolt Arms, Assy, Bolts Nuts, washers, Bearing for Sprockets sprock builds. chain builds.	1280 00	

*Project - Capital  
Expenditure*

TO Westgate Resorts.

P.O Box 690667

Orlando Florida. 33869

Terms: Due Date. ASAP.

DESCRIPTION OF WORK	AMOUNT
Replace and repair Chaffier #2 Drum and Celer Control Arms and main shaft and gears. chains, chain Drive, and Drive unit.	26,034 00

207-000-0000-1519999-500

					TOTAL LABOR	15,780 00
					TOTAL MATERIALS	10,254 00
					OTHER	
					OTHER	
					OTHER	
					TOTAL	26,034 00

Signature [Signature] Date 7-7-17  
 Interest on net due invoices shall accrue at 18% per annum

*Thank You*



# UNIVERSAL CONTROLS

INSTRUMENT SERVICE COMPANY  
1906 Lake Ariana Blvd., Auburndale, FL 33823  
Ph: 863-965-2053 Fax: 863-967-7765

ACCOUNTS PAYABLE

2016 JUL 19 AM 11:31

## Invoice

DATE	INVOICE #
7/14/2016	6032

<b>BILL TO</b>
WESTGATE RESORTS LTD. P.O. BOX 690669 ORLANDO, FL 32869

<b>SHIP TO</b>
WESTGATE RESORTS RIVER RANCH 3200 RIVER RANCH BLVD. RIVER RANCH, FLORIDA 33867

<b>PURCHASE ORDER</b>		<b>TERMS</b>		<b>DUE DATE</b>	
382423		DUE UPON RECEIPT		7/14/2016	
<b>QUANTITY</b>	<b>DESCRIPTION</b>	<b>DATE</b>	<b>UNIT PRICE</b>	<b>AMOUNT</b>	
8	PERFORMED ANNUAL CALIBRATIONS OF GOLF COURSE WELL FLOWMETER, WELL, WELL #1 FLOWMETER, WELL #2 FLOWMETER, ATTEMPTED CALIBRATION OF WWTP EFFLUENT FLOWMETER FOUND NO POWER, FOUND BAD POWER SUPPLY, INFORMED MARK TURNER, WILL RETURN AND REPLACE POWER SUPPLY AND CALIBRATE - LABOR - O'QUINN	7/6/2016	72.00	576.00	
<b>Total</b>			\$576.00		
<b>Phone #</b>	863-965-2053	<b>Fax #</b>	863-967-7765		





C & W Equipment Repair and Maintenance, Inc.

912 Roberts Rd. Unit #13  
Haines City, Fl. 33844  
863-585-7755-Phone

# Invoice

Date	Invoice #
8/2/2017	3050

**Bill To**

ATTN: ACCOUNTS PAYABLE  
WESTGATE RESORTS/RIVER RANCH  
P.O. BOX 690669  
ORLANDO, FL. 32869

P.O. Number	Terms	Rep	Project		
446029	Net 30	DEC	WTP CONTROLS AND PUMPS		
Description		Quantity	Price Each	Amount	
07-03-17-OVERTIME SERVICE LABOR FOR COMING OUT AND CHECKING WTP CONTROLS AND PUMPS, HIGH SERVICE AND WELL PUMPS, GOING INTO PROGRAMS AND CHECKING PARAMETERS			2,100.00	2,100.00	
<div>EXTENDED 30 SEP 2017</div>					
We now accept Visa, M/C, Discover & A/E (5% fee applies) Email info@cwerm.com for authorization form or go to www.cwerm.com					
Thank you for your business.			<div>Total\$2,100.00</div>		
All invoices not paid within 30 days will be subject to an 18% APR, to avoid any late charges please pay your invoice within a timely manner.					

# Invoice

Invoice #: 163650  
Invoice Date: 7/31/2017  
Due Date: 8/30/2017  
Project:  
P.O. Number: 432038

### Description

Hours/Qty

Rate

Amount

160.00

160.00

PO 432038 (use for remained of contract)

<b>Total</b>	<b>\$160.00</b>
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Payments/Credits	\$0.00
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Balance Due	\$160.00
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Phone #	Fax:
863-533-8882 or 8...	863-534-3322



QTY.	MATERIAL	PRICE	AMOUNT
3	Stenner Tubes	48 <sup>00</sup>	144 00
2	Duck bills. Stenner.	69 <sup>00</sup>	138 00
1	Stenner Rotor Assy with Bearings		156 00
15	Gallons AXR Lift Stations.	28 <sup>50</sup>	427 50
35	lbs. Enzymes.	78 <sup>00</sup>	2730 00
1	Set of Total Phosphorus Sample. Eff. Sewer Plant.	135 <sup>00</sup>	135 00
1	Set of Total Nitrates. Sample Eff. Sewer Plant	135 <sup>00</sup>	135 00
4	Bact's Samples.	23 <sup>50</sup>	94 00
10	lbs of Palmer	27 <sup>50</sup>	275 00
GL Coding			
207	35001001 4411607		4234 50
207	3500-1001-4412999		2976 00



**HARRISON WASTE WATER OPERATIONS**  
1871 BETH LANE  
WINTER HAVEN, FL 33880  
OFFICE: (863) 299-2073

INVOICE 366

JOB PHONE	DATE OF ORDER 8-2-17
JOB NAME/LOCATION SEWER/WATER	

TO WEST GATE RESORTS

PO BOX 690667

ORLANDO FL 33869

Terms:

DUE DATE 9-1-2017

DESCRIPTION OF WORK	AMOUNT
OPERATIONS COST FOR JULY 2017	2781 00

Call Out for Water Plant. 7-25-17  
3 Hrs @ 65<sup>00</sup>

195 00

LABOR	HOURS	RATE	AMOUNT	TOTAL LABOR
				2781 00
TOTAL MATERIALS				4234 50
OTHER				195 00
OTHER				
OTHER				
TOTAL				7210 50

Signature

Date 8-2-17

Thank You

Interest on past due invoices shall accrue at 18% per annum.

QTY.	MATERIAL	PRICE	AMOUNT
3	Stenner Tubes	48 <sup>00</sup>	144 00
3	Stenner Duckbills	69 <sup>00</sup>	207 00
2	Stenner Roller Assy.	78 <sup>00</sup>	156 00
2	Main Shafts	68 <sup>50</sup>	137 00
1	Stenner Ferrule	N/C.	
1	Stenner Tube Housing Cover w/ Bushing	109 <sup>00</sup>	109 00
1	O/p Log Book	37 <sup>00</sup>	37 00
4	Bact's Samples	23 <sup>50</sup>	94 00
1	Set of Total Nitrites		135 00
1	Set of Total Phosphorus Sample		135 00
31	1Bs Enzymes Sewer Phant.	78 <sup>00</sup>	2418 00
3	Dups of Bact's Samples for Bact's Dock time on Broken Line Repair.	175 <sup>00</sup>	175 00
3	1Bs Palmer Sewer Phant.	27 <sup>50</sup>	82 50
207 3500 1001 4412999			2781.00
207 3500 1001 4411607			3427.50
207 3500 1001 4411298			402.00



**HARRISON WASTE WATER OPERATIONS**  
 1871 BETH LANE  
 WINTER HAVEN, FL 33880  
 OFFICE: (863) 299-2073

**INVOICE 3878**

JOB PHONE	DATE OF ORDER <b>9-2-17</b>
JOB NAME/LOCATION <b>SEWER/WATER</b>	

TO WEST GATE RESORTS

PO BOX 1090667

ORLANDO FL 33869

PHONE

ORDER TAKEN BY

Terms:

**DUE DATE 10-1-2017**

DESCRIPTION OF WORK	AMOUNT
OPERATIONS COST FOR AUGUST 2017	2781 00

				TOTAL LABOR	2781 00
				TOTAL MATERIALS	3829 50
				OTHER	
				OTHER	
				OTHER	
				<b>TOTAL</b>	<b>6610 50</b>

Signature

Date

**9-2-17**

*Thank You*

Interest on past due invoices shall accrue at 18% per annum.





C & W Equipment Repair and Maintenance, Inc.

912 Roberts Rd. Unit #13  
Haines City, Fl. 33844  
863-585-7755-Phone

# Invoice

Date	Invoice #
9/26/2017	3147

Bill To
ATTN: ACCOUNTS PAYABLE WESTGATE RESORTS/RIVER RANCH P.O. BOX 690669 ORLANDO, FL. 32869

P.O. Number	Terms	Rep	Project		
455059	Net 30	DEC	BLOWER SERVICE/MAINTENANCE		
Description		Quantity	Price Each	Amount	
2- F8-109 ELEMENTS			96.00	96.00	
2 QTS SYNTHETIC BLOWER OIL			50.00	50.00	
SERVICE CHARGE FOR CHECKING BELTS AND SERVICING BLOWERS			255.00	255.00	
We now accept Visa, M/C, Discover & A/E (5% fee applies) Email info@cwerm.com for authorization form or go to www.cwerm.com					
Thank you for your business.			<div>Total\$401.00</div>		
All invoices not paid within 30 days will be subject to an 18% APR, to avoid any late charges please pay your invoice within a timely manner.					

**OAR ELECTRIC INC.**

920 East Street  
 Lake Wales, FL 33853  
 PHONE: 863-676-8801  
 FAX: 863-676-8808

**JOB INVOICE**

INVOICE NUMBER 13224  
 INVOICE DATE 09/21/2017  
 CUSTOMER ID 0  
 TERMS  
 PAGE NUMBER Page 1 of 1

To: WESTGATE RESORTS  
 3200 RIVER RANCH BLVD.  
 RIVER RANCH, FL 33867

LABOR \$265.00  
 MATERIALS  
 ARRIVAL TIME  
 DEPARTURE TIME  
 OTHER  
**TOTAL \$265.00**

SERVICE ADDRESS: WESTGATE RESORTS 3200 RIVER RANCH BLVD., RIVER RANCH, FL 33867

JOB DESCRIPTION: Connect generator to lift station. Generator was not the proper voltage to connect to lift station.

ID#	DESCRIPTION	QTY	PRICE EACH	EXTENDED PRICE
-----	-------------	-----	------------	----------------

~~387~~

207 3500 1001 44/2999



DATE	DESCRIPTION	HOURS	HOURLY RATE	EXTENDED AMOUNT
9/13/2017	Service Call	1.00	\$75.00	\$75.00
9/13/2017	Electrician - Richard & Eric	2.00	\$95.00	\$190.00
<b>NO STATEMENT SENT - PLEASE PAY THIS AMOUNT ON RECEIPT</b>				<b>\$265.00</b>



QTY.	MATERIAL	PRICE	AMOUNT
8	Bact's Samples	23 <sup>50</sup>	94 00 ✓
4	Bact's 3 day.		
	Special. Sampling for Water Plant.	23 <sup>50</sup>	94 00
1	Roller Assy. Stenner.	109 <sup>00</sup>	109 00 ✓
1	Set of Total Alkalies.	135 <sup>00</sup>	135 00 ✓
1	Set of Phosphorus Sample.	135 <sup>00</sup>	135 00 ✓
30	lbs Enzymes Sewer Plant.	78 <sup>00</sup>	2340 00 ✓
20	Gallon of Deodorizer Sewer Plant.		720 00
20	lbs Enzymes Added After Power Restored.	78 <sup>00</sup>	1560 00
25	lbs Palmer. Sewer Plant.	22 <sup>50</sup>	550 00
• = Hurricane Related			
207	3500 1001 4412999		\$2781.00
207	3500 1001 4411607		2813.00
207	3500 1001 4411648		2924.00
			<u>8518.00</u>



HARRISON WASTE WATER OPERATIONS  
1871 BETH LANE  
WINTER HAVEN, FL 33880  
OFFICE: (863) 299-2073

INVOICE 3887

JOB PHONE	DATE OF ORDER
	10-2-17
JOB NAME/LOCATION	
SEWER/WATER	

TO WEST GATE RESORTS  
PO BOX 690647  
ORLANDO FL 32869  
Terms: DUE 11-1-2017

DESCRIPTION OF WORK	AMOUNT
OPERATIONS COST FOR SEPT 2017	2781 00

LABOR	HOURS	RATE	AMOUNT	TOTAL LABOR
				2781 00
TOTAL MATERIALS				5737 00
OTHER				
OTHER				
OTHER				
TOTAL				8518 00

Signature

Date 10-2-17

Thank You

Interest on past due invoices shall accrue at 18% per annum.

October 2016

Req No	Time	Close Date	Unit	Location	Assignee	Category	Summary
	2.00				Baez Garcia, Lesther Total		
	1.82				Diamond, Richard Total		
	1.03				Gawlik, Mark Total		
	5.08				Golan, Manny Total		
	0.55				Rodriguez, Miguel Total		
	13.72				Vega, Angel Total		
	24.20				Grand Total		

Diamond, Richard	1.82		
Gawlik, Mark Tot	1.03		
Golan, Manny To	5.08		
Vega, Angel Tot	13.72		
Total	21.65	287.54	

Gawlik, Mark Tot	1.03		
Baez Garcia, Lesther	2.00		
Rodriguez, Miguel	0.55		
Total	3.58	41.22	

FICA / Med - 24.40  
 Work comp - .03



November 2016

Req No	Time	Close Date	Unit	Location	Assignee	Category
	6.03				Comfort, Robert Total	
	0.50				Frazier, Garrett Total	
	0.52				Gawlik Jr, Mark Total	
	0.03				Turner, Mark Total	
	22.35				Vega, Angel Total	
	29.43				Grand Total	

Vega, Angel Total	22.35	
Turner, Mark Total	0.03	
Gawlik Jr, Mark Total	0.52	
Frazier, Garrett Total	0.50	
<b>Total</b>	<b>23.40</b>	<b>305.02</b>

Comfort, Robert Tota	6.03	
<b>Total</b>	<b>6.03</b>	<b>64.07</b>

FICA/Med - 27.38  
work comp - .04

December 2016

Time	Close Date	Unit	Location	Assignee	Category	Summary
7.57				Frazier, Garrett Total		
9.23				Golan, Manny Total		
18.05				Lanosa, Gary Total		
2.02				Shepard, Colton Total		
21.53				Vega, Angel Total		
3.00				Zayas Ortiz, Rafael Total		
61.40				Grand Total		

Frazier, Garrett Total	7.57	
Golan, Manny Total	9.23	
Lanosa, Gary Total	18.05	
Vega, Angel Total	21.53	
Zayas Ortiz, Rafael Tot	3.00	724.03
Shepard, Colton Tota	2.02	
Total	2.02	21.42

FICA / Med - 55.31

Fed Unem - .01

Work comp - .07



January 2017

Req No	Time	Close Date	Unit	Location	Assignee	Category	Summary
	12.53				Caron, Gary Total		
	2.30				Diamond, Richard Total		
	2.00				Gawlik Jr, Mark Total		
	3.00				Rodriguez, Miguel Total		
	3.02				Trupiano, Claude Total		
	12.80				Vega, Angel Total		
	35.65				Grand Total		

Caron, Gary Total	12.53	
Diamond, Richard Tot	2.30	
Gawlik Jr, Mark Total	2.00	
Vega, Angel Total	3.02	
Trupiano, Claude Tot	12.80	
		405.29

Rodriguez, Miguel Tot	3.00	
Total	3.00	37.02

FICA / med - 32.82  
work comp - .04

February 2017

Req No	Time	Close Date	Unit	Location	Assignee	Category	Summary
	10.05				Caron, Gary Total		
	4.52				Comfort, Robert Total		
	3.00				Creech, Kristen Total		
	0.50				Diamond, Richard Total		
	0.27				McGill, Andrew Total		
	2.02				Rodriguez, Miguel Total		
	7.02				Vega, Angel Total		
	27.37				Grand Total		

Caron, Gary Total	10.05	
Diamond, Richard Tot	0.50	
Vega, Angel Total	7.02	
		247.19

Comfort, Robert Tota	4.52	
Creech, Kristen Total	3.00	
McGill, Andrew Total	0.27	
Rodriguez, Miguel Tot	2.02	
Total	9.80	106.72

FICA / Med - 26.26  
work comp - .03



March 2017

Req No	Time	Close Date	Unit	Location	Assignee	Category	Summary
	0.75				Caron, Gary Total		
	4.00				Frazier, Garrett Total		
	2.07				Hanger, Dalton Total		
	11.62				Vega, Angel Total		
	18.4333				Grand Total		

Caron, Gary Total	0.75
Frazier, Garrett Total	4.00
Vega, Angel Total	11.62
	207.82

Hanger, Dalton Total	2.07	
Total	2.07	20.67

FICA (Med- 16.95  
work comp- .02

April 2017

Req No	Open Dat	Close Date	Unit	Location	Assignee	Category	Summary
12298664	0.37	4/26/2017	108a	River Ranch	Diamond, Richard	needed.safe.instructions	fire hydrant cover open closet to cabin 6-8
12226010	2.50	4/6/2017	405	River Ranch	Diamond, Richard	service.leak	water leaking
12212447	0.02	4/4/2017	Stable	River Ranch	Diamond, Richard	service.leak	Stall # 5 water leak
12258446	7.00	4/14/2017	Water Plant	River Ranch	Vega, Angel	needed.specialassistance	4/13/17 Read meters.

Diamond, Richard 2.88  
Vega, Angel 7.00

130.60

FICA / Med - 9.69  
work comp. .01



May 2017

Req No	Open Date	Close Date	Unit	Location	Assignee	Category	Summary
	1.03				Baez Garcia, Lesther Total		0
	15.07				Comfort, Robert Total		0
	4.00				Frazier, Garrett Total		0
	6.08				Golan, Manny Total		0
	1.00				Haley, Jacob Total		0
	4.00				Leyva Aranza, Enrique Total		0
	2.00				Miller Jr, Lester Total		0
	3.02				Rakow, Michael Total		0
	3.00				Rodriguez, Miguel Total		0
	18.82				Vega, Angel Total		0
	58.02				Grand Total		0

Vega, Angel Total	18.82	
Frazier, Garrett Total	4.00	
Golan, Manny Total	6.08	
Haley, Jacob Total	1.00	
Rakow, Michael Total	3.02	
		369.23

Comfort, Robert Total	15.07	
Rodriguez, Miguel Total	3.00	
Baez Garcia, Lesther Total	1.03	
Leyva Aranza, Enrique Total	4.00	
Miller Jr, Lester Total	2.00	
Total	25.10	150.67

FICA/Med - 27.40  
 Work Comp - .03

June 2017

Req No	Open Da	Close Date	Unit	Location	Assignee	Category	Summary
12470061	0.35	6/17/2017	RV Park	River Ranch	Vega, Angel	service.water.leak	rv site 8 water is leaking

Vega, Angel 0.35

4.60

FICA/Med- .34



July 2017

[illegible]

FICA / med - 27.44  
work comp - .03

August 2018

Req No	Open	Dat	Close Date	Unit	Location	Assignee	Category	Summary
						McGill, Andrew Total		
						McIntyre, Troy Total		
						Rakow, Michael Total		
						Turner, Mark Total		
						Vega, Angel Total		
	48.9667					Grand Total		

McGill, Andrew Total	3.02	
McIntyre, Troy Total	16.75	
Rakow, Michael Total	2.00	
Turner, Mark Total	1.03	
Vega, Angel Total	26.17	
		637.56

#REF!	0.00	
#REF!	0.00	
#REF!	0.00	
#REF!	0.00	
#REF!	0.00	
Total	0.00	0.00

FICA / Med - 47.31  
 Fed unem - .01  
 State unem - .04  
 Work comp - .06



September 2017

Req No	Open Date	Close Date	Unit	Location	Assignee	Category	Summary
			8.02		Diamond, Lonny Total		
			1.78		Diamond, Richard Total		
			4.03		Lehew, Raymond Total		
			1.02		McIntyre, Troy Total		
			0.33		Rakow, Michael Total		
			0.52		Vega, Angel Total		
			15.70		Grand Total		

Diamond, Lonny Total	8.02	
Diamond, Richard Total	1.78	
Lehew, Raymond Total	4.03	
McIntyre, Troy Total	1.02	
Rakow, Michael Total	0.33	
Vega, Angel Total	0.52	
		423.42

#REF!	0.00	
#REF!	0.00	
#REF!	0.00	
#REF!	0.00	
#REF!	0.00	
Total	0.00	0.00

FICA/Med - 31.42  
work comp - .04

River Ranch Water Management LLC  
Response to PSC Letter Dated 12/07/2016

7 Transportation Expense

Vehicle Number	Year	Type	Vin
FJL400	2008	Nissan PU	IN6BA06A18N359410

Owned only expense other expense is service contract, fuel and insurance

NO Other vehicles are used in conjunction with River Ranch Water Management LLC

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Interim  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001


REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 10/01/16 To: 10/31/16

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Prior to Construction)	Sample Measurement		.066					0		
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement		0.095 (An.Avg.)	MGD					Monthly	Calculation
Flow	Sample Measurement		.062					0		
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement		Report (Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement				7.44			0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement				20.0 (An.Avg.)		mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement				4.68	4.68		0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)	mg/L		Monthly	Grab
Solids, Total Suspended	Sample Measurement				5.39			0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement				20.0 (An.Avg.)		mg/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement				5.60	5.60		0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)	mg/L		Monthly	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	11-27-16

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



## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: River Ranch Resort WWTF

MONITORING GROUP R-001

PERMIT NUMBER: FLA011032-007-DW3P

NUMBER:

MONITORING PERIOD From: 10/01/16 To:

10/31/16

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				2			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement				200 (An.Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<1	<1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement				Report (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Monthly	Grab
pH	Sample Measurement			7.1		7.1		0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			2.0				0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					<0.05		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement					12.0 (Max.)	mg/L		Monthly	Grab
Nitrogen, Total (as N)	Sample Measurement					12.4		0		
PARM Code 00600 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)	mg/L		Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement					0.709		0		
PARM Code 00665 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)			Monthly	Grab
Flow (Prior to Construction)	Sample Measurement	.059						0		
PARM Code 50050 R Mon. Site No. FLW-01	Permit Requirement	0.095 (3Mo.Avg.)	MGD						5 Days/Week	Flow Totalizer
Percent Capacity, (TMADF/Permit Capacity) x 100	Sample Measurement					62%		0		
PARM Code 00180 1 Mon. Site No. FLW-01	Permit Requirement					Report (Mo.Avg.)	percent		Monthly	Calculated

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001 RIBs with Influent


REPORT FREQUENCY: Annually  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 10/01/16 To: 10/31/16

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement					MNR		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement					Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement					MNR		0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement					Report (Max.)	mg/L		Annually	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	11-27-16

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

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

**When Completed mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

COUNTY: Polk  
OFFICE: Southwest District

PERMIT NUMBER: FLA011032-007-DW3P


LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: RMP-Q  
MONITORING GROUP DESCRIPTION: Biosolids Quantity

REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 10/01/16 To: 10/31/16

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement		0						0		
PARM Code B0008 + Mon. Site No. RMP-001	Permit Requirement		Report (Mo.Total)	Dry tons						Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement		0						0		
PARM Code B0007 + Mon. Site No. RMP-002	Permit Requirement		Report (Mo.Total)	Dry tons						Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	11-22-16

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



# DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA011032-007-DW3P

From: 10/01/16

To: 10/31/16

Facility: River Ranch Resort WWTF

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	Nitrogen, Total (as N) mg/L	Phosphorus, Total (as P) mg/L		
Code	80082	50060	74055	00620	00530	00400	50050	00600	00665		
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	EFA-01	EFA-01		
1							.044				
2		3.0				7.1	.044				
3		2.5				7.1	.061				
4		2.2				7.1	.077				
5		2.0				7.1	.042				
6		3.0				7.1	.080				
7		3.0				7.1	.044				
8		2.5				7.1	.089				
9							.055				
10		2.4				7.1	.055				
11		2.0				7.1	.061				
12		2.5				7.1	.070				
13		2.2				7.1	.072				
14		2.0				7.1	.049				
15		2.2				7.1	.054				
16							.054				
17		3.0				7.1	.054				
18		2.2				7.1	.061				
19		2.5				7.1	.055				
20		2.2				7.1	.061				
21		2.0				7.1	.070				
22		2.5				7.1	.060				
23							.060				
24		2.4				7.1	.060				
25		2.6				7.1	.058				
26	4.68	3.0	<1	<0.05	5.60	7.1	.051	12.4	0.709		
27		3.0				7.1	.055				
28		2.2				7.1	.066				
29							.072				
30							.072				
31		2.5				7.1	.072				
Total											
Mo. Avg.											

## PLANT STAFFING:

Day Shift Operator

Class:

C

Certificate No:

7196

Name:

Mike Harrison

Evening Shift Operator

Class:

Certificate No:

Name:

Night Shift Operator

Class:

Certificate No:

Name:

Lead Operator

Class:

Certificate No:

Name:

**MID FLORIDA WATER LAB**

LABORATORY CERTIFICATION # E84567

8 OAKWOOD ROAD, WINTER HAVEN FL 33880  
Phone: (863) 965-2540 Fax: (863) 967-8601 Toll Free (888) 244-5657

Margaret Rajpaul, Director

**LABORATORY RESULTS**CLIENT: MICHAEL HARRISONADDRESS: 1871 BETH LANE, WINTER HAVEN FL 33880SAMPLE DESCRIPTION: WASTEWATERSAMPLE COLLECTION MIKE HARRISON 10/26/16 @ 6.45 amSYSTEM NAME: RIVER RANCHDATE AND TIME RECEIVED: 10/26/16 @ 12.32 pm

Lab I.D. Number	Parameter	Result	Units	Method	MDL	Date & Time Start	Date & Time Completed
16102946	EFFLUENT FECAL	<1 CFU	#/100 ml	SM9222D	1	10/26/16@ 1.50 pm	10/27/16@ 1.10 pm
	INFLUENT CBOD <sub>5</sub>		mg/L	SM5210-B	2.00		
16103329	EFFLUENT CBOD <sub>5</sub>	4.68	mg/L	SM5210-B	2.00	10/26/16@ 4.10 pm	10/31/16@ 2.45 pm
	INFLUENT TSS		mg/L	SM2540-D	1.00		
16103329	EFFLUENT TSS	5.60	mg/L	SM2540-D	1.00	10/26/16@ 2.40 pm	10/27/16@ 10.00 am
16103329	EFFLUENT NO <sub>3</sub> -N	U	mg/L	SM4500N03E	0.05	10/26/16@ 12.50 pm	10/26/16@ 3.00 pm
16103329	TOTAL KJELDAHL NITROGEN	12.4	mg/L	351.2	0.05	11/01/16@ 11.23 am	E84167
16103329	TOTAL PHOSPHORUS	0.709	mg/L	365.3	0.008	10/31/16@ 11.43 am	E84167

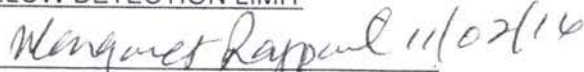
COMMENTS: TOTAL NITROGEN = 12.40 MG/L

THESE TESTS MEET NELAC REQUIREMENTS.

The test results in this report relate only to the analyses of the samples submitted

QUALIFIERS THAT MAY APPLY:

U = BELOW DETECTION LIMIT

  
Margaret Rajpaul - Contact Person

# BENCHMARK

## EnviroAnalytical Inc.



NELAC Certification #E84167

### ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : 16101050

Mid Florida Water Lab  
8 Oakwood Rd.  
Winter Haven, FL 33880


Project Name : HARRISON WASTE WATER  
Date Received : 10/28/2016  
Time Received : 1440

Margaret Rajpaul

Submission Number: 16101050  
Sample Number: 001  
Sample Description: River Ranch

Sample Date: 10/26/2016  
Sample Time: 0645  
Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Analysis Date/Time	Analyst
TOTAL KJELDAHL NITROGEN	12.4	MG/L	0.05	0.20	351.2	11/01/2016 11:23	PN
TOTAL PHOSPHORUS AS P	0.709	MG/L	0.008	0.032	365.3	10/31/2016 11:43	BLB

  
Dale D. Dixon / Laboratory Director

11/01/2016

Date

Tulay Tanrisever / QC Officer

Deborah A. Murphy / Project Manager

#### DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.  
B = Results based upon colony counts outside the ideal range.  
H = Value based on field kit determination. Results may not be accurate.  
I = Reported value is between the laboratory MDL and the PQL.  
J1 = Estimated value. Surrogate recovery limits exceeded.  
J2 = Estimated value. No quality control criteria exists for component.  
J3 = Estimated value. Quality control criteria for precision or accuracy not met.  
J4 = Estimated value. Sample matrix interference suspected.  
J5 = Estimated value. Data questionable due to improper lab or field protocols.  
K = Off-scale low. Value is known to be < the value reported.  
L = Off-scale high. Value is known to be > the value reported.  
N = Presumptive evidence of presence of material.  
O = Sampled, but analysis lost or not performed.

Q = Sample held beyond accepted hold time.  
T = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.  
U = Analyte analyzed but not detected at the value indicated.  
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.  
Y = Analysis performed on an improperly preserved sample. Data may be inaccurate.  
Z = Too many colonies were present (TNTC). The numeric value represents the filtration volume.  
! = Data deviate from historically established concentration ranges.  
? = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.  
\* = Not reported due to interference.

#### NOTES:

MBAS calculated as LAS, molecular weight = 340  
PQL = 4xMDL  
ND = Not detected at or above the adjusted reporting limit  
X = Value exceeds MCL  
G1 = Accuracy standards does not meet method control limits, but does meet lab control limits that are in agreement with USEPA generated data. USEPA letter available upon request.

#### COMMENTS:

For questions or comments regarding these results, please contact us at (941) 723-9986.

Results relate only to the samples.



# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

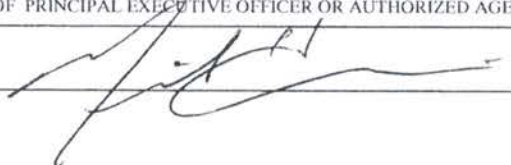
LIMIT: Interim  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001  
RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 11/01/16 To: 11/30/16

REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Prior to Construction)	Sample Measurement	.068				0		
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.095 (An.Avg.)	MGD				Monthly	Calculation
Flow	Sample Measurement	.079				0		
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.44		0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.51	3.51	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab
Solids, Total Suspended	Sample Measurement			5.70		0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)		mg/L	Monthly	Calculation
Solids, Total Suspended	Sample Measurement			11.2	11.2	0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	12-27-16

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

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: River Ranch Resort WWTF

MONITORING GROUP  
NUMBER:

R-001

PERMIT NUMBER: FLA011032-007-DW3P

MONITORING PERIOD From: 11/01/16 To: 11/30/16

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				2			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement				200 (An.Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<1	<1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement				Report (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Monthly	Grab
pH	Sample Measurement			7.0		7.0		0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			1.4				0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					5.80		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement					12.0 (Max.)	mg/L		Monthly	Grab
Nitrogen, Total (as N)	Sample Measurement					0.627		0		
PARM Code 00600 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)	mg/L		Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement					0.038		0		
PARM Code 00665 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)			Monthly	Grab
Flow (Prior to Construction)	Sample Measurement		.065					0		
PARM Code 50050 R Mon. Site No. FLW-01	Permit Requirement		0.095 (3Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
Percent Capacity, (TMAD/Permit Capacity) x 100	Sample Measurement					68%		0		
PARM Code 00180 1 Mon. Site No. FLW-01	Permit Requirement					Report (Mo.Avg.)	percent		Monthly	Calculated



# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER:

FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT:  
CLASS SIZE:  
MONITORING GROUP NUMBER:  
MONITORING GROUP DESCRIPTION:  
RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD

Final  
N/A  
R-001  
R-001 RIBs with Influent

REPORT FREQUENCY: Annually  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

From: 11/01/16 To: 11/30/16

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement			MNR		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement			MNR		0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	

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



**When Completed mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

COUNTY: Polk  
OFFICE: Southwest District

[illegible]

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	

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

# DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA011032-007-DW3P  
From: 11/01/16 To: 11/30/16

Facility: River Ranch Resort WWTF

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	Nitrogen, Total (as N) mg/L	Phosphorus, Total (as P) mg/L		
Code	80082	50060	74055	00620	00530	00400	50050	00600	00665		
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	EFA-01	EFA-01		
1		1.4				7.0	.081				
2		1.8				7.0	.079				
3		2.0				7.0	.083				
4		1.6				7.0	.085				
5		2.0				7.0	.089				
6							.089				
7		1.6				7.0	.089				
8		1.4				7.0	.094				
9		1.5				7.0	.093				
10		1.8				7.0	.092				
11		1.8				7.0	.077				
12							.081				
13							.081				
14		2.2				7.0	.081				
15		2.5				7.0	.074				
16		2.3				7.0	.068				
17		2.2				7.0	.073				
18		2.2				7.0	.072				
19							.066				
20							.066				
21		2.2				7.0	.066				
22		2.4				7.0	.081				
23		2.5				7.0	.079				
24		1.8				7.0	.090				
25		3.0				7.0	.084				
26							.076				
27							.076				
28		1.6				7.0	.076				
29	3.51	2.0	<1	5.80	11.2	7.0	.051	0.627	0.038		
30		2.5				7.0	.068				
31											
Total											
Mo. Avg.											

## PLANT STAFFING:

Day Shift Operator Class: C Certificate No: 7196 Name: Mike Harrison

Evening Shift Operator Class: Certificate No: Name:

Night Shift Operator Class: Certificate No: Name:

Lead Operator Class: Certificate No: Name:

**MID FLORIDA WATER LAB**

LABORATORY CERTIFICATION #: E84567

8 OAKWOOD ROAD, WINTER HAVEN FL 33880  
Phone: (863) 965-2540 Fax: (863) 967-8601 Toll Free (888) 244-5657

Margaret Rajpaul, Director

**LABORATORY RESULTS**CLIENT: MICHAEL HARRISONADDRESS: 1871 BETH LANE, WINTER HAVEN FL 33880SAMPLE DESCRIPTION: WASTEWATERSAMPLE COLLECTION MIKE HARRISON 11/29/16 @ 7.00 amSYSTEM NAME: RIVER RANCHDATE AND TIME RECEIVED: 11/29/16 @ 11.36 am

Lab I.D. Number	Parameter	Result	Units	Method	MDL	Date & Time Start	Date & Time Completed
16113275	EFFLUENT FECAL	<1 CFU	#/100 ml	SM9222D	1	11/29/16@ 12.10 pm	11/30/16@ 11.55 am
	INFLUENT CBOD <sub>5</sub>		mg/L	SM5210-B	2.00		
16113702	EFFLUENT CBOD <sub>5</sub>	3.51	mg/L	SM5210-B	2.00	11/29/16@ 2.10 pm	12/04/16@ 3.00 pm
	INFLUENT TSS		mg/L	SM2540-D	1.00		
16113702	EFFLUENT TSS	11.2	mg/L	SM2540-D	1.00	11/29/16@ 12.45 pm	11/30/16@ 10.00 am
16113702	EFFLUENT NO <sub>3</sub> -N	5.80	mg/L	SM4500N03E	0.05	11/29/16@ 12.00 pm	11/29/16@ 3.55 pm
16113702	TOTAL KJELDAHL NITROGEN	0.627	mg/L	351.2	0.05	12/02/16@ 11.53 am	E84167
16113702	TOTAL PHOSPHORUS	0.038	mg/L	365.3	0.008	12/01/16@ 11.58 am	E84167

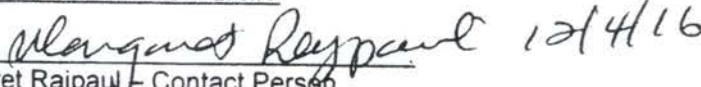
COMMENTS: **TOTAL NITROGEN =6.427 MG/L**

THESE TESTS MEET NELAC REQUIREMENTS.

The test results in this report relate only to the analyses of the samples submitted

QUALIFIERS THAT MAY APPLY:

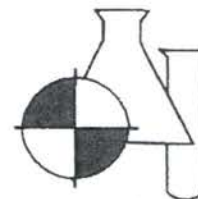
U = BELOW DETECTION LIMIT

  
Margaret Rajpaul - Contact Person



# BENCHMARK

EnviroAnalytical Inc.



NELAC Certification #E84167

## ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : 16111162

Mid Florida Water Lab  
8 Oakwood Rd.  
Winter Haven, FL 33880

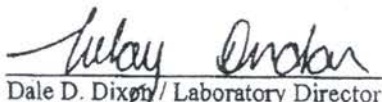
Project Name : HARRISON  
Date Received : 11/30/2016  
Time Received : 1535

Margaret Rajpaul

Submission Number: 16111162  
Sample Number: 001  
Sample Description: River Ranch

Sample Date: 11/29/2016  
Sample Time: 0700  
Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Analysis Date/Time	Analyst
TOTAL KJELDAHL NITROGEN	0.827	MG/L	0.05	0.20	351.2	12/02/2016 11:53	PN
TOTAL PHOSPHORUS AS P	0.038	MG/L	0.008	0.032	385.3	12/01/2016 11:58	BLB

  
Dale D. Dixon / Laboratory Director

12/05/2016

Date

Tulay Tannisever / QC Officer

Deborah A. Murphy / Project Manager

### DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.  
B = Results based upon colony counts outside the ideal range.  
H = Value based on field kit determination. Results may not be accurate.  
I = Reported value is between the laboratory MDL and the PQL.  
J1 = Estimated value. Surrogate recovery limits exceeded.  
J2 = Estimated value. No quality control criteria exists for component.  
J3 = Estimated value. Quality control criteria for precision or accuracy not met.  
J4 = Estimated value. Sample matrix interference suspected.  
J5 = Estimated value. Data questionable due to improper lab or field protocols.  
K = Off-scale low. Value is known to be < the value reported.  
L = Off-scale high. Value is known to be > the value reported.  
N = Presumptive evidence of presence of material.  
O = Sampled, but analysis lost or not performed.

Q = Sample held beyond accepted hold time.  
T = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.  
U = Analyte analyzed but not detected at the value indicated.  
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.  
Y = Analysis performed on an improperly preserved sample. Data may be inaccurate.  
Z = Too many colonies were present (TNTC). The numeric value represents the filtration volume.  
I = Data deviate from historically established concentration ranges.  
? = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.  
\* = Not reported due to interference.

### NOTES:

MBAS calculated as LAS; molecular weight = 340.  
PQL = 4xMDL.  
ND = Not detected at or above the adjusted reporting limit.  
X = Value exceeds MCL.  
G1 = Accuracy standard does not meet method control limits, but does meet lab control limits that are in agreement with USEPA generated data. USEPA letter available upon request.

### COMMENTS:

For questions or comments regarding these results, please contact us at (941) 723-9986.

Results relate only to the samples.

CS

# CHAIN OF CUSTODY

No 75840



## MID FLORIDA WATER LAB

Margaret Rajpaul, Director  
8 Oakwood Road  
Winter Haven, FL 33880

FDOH Cert# E84567

PHONE: (863) 965-2540  
FAX: (863) 967-8601  
TOLL FREE: 888-244-5657

FOR LAB USE ONLY

ce

RECEIVED

2016 NOV 29 A 11:36

Client Name: <u>Harrison</u>							TESTS REQUIRED						
Address							Analysis						
City: State: ZIP:							16 C.B.O.D. 16 TSS 16 NITRATE 16 FECAL 106 L P 106 L N.F.						
Phone #													
FAX #													
Collected by: <u>AA</u> State Collected From:													
Sample ID	Matrix	Date	Time	Comp/Grab	Sample Location	Preservation	16 C.B.O.D.	16 TSS	16 NITRATE	16 FECAL	106 L P	106 L N.F.	Temp Gun 7A2
1	EFF	w/w	11/29/16	7:00	6	River Ranch	on 100	3702	3702	3702	3215		Temps
2						<del>Shoreline</del>							Fecal 2.9c
3			836			Lion mtr	16 L	3703	3703	3703	3276		TSS 7.9c
4			930			Scenic View mtr	16 L	3704	3704	3704	3277		
5			1020			Ten Rocks	16 L	3705	3705	3705	3278		
6			850			Lake <del>Walden</del> Juice	16 L	3706	3706	3706	3279		
7													
8													
9													
10													
11													
12													
13													
14													

### CUSTODY TRANSFERS

Relinquished by: [Signature] Date: 11/29/16 Time: 11:30am

Received by: [Signature] Date: 11/29/16 Time: 11:30am

Laboratory Remarks: \_\_\_\_\_

☒ Delivered Directly to Lab ☐ Shipped

Method of Shipment: DA FCE

Containers Received: \_\_\_\_\_

#### MATRIX CODES

GW — GROUND WATER  
SW — SURFACE WATER  
SO — SOIL  
SL — SLUDGE  
WW — WASTE WATER



# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Interim  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001

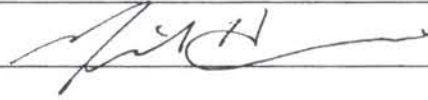
REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 12/01/16 To: 12/31/16

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Prior to Construction)	Sample Measurement		.067					0		
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement		0.095 (An.Avg.)	MGD					Monthly	Calculation
Flow	Sample Measurement		.062					0		
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement		Report (Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement				4.65			0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement				20.0 (An.Avg.)		mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement				4.52	4.52		0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)	mg/L		Monthly	Grab
Solids, Total Suspended	Sample Measurement				6.43			0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement				20.0 (An.Avg.)		mg/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement				13.5	13.5		0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)	mg/L		Monthly	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	1-27-17

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



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

FACILITY: River Ranch Resort WWTF

MONITORING GROUP R-001

PERMIT NUMBER: FLA011032-007-DW3P

NUMBER:

From: 12/01/16 To: 12/31/16

### MONITORING PERIOD

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					2			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement					200 (An.Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement					<1	<1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement					Report (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Monthly	Grab
pH	Sample Measurement				7.1		7.1		0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.6				0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement						6.65		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement						12.0 (Max.)	mg/L		Monthly	Grab
Nitrogen, Total (as N)	Sample Measurement						1.62		0		
PARM Code 00600 A Mon. Site No. EFA-01	Permit Requirement						Report (Max.)	mg/L		Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement						1.51		0		
PARM Code 00665 A Mon. Site No. EFA-01	Permit Requirement						Report (Max.)			Monthly	Grab
Flow (Prior to Construction)	Sample Measurement		.068						0		
PARM Code 50050 R Mon. Site No. FLW-01	Permit Requirement		0.095 (3Mo.Avg.)	MGD						5 Days/Week	Flow Totalizer
Percent Capacity, (TMADF/Permit Capacity) x 100	Sample Measurement						72%		0		
PARM Code 00180 1 Mon. Site No. FLW-01	Permit Requirement						Report (Mo.Avg.)	percent		Monthly	Calculated

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

COUNTY: Polk  
OFFICE: Southwest District

PERMIT NUMBER: FLA011032-007-DW3P

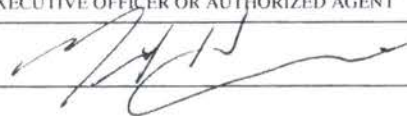
LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001 RIBs with Influent

REPORT FREQUENCY: Annually  
PROGRAM: Domestic

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 12/01/16 To: 12/31/16

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement			MNR		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement			MNR		0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	1-27-17

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

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER:

FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT:  
CLASS SIZE:  
MONITORING GROUP NUMBER:  
MONITORING GROUP DESCRIPTION:  
RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD

Final  
N/A  
RMP-Q  
Biosolids Quantity

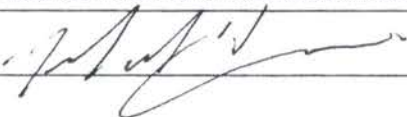
REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

From: 12/01/16 To: 12/31/16

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP-001	Permit Requirement	Report (Mo.Total)	Dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	0				0		
PARM Code B0007 + Mon. Site No. RMP-002	Permit Requirement	Report (Mo.Total)	Dry tons				Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	1-27-17

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



# DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA011032-007-DW3P  
From: 12/01/16 To: 12/31/16

Facility: River Ranch Resort WWTF

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	Nitrogen, Total (as N) mg/L	Phosphorus, Total (as P) mg/L		
Code	80082	50060	74055	00620	00530	00400	50050	00600	00665		
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	EFA-01	EFA-01		
1		1.8				7.1	.069				
2		2.0				7.1	.071				
3							.065				
4		2.5				7.1	.068				
5		1.6				7.1	.068				
6		3.0				7.1	.052				
7		3.0					.048				
8		2.5				7.1	.034				
9		2.5				7.1	.055				
10							.069				
11		2.0				7.1	.069				
12		2.5				7.1	.069				
13		2.2				7.1	.051				
14		2.4				7.1	.046				
15		2.5				7.1	.059				
16		3.0				7.1	.060				
17		3.0				7.1	.078				
18							.078				
19		1.8				7.1	.078				
20		2.2				7.1	.061				
21		2.5				7.1	.055				
22		3.0				7.1	.048				
23		3.0				7.1	.071				
24		2.2				7.1	.061				
25							.061				
26		3.0				7.1	.061				
27	4.52	2.2	<1	6.65	13.5	7.1	.061	1.62	1.51		
28		1.8				7.1	.064				
29		2.0				7.1	.059				
30		2.0				7.1	.061				
31							.077				
Total											
Mo. Avg.											

## PLANT STAFFING:

Day Shift Operator	Class: C	Certificate No: 7196	Name: Mike Harrisson
Evening Shift Operator	Class: _____	Certificate No: _____	Name: _____
Night Shift Operator	Class: _____	Certificate No: _____	Name: _____
Lead Operator	Class: _____	Certificate No: _____	Name: _____

**MID FLORIDA WATER LAB**

LABORATORY CERTIFICATION # E84567

8 OAKWOOD ROAD, WINTER HAVEN FL 33880  
Phone: (863) 965-2540 Fax: (863) 967-8601 Toll Free (888) 244-5657

Margaret Rajpaul, Director

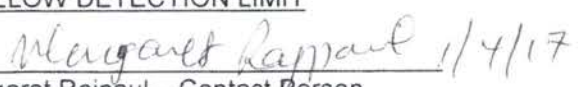
**LABORATORY RESULTS**CLIENT: MICHAEL HARRISONADDRESS: 1871 BETH LANE, WINTER HAVEN FL 33880SAMPLE DESCRIPTION: WASTEWATERSAMPLE COLLECTION MIKE HARRISON 12/27/16 @ 12.00 pmSYSTEM NAME: RIVER RANCHDATE AND TIME RECEIVED: 12/27/16 @ 1.47 pm

Lab I.D. Number	Parameter	Result	Units	Method	MDL	Date & Time Start	Date & Time Completed
16123561	EFFLUENT FECAL	<1 CFU	#/100 ml	SM9222D	1	12/27/16@ 2.25 pm	12/28/16@ 3.05 pm
	INFLUENT CBOD <sub>5</sub>		mg/L	SM5210-B	2.00		
16123997	EFFLUENT CBOD <sub>5</sub>	4.52	mg/L	SM5210-B	2.00	12/27/16@ 5.20 pm	01/01/17@ 3.00 pm
	INFLUENT TSS		mg/L	SM2540-D	1.00		
16123997	EFFLUENT TSS	13.5	mg/L	SM2540-D	1.00	12/27/16@ 4.35 pm	12/28/16@ 10.00 am
16123997	EFFLUENT NO <sub>3</sub> -N	6.65	mg/L	SM4500N03E	0.05	12/27/16@ 4.10 pm	11/27/16@ 6.05 pm
16123997	TOTAL KJELDAHL NITROGEN	1.62	mg/L	351.2	0.05	01/03/17@ 12.43 pm	E84167
16123997	TOTAL PHOSPHORUS	1.51	mg/L	365.3	0.008	12/29/16@ 9.42 am	E84167

COMMENTS: **TOTAL NITROGEN = 8.27 MG/L**

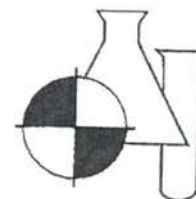
THESE TESTS MEET NELAC REQUIREMENTS.

The test results in this report relate only to the analyses of the samples submitted

QUALIFIERS THAT MAY APPLY:U = BELOW DETECTION LIMIT  
Margaret Rajpaul – Contact Person

# BENCHMARK

EnviroAnalytical Inc.



NELAC Certification #E84167

## ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : 16121222

Mid Florida Water Lab  
8 Oakwood Rd.  
Winter Haven, FL 33880

Project Name : HARRISON WASTE WATER  
Date Received : 12/28/2016  
Time Received : 1534

Margaret Rajpaul

Submission Number: 16121222  
Sample Number: 01  
Sample Description: River Ranch

Sample Date: 12/27/2016  
Sample Time: 1200  
Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Analysis Date/Time	Analyst
TOTAL KJELDAHL NITROGEN	1.62	MG/L	0.05	0.20	351.2	01/03/2017 12:43	PN
TOTAL PHOSPHORUS AS P	1.51	MG/L	0.008	0.032	365.3	12/29/2016 09:42	BLB

*Tilay Tanrisever*  
Dale D. Dixon / Laboratory Director

01/05/2017

Date

Tilay Tanrisever / QC Officer

Deborah A. Murphy / Project Manager

### DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.  
B = Results based upon colony counts outside the ideal range.  
H = Value based on field kit determination. Results may not be accurate.  
I = Reported value is between the laboratory MDL and the PQL.  
J1 = Estimated value. Surrogate recovery limits exceeded.  
J2 = Estimated value. No quality control criteria exists for component.  
J3 = Estimated value. Quality control criteria for precision or accuracy not met.  
J4 = Estimated value. Sample matrix interference suspected.  
J5 = Estimated value. Data questionable due to improper lab or field protocols.  
K = Off-scale low. Value is known to be < the value reported.  
L = Off-scale high. Value is known to be > the value reported.  
N = Presumptive evidence of presence of material.  
O = Sampled, but analysis lost or not performed.

Q = Sample held beyond accepted hold time.  
T = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.  
U = Analyte analyzed but not detected at the value indicated.  
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.  
Y = Analysis performed on an improperly preserved sample. Data may be inaccurate.  
Z = Too many colonies were present (TNTC). The numeric value represents the filtration volume.  
! = Data deviate from historically established concentration ranges.  
? = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.  
\* = Not reported due to interference.

### NOTES:

MBAS calculated as LAS; molecular weight = 340.  
PQL = 4xMDL.  
ND = Not detected at or above the adjusted reporting limit.  
X = Value exceeds MCL.  
G1 = Accuracy standard does not meet method control limits, but does meet lab control limits that are in agreement with USEPA generic data. USEPA letter available upon request.

### COMMENTS:

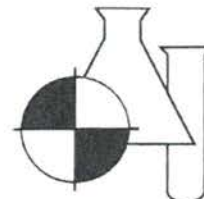
For questions or comments regarding these results, please contact us at (941) 723-9986.

Results relate only to the samples.



# BENCHMARK

## EnviroAnalytical Inc.



NELAC Certification #E84167

### ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : 16121222

Mid Florida Water Lab  
8 Oakwood Rd.  
Winter Haven, FL 33880

Project Name : HARRISON WASTE WATER

Date Received : 12/28/2016

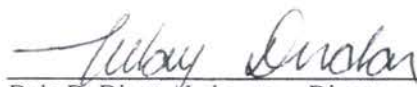
Time Received : 1534

Margaret Rajpaul

Submission Number: 16121222  
Sample Number: 01  
Sample Description: River Ranch

Sample Date: 12/27/2016  
Sample Time: 1200  
Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Analysis Date/Time	Analyst
TOTAL KJELDAHL NITROGEN	1.62	MG/L	0.05	0.20	351.2	01/03/2017 12:43	PN
TOTAL PHOSPHORUS AS P	1.51	MG/L	0.008	0.032	365.3	12/29/2016 09:42	BLB

  
Dale D. Dixon / Laboratory Director

01/05/2017

Date

Tülay Tanrisever / QC Officer

Deborah A. Murphy / Project Manager

#### DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.  
B = Results based upon colony counts outside the ideal range  
H = Value based on field kit determination. Results may not be accurate  
I = Reported value is between the laboratory MDL and the PQL.  
J1 = Estimated value. Surrogate recovery limits exceeded.  
J2 = Estimated value. No quality control criteria exists for component  
J3 = Estimated value. Quality control criteria for precision or accuracy not met.  
J4 = Estimated value. Sample matrix interference suspected.  
J5 = Estimated value. Data questionable due to improper lab or field protocols.  
K = Off-scale low. Value is known to be < the value reported.  
L = Off-scale high. Value is known to be > the value reported.  
N = Presumptive evidence of presence of material.  
O = Sampled, but analysis lost or not performed.

Q = Sample held beyond accepted hold time.  
T = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.  
U = Analyte analyzed but not detected at the value indicated.  
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.  
Y = Analysis performed on an improperly preserved sample. Data may be inaccurate.  
Z = Too many colonies were present (TNTC). The numeric value represents the filtration volume.  
! = Data deviate from historically established concentration ranges.  
? = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.  
\* = Not reported due to interference.

#### NOTES:

MBAS calculated as LAS, molecular weight = 340.  
PQL = 4xMDL  
ND = Not detected at or above the adjusted reporting limit.  
X = Value exceeds MCL  
G1 = Accuracy standard does not meet method control limits, but does meet lab control limits that are in agreement with USEPA generated data. USEPA letter available upon request.

#### COMMENTS:

For questions or comments regarding these results, please contact us at (941) 723-9986.

Results relate only to the samples.

# CHAIN OF CUSTODY

No 74956

PAGE 2 OF 2



## MID FLORIDA WATER LAB

Margaret Rajpaul, Director  
8 Oakwood Rd.  
Winter Haven, FL 33880

FDOH Cert#E84567

Phone (863) 965-2540  
Fax (863) 967-8601  
Toll Free 888-244-5657

FOR LAB USE ONLY

RECEIVED

2016 DEC 27 P 1:47

Client Name <u>Harrison Waste Water</u>							TESTS REQUIRED							Remarks
Address							Analysis							
City: State: ZIP:							Preservative	C.B.O.D.	TSS	NITRATE	FECAL	Total P	Total N	
Phone #														
FAX #														
Collected by <u>[Signature]</u> State Collected From:														
Sample ID	Matrix	Date	Time	Comp/Grab	Sample Location									
1	EFF W/W	12-27/16	7:00	6	Ten Rocks mtr	Ice	3991	3991	3991	3555			Temp 7.9°C	
2			7:35		Scenic View mtr		1612	1612	1612	3556			Fecal 7.9°C	
3			7:55		Elim mtr		3992	3992	3992	3557			TSS 7.9°C	
4			8:20		Landmark Twice		3993	3993	3993	3558				
5			9:00		Starline Ranch		3994	3994	3994	3559				
6			10:30		Rock City BP		3995	3995	3995	3560	1612	1612		
7			12:00		River Ranch		3996	3996	3996	3561	1612	1612		
8							3997	3997	3997	3561	3997	3997		
9														
10														
11														
12														
13														
14														

CUSTODY TRANSFERS			
Relinquished by <u>[Signature]</u>	Date <u>12-27-16</u>	Time <u>1:47p</u>	<input checked="" type="checkbox"/> Delivered Directly to Lab <input type="checkbox"/> Shipped Method of Shipment <u>on ice</u> Containers Received _____
Received by <u>[Signature]</u>	Date <u>12/27/16</u>	Time <u>1:47p</u>	
Laboratory Remarks _____			

MATRIX CODES
GW — GROUND WATER
SW — SURFACE WATER
SO — SOIL
SL — SLUDGE
WW — WASTE WATER



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

When Completed mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
 MAILING ADDRESS: 5601 Windhover Drive  
 Orlando, Florida 32819-7914

PERMIT NUMBER:

FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
 LOCATION: 24700 SR 60 East  
 Lake Wales, FL

LIMIT:  
 CLASS SIZE:  
 MONITORING GROUP NUMBER:  
 MONITORING GROUP DESCRIPTION:  
 RE-SUBMITTED DMR: ☐  
 NO DISCHARGE FROM SITE: ☐  
 MONITORING PERIOD

Interim  
 N/A  
 R-001  
 R-001

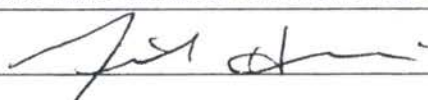
REPORT FREQUENCY: Monthly  
 PROGRAM: Domestic

COUNTY: Polk  
 OFFICE: Southwest District

From: 01/01/17 To: 01/31/17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Prior to Construction)	Sample Measurement	.066				0		
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.095 (An.Avg.)	MGD				Monthly	Calculation
Flow	Sample Measurement	.058				0		
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.76		0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.34	4.34	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab
Solids, Total Suspended	Sample Measurement			6.26		0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)		mg/L	Monthly	Calculation
Solids, Total Suspended	Sample Measurement			4.40	4.40	0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	2-28-17

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



## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: River Ranch Resort WWTF

MONITORING GROUP

R-001

PERMIT NUMBER: FLA011032-007-DW3P

NUMBER:

MONITORING PERIOD

From: 01/01/17 To:

01/31/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				2			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement				200 (An.Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<1	<1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement				Report (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Monthly	Grab
pH	Sample Measurement			7.1		7.1		0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement							0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					2.29		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement					12.0 (Max.)	mg/L		Monthly	Grab
Nitrogen, Total (as N)	Sample Measurement					1.02		0		
PARM Code 00600 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)	mg/L		Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement					0.247		0		
PARM Code 00665 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)			Monthly	Grab
Flow (Prior to Construction)	Sample Measurement	.066						0		
PARM Code 50050 R Mon. Site No. FLW-01	Permit Requirement	0.095 (3Mo.Avg.)	MGD						5 Days/Week	Flow Totalizer
Percent Capacity, (TMADF/Permit Capacity) x 100	Sample Measurement					69%		0		
PARM Code 00180 1 Mon. Site No. FLW-01	Permit Requirement					Report (Mo.Avg.)	percent		Monthly	Calculated

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

**When Completed mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001 RIBs with Influent

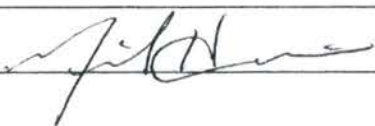
REPORT FREQUENCY: Annually  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 01/01/17 To: 01/31/17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement			MNR		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement			MNR		0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	2-28-15

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



**When Completed mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMIT NUMBER: FLA011032-007-DW3P

LIMIT:	Final
CLASS SIZE:	N/A
MONITORING GROUP NUMBER:	RMP-Q
MONITORING GROUP DESCRIPTION:	Biosolids Quantity


REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 01/01/17 To: 01/31/17

[illegible]

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

NAME/TITLE OF PRISONER: \_\_\_\_\_

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/ Operator		863-287-4075	12-28-11

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



# DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA011032-007-DW3P

From: 01/01/17

To: 01/31/17

Facility: River Ranch Resort WWTF

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	Nitrogen, Total (as N) mg/L	Phosphorus, Total (as P) mg/L		
Code	80082	50060	74055	00620	00530	00400	50050	00600	00665		
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	EFA-01	EFA-01		
1							.057				
2		1.8				7.1	.057				
3		2.2				7.1	.068				
4		2.0				7.1	.072				
5		2.5				7.1	.068				
6		2.2				7.1	.074				
7		2.0				7.1	.061				
8							.070				
9		2.0				7.1	.070				
10		1.6				7.1	.070				
11		1.8				7.1	.039				
12		2.0				7.1	.046				
13		2.4				7.1	.051				
14		1.6				7.1	.050				
15							.041				
16		1.4				7.1	.038				
17		1.0				7.1	.036				
18		1.8				7.1	.030				
19		2.0				7.1	.030				
20		2.2				7.1	.041				
21											
22							.088				
23		2.0				7.1	.088				
24	4.34	1.8	<1	2.29	4.40	7.1	.069	1.02	0.247		
25		2.0				7.1	.070				
26		2.4				7.1	.040				
27		1.8				7.1	.051				
28		2.2				7.1	.084				
29							.084				
30		2.0				7.1	.084				
31		2.5				7.1	.071				
Total											
Mo. Avg.											

**LANT STAFFING:**

Day Shift Operator

Class:

C

Certificate No:

7196

Name:

Mike Harrison

Evening Shift Operator

Class:

Certificate No:

Name:

Night Shift Operator

Class:

Certificate No:

Name:

Lead Operator

Class:

Certificate No:

Name:

**MID FLORIDA WATER LAB**

LABORATORY CERTIFICATION # E84567

8 OAKWOOD ROAD, WINTER HAVEN FL 33880  
Phone: (863) 965-2540 Fax: (863) 967-8601 Toll Free (888) 244-5657

Margaret Rajpaul, Director

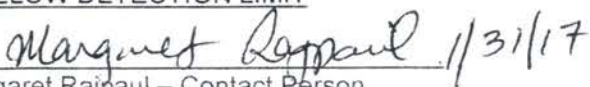
**LABORATORY RESULTS**CLIENT: MICHAEL HARRISONADDRESS: 1871 BETH LANE, WINTER HAVEN FL 33880SAMPLE DESCRIPTION: WASTEWATERSAMPLE COLLECTION MIKE HARRISON 01/24/17 @ 9.40 amSYSTEM NAME: RIVER RANCHDATE AND TIME RECEIVED: 01/24/17 @ 3.18 pm

Lab I.D. Number	Parameter	Result	Units	Method	MDL	Date & Time Start	Date & Time Completed
17010218	EFFLUENT FECAL	<1 CFU	#/100 ml	SM9222D	1	01/24/17@ 3.40 pm	01/25/17@ 2.10 pm
	INFLUENT CBOD <sub>5</sub>		mg/L	SM5210-B	2.00		
17010243	EFFLUENT CBOD <sub>5</sub>	4.34	mg/L	SM5210-B	2.00	01/24/17@ 5.00 pm	01/29/17@ 3.00 pm
	INFLUENT TSS		mg/L	SM2540-D	1.00		
17010243	EFFLUENT TSS	4.40	mg/L	SM2540-D	1.00	01/24/17@ 3.45 pm	01/25/17@ 10.00 am
17010243	EFFLUENT NO <sub>3</sub> -N	2.29	mg/L	SM4500N03E	0.05	01/24/17@ 3.35 pm	01/24/17@ 5.25 pm
17010243	TOTAL KJELDAHL NITROGEN	1.02	mg/L	351.2	0.05	01/27/17@ 9.29 am	E84167
17010243	TOTAL PHOSPHORUS	0.247	mg/L	365.3	0.008	01/26/17@ 9.40 am	E84167

COMMENTS: **TOTAL NITROGEN = 3.31 MG/L**

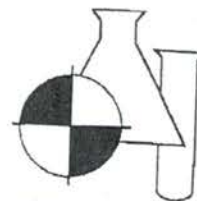
THESE TESTS MEET NELAC REQUIREMENTS.

The test results in this report relate only to the analyses of the samples submitted

QUALIFIERS THAT MAY APPLY:U = BELOW DETECTION LIMIT  
Margaret Rajpaul – Contact Person

# BENCHMARK

EnviroAnalytical Inc.



NELAC Certification #E84167

## ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : 17010848

Mid Florida Water Lab  
8 Oakwood Rd.  
Winter Haven, FL 33880

Project Name : RIVER RANCH  
Date Received : 01/25/2017  
Time Received : 1533

Margaret Rajpaul

Submission Number: 17010848

Sample Number: 001

Sample Description: River Ranch

Sample Date: 01/24/2017

Sample Time: 0940

Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Analysis Date/Time	Analyst
TOTAL KJELDAHL NITROGEN	1.02	MG/L	0.05	0.20	351.2	01/27/2017 09:29	PN
TOTAL PHOSPHORUS AS P	0.247	MG/L	0.008	0.032	365.3	01/26/2017 09:40	BLB

*Tulay Tanrisever*  
Dale D. Dixon / Laboratory Director

01/30/2017

Date

Tulay Tanrisever / QC Officer

Deborah A. Murphy / Project Manager

### DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.  
B = Results based upon colony counts outside the ideal range.  
H = Value based on field kit determination. Results may not be accurate.  
I = Reported value is between the laboratory MDL and the PQL.  
J1 = Estimated value. Surrogate recovery limits exceeded.  
J2 = Estimated value. No quality control criteria exists for component.  
J3 = Estimated value. Quality control criteria for precision or accuracy not met.  
J4 = Estimated value. Sample matrix interference suspected.  
J5 = Estimated value. Data questionable due to improper lab or field protocols.  
K = Off-scale low. Value is known to be < the value reported.  
L = Off-scale high. Value is known to be > the value reported.  
N = Presumptive evidence of presence of material.  
O = Sampled, but analysis lost or not performed.

Q = Sample held beyond accepted hold time.  
T = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.  
U = Analyte analyzed but not detected at the value indicated.  
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.  
Y = Analysis performed on an improperly preserved sample. Data may be inaccurate.  
Z = Too many colonies were present (TNTC). The numeric value represents the filtration volume.  
1 = Data deviate from historically established concentration ranges.  
2 = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.  
\* = Not reported due to interference.

### NOTES:

MBAS calculated as LAS; molecular weight = 340.  
PQL = 4xMDL.  
ND = Not detected at or above the adjusted reporting limit.  
X = Value exceeds MCL.  
G1 = Accuracy standard does not meet method control limits, but does meet lab control limits that are in agreement with USEPA generated data. USEPA letter available upon request.

### COMMENTS:

For questions or comments regarding these results, please contact us at (941) 723-9986.  
Results relate only to the samples.

17010848

1711 12th Street East \* Palmetto, FL 34221 \* Phone (941) 723-9986 \* Fax (941) 723-6061

PAGE 1 OF 2



# CHAIN OF CUSTODY

No 75781



## MID FLORIDA WATER LAB

Margaret Rajpaul, Director  
8 Oakwood Road  
Winter Haven, FL 33880

PHONE: (863) 965-2540  
FAX: (863) 967-8601  
TOLL FREE: 888-244-5657

FDOH Cert# E84567

FOR LAB USE ONLY

RECEIVED

2011 JAN 24 P 3:18

Client Name <u>Mel Hamer</u>							TESTS REQUIRED												
Address							Analysis												
City:		State:		ZIP:			C.B.O.D.		TSS		NITRATE		FECAL		Total Nit		Total Phos		
Phone #																			
FAX #																			
Collected by: <u>SAJ</u>							State Collected From:												
Sample ID	Matrix	Date	Time	Comp/Grab	Sample Location		Preservative	C.B.O.D.	TSS	NITRATE	FECAL	Total Nit	Total Phos	Remarks					
1	Eff	WFW	1/24/17	940	G	River Ranch	on ice	1701	1701	1701	1701	1701	1701		Temp 7.8°C				
2				1100		SHeripe Ranch		1701	1701	1701	1701	1701	1701		TSS 7.9°C				
3				1210		BP Park City		1701	1701	1701	1701	1701	1701						
4				115		Ten Rocks		1701	1701	1701	1701	1701	1701						
5																			
6																			
7																			
8																			
9																			
10																			
11																			
12																			
13																			
14																			

### CUSTODY TRANSFERS

Relinquished by Mel Hamer Date 1-24-17 Time 3:18p  
Received by [Signature] Date 1/24/17 Time 3:18p  
Laboratory Remarks \_\_\_\_\_

☒ Delivered Directly to Lab ☐ Shipped

Method of Shipment ON ICE

Containers Received \_\_\_\_\_

MATRIX CODES  
GW — GROUND WATER  
SW — SURFACE WATER  
SO — SOIL  
SL — SLUDGE  
WW — WASTE WATER

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Interim  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001


REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 02/01/17 To: 02/28/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Prior to Construction)	Sample Measurement		.006					0		
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement		0.095 (An.Avg.)	MGD					Monthly	Calculation
Flow	Sample Measurement		.079					0		
PARM Code 50050 I Mon. Site No. FLW-01	Permit Requirement		Report (Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement				4.65			0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement				20.0 (An.Avg.)		mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement				3.57	3.57		0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)	mg/L		Monthly	Grab
Solids, Total Suspended	Sample Measurement				6.61			0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement				20.0 (An.Avg.)		mg/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement				9.0	9.0		0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)	mg/L		Monthly	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/ Operator		863-287-4075	3-27-17

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



## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: River Ranch Resort WWTF

MONITORING GROUP: R-001

PERMIT NUMBER: FLA011032-007-DW3P

NUMBER:

MONITORING PERIOD From: 02/01/17 To: 02/28/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				2			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement				200 (An.Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<1	<1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement				Report (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Monthly	Grab
pH	Sample Measurement			7.1		7.1		0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			1.6				0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					0.52		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement					12.0 (Max.)	mg/L		Monthly	Grab
Nitrogen, Total (as N)	Sample Measurement					2.71		0		
PARM Code 00600 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)	mg/L		Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement					0.137		0		
PARM Code 00665 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)			Monthly	Grab
Flow (Prior to Construction)	Sample Measurement		.064					0		
PARM Code 50050 R Mon. Site No. FLW-01	Permit Requirement		0.095 (3Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
Percent Capacity, (TMADF/Permit Capacity) x 100	Sample Measurement					67%		0		
PARM Code 00180 1 Mon. Site No. FLW-01	Permit Requirement					Report (Mo.Avg.)	percent		Monthly	Calculated



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

**When Completed mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

COUNTY: Polk  
OFFICE: Southwest District

PERMIT NUMBER: FLA011032-007-DW3P  
LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001 RIBs with Influent

REPORT FREQUENCY: Annually  
PROGRAM: Domestic

RE-SUBMITTED DMR: ☐

NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: 02/01/17 To: 02/28/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement					179.0		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement					Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement					213.0		0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement					Report (Max.)	mg/L		Annually	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harriaon/Operator		863-287-4075	3-22-17

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

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

**When Completed mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: RMP-Q  
MONITORING GROUP DESCRIPTION: Biosolids Quantity

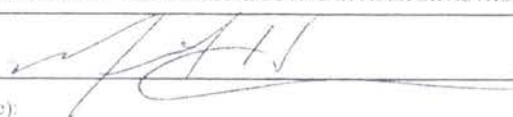
REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 02/01/17 To: 02/28/17

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement		0						0		
PARM Code B0008 + Mon. Site No. RMP-001	Permit Requirement		Report (Mo.Total)	Dry tons						Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement		0						0		
PARM Code B0007 + Mon. Site No. RMP-002	Permit Requirement		Report (Mo.Total)	Dry tons						Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	3-27-17

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

# DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA011032-007-DW3P  
From: 02/01/17 To: 02/28/17

Facility: River Ranch Resort WWTF

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	Nitrogen, Total (as N) mg/L	Phosphorus, Total (as P) mg/L		
Code	80082	50060	74055	00620	00530	00400	50050	00600	00665		
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	EFA-01	EFA-01		
1		2.0				7.1	.084				
2		2.5				7.1	.077				
3		2.0				7.1	.061				
4		2.5				7.1	.081				
5							.081				
6		1.8				7.1	.081				
7		1.6				7.1	.077				
8		2.2				7.1	.068				
9		2.0				7.1	.071				
10		2.0				7.1	.049				
11		2.0				7.1	.088				
12							.088				
13		2.2				7.1	.088				
14		2.4				7.1	.061				
15		2.5				7.1	.084				
16		2.2				7.1	.076				
17		2.0				7.1	.081				
18		2.4				7.1	.084				
19							.094				
20		2.4				7.1	.094				
21		2.2				7.1	.093				
22		2.4				7.1	.077				
23		2.2				7.1	.068				
24		2.2				7.1	.071				
25		1.8				7.1	.068				
26							.088				
27		2.5				7.1	.088				
28	3.57	2.2	<1	0.52	9.00	7.1	.077	2.71	0.137		
29											
30											
31											
Total											
Mo. Avg.											

## LANT STAFFING:

Day Shift Operator	Class: C	Certificate No: 7196	Name: Mike Harrison
Evening Shift Operator	Class: _____	Certificate No: _____	Name: _____
Night Shift Operator	Class: _____	Certificate No: _____	Name: _____
Lead Operator	Class: _____	Certificate No: _____	Name: _____



**MID FLORIDA WATER LAB**

LABORATORY CERTIFICATION # E84567

8 OAKWOOD ROAD, WINTER HAVEN FL 33880  
Phone: (863) 965-2540 Fax: (863) 967-8601 Toll Free (888) 244-5657

Margaret Rajpaul, Director

**LABORATORY RESULTS**CLIENT: MICHAEL HARRISONADDRESS: 1871 BETH LANE, WINTER HAVEN FL 33880SAMPLE DESCRIPTION: WASTEWATERSAMPLE COLLECTION MIKE HARRISON 02/28/17 @ 11.15 amSYSTEM NAME: RIVER RANCH RESORTDATE AND TIME RECEIVED: 02/28/17 @ 12.50 pm

Lab I.D. Number	Parameter	Result	Units	Method	MDL	Date & Time Start	Date & Time Completed
17020553	EFFLUENT FECAL	<1 CFU	#/100 ml	SM9222D	1	02/28/17@ 1.10 pm	03/01/17@ 1.25 pm
17020666	INFLUENT CBOD <sub>5</sub>	179	mg/L	SM5210-B	2.00	02/28/17@ 4.00 pm	03/05/17@ 3.00 pm
17020667	EFFLUENT CBOD <sub>5</sub>	3.57	mg/L	SM5210-B	2.00	02/28/17@ 4.00 pm	03/05/17@ 3.00 pm
17020666	INFLUENT TSS	213	mg/L	SM2540-D	1.00	02/28/17@ 2.20 pm	03/01/17@ 10.00 am
17020667	EFFLUENT TSS	9.00	mg/L	SM2540-D	1.00	02/28/17@ 2.20 pm	03/01/17@ 10.00 am
17020667	EFFLUENT NO <sub>3</sub> -N	0.52	mg/L	SM4500N03E	0.05	02/28/17@ 1.30 pm	02/28/17@ 4.45 pm
17020667	TOTAL KJELDAHL NITROGEN	2.71	mg/L	351.2	0.05	03/03/17@ 12.09 pm	E84167
1702.667	TOTAL PHOSPHORUS	0.137	mg/L	365.3	0.008	03/02/17@ 1.48 pm	E84167

COMMENTS: **TOTAL NITROGEN = 3.23 MG/L**

THESE TESTS MEET NELAC REQUIREMENTS.

The test results in this report relate only to the analyses of the samples submitted

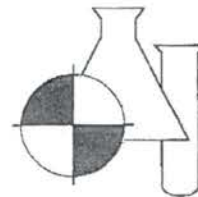
QUALIFIERS THAT MAY APPLY:

U = BELOW DETECTION LIMIT

Margaret Rajpaul 3/7/17  
Margaret Rajpaul – Contact Person

# BENCHMARK

EnviroAnalytical Inc.



NELAC Certification #E84167

## ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : 17030071

Mid Florida Water Lab  
8 Oakwood Rd.  
Winter Haven, FL 33880


Project Name : HARRISON WASTE WATER  
Date Received : 03/01/2017  
Time Received : 1542

Margaret Rajpaul

Submission Number: 17030071  
Sample Number: 001  
Sample Description: River Ranch Resort

Sample Date: 02/28/2017  
Sample Time: 1115  
Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Analysis Date/Time	Analyst
TOTAL KJELDAHL NITROGEN	2.71	MG/L	0.05	0.20	351.2	03/03/2017 12:09	PN
TOTAL PHOSPHORUS AS P	0.137	MG/L	0.008	0.032	365.3	03/02/2017 13:46	BLB

  
Dale D. Dixon / Laboratory Director

03/06/2017

Date

Tulay Tanrisever / QC Officer

Deborah A. Murphy / Project Manager

### DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.  
B = Results based upon colony counts outside the ideal range.  
H = Value based on field kit determination. Results may not be accurate.  
I = Reported value is between the laboratory MDL and the PQL.  
J1 = Estimated value. Surrogate recovery limits exceeded.  
J2 = Estimated value. No quality control criteria exists for component.  
J3 = Estimated value. Quality control criteria for precision or accuracy not met.  
J4 = Estimated value. Sample matrix interference suspected.  
J5 = Estimated value. Data questionable due to improper lab or field protocols.  
K = Off-scale low. Value is known to be < the value reported.  
L = Off-scale high. Value is known to be > the value reported.  
N = Presumptive evidence of presence of material.  
O = Sampled, but analysis lost or not performed.

Q = Sample held beyond accepted hold time.  
T = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.  
U = Analyte analyzed but not detected at the value indicated.  
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.  
Y = Analysis performed on an improperly preserved sample. Data may be inaccurate.  
Z = Too many colonies were present (TNTC). The numeric value represents the filtration volume.  
! = Data deviates from historically established concentration ranges.  
? = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.  
\* = Not reported due to interference.

### NOTES:

MBAS calculated as LAS; molecular weight = 340.  
PQL = 4xMDL.  
ND = Not detected at or above the adjusted reporting limit.  
X = Value exceeds MDL.  
G1 = Accuracy standard does not meet method control limits, but does meet lab control limits that are in agreement with USEPA generated data. USEPA letter available upon request.

### COMMENTS:

For questions or comments regarding these results, please contact us at (941) 723-9986.

Results relate only to the samples.



## CHAIN OF CUSTODY

№ 76131

**Margaret Rajpaul, Director**  
8 Oakwood Road  
Winter Haven, FL 33880

FDOH Cert# E84567

FOR LAB USE ONLY

RECEIVED

2011 FEB 28 P 12: 50

# MID FLORIDA WATER LAB

PHONE: (863) 965-2540  
FAX: (863) 967-8601  
TOLL FREE: 888-244-5657

Client Name <u>Harrison Waste Water</u> Address _____ City: _____ State: _____ ZIP: _____ Phone # _____ FAX # _____ Collected by: <u>[Signature]</u> State Collected From: _____							<b>TESTS REQUIRED</b>							
							Analysis							
							1702 C.B.O.D. 1702 TSS 1702 NITRATE 1702 FECAL INF TSS 1000 Total P Total N. Temp <sup>Gum</sup> IR2							
	Sample ID	Matrix	Date	Time	Comp/Grab	Sample Location	1702	1702	1702	1702	INF TSS 1000	Total P	Total N.	Temp <sup>Gum</sup> IR2
1	<del>E01</del>	N/W	2/28/17	615	G	Elim M.H.P	0655	0655	0655	0657	0654			Temps
2	D2			640	G	Lakehead Juice	0657	0657	0657	1702	0656			fecal 7.9°C
3	03			730	1	Scenic View M.H.P	1702	1702	1702	1702	0658			TSS 7.9°C
4	04			810		Ten Rock M.H.P	0659	0659	0659	1702	0660			
5	05			915		Rock City BP Station	0661	0661	0661	1702	0662			
6	06			1040		Verifit Route Rock	0663	0663	0663	1702	0664			
7	07			1115		River Road Resort	0665	0665	0665	1702	0666	0667	0667	
8							0667	0667	0667					
9														
10														
11														
12														
13														
14														

<b>CUSTODY TRANSFERS</b> Relinquished by <u>[Signature]</u> Date <u>2/28/17</u> Time <u>12:50</u> Received by <u>[Signature]</u> Date <u>2/28/17</u> Time <u>12:50p</u> Laboratory Remarks _____				<input checked="" type="checkbox"/> Delivered Directly to Lab <input type="checkbox"/> Shipped Method of Shipment <u>on Ice</u> Containers Received _____		<b>MATRIX CODES</b> GW -- GROUND WATER SW -- SURFACE WATER SO -- SOIL SL -- SLUDGE WW -- WASTE WATER
---	--	--	--	---	--	---



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

**When Completed** . . . **this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Interim  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001  
RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐

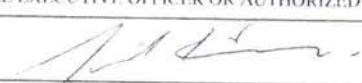
REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

MONITORING PERIOD From: 03/01/17 To: 03/31/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Prior to Construction)	Sample Measurement		.066					0		
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement		0.095 (An.Avg.)	MGD					Monthly	Calculation
Flow	Sample Measurement		.075					0		
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement		Report (Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement				4.65			0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement				20.0 (An.Avg.)		mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<2.0	<2.0		0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)	mg/L		Monthly	Grab
Solids, Total Suspended	Sample Measurement				8.07			0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement				20.0 (An.Avg.)		mg/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement				20.0	20.0		0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)	mg/L		Monthly	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/ Operator		863-287-4075	4-26-17

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

## DISCHARGE MONITORING PORT - PART A (Continued)

FACILITY: River Ranch Resort WWTF

MONITORING GROUP: R-001

PERMIT NUMBER: FLA011032-007-DW3P

NUMBER:

MONITORING PERIOD

From: 03/01/17 To:

03/31/17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement			2		0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement			200 (An. Avg.)	#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement			<1	<1	0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement			Report (Mo. Geo. Mn.)	800 (Max.)	#/100mL	Monthly	Grab
pH	Sample Measurement			7.1	7.1	0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)	s.u.	5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			1.5		0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)		mg/L	5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				0.22	0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement				12.0 (Max.)	mg/L	Monthly	Grab
Nitrogen, Total (as N)	Sample Measurement				14.3	0		
PARM Code 00600 A Mon. Site No. EFA-01	Permit Requirement				Report (Max.)	mg/L	Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement				2.13	0		
PARM Code 00665 A Mon. Site No. EFA-01	Permit Requirement				Report (Max.)		Monthly	Grab
Flow (Prior to Construction)	Sample Measurement	.071				0		
PARM Code 50050 R Mon. Site No. FLW-01	Permit Requirement	0.095 (3Mo. Avg.)	MGD				5 Days/Week	Flow Totalizer
Percent Capacity, (TMADF/Permit Capacity) x 100	Sample Measurement				79%	0		
PARM Code 00180 J Mon. Site No. FLW-01	Permit Requirement				Report (Mo. Avg.)	percent	Monthly	Calculated

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001 RIBs with Influent

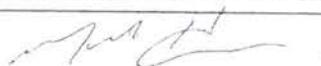
REPORT FREQUENCY: Annually  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 03/01/17 To: 03/31/17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement			MNR		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement			MNR		0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	4-26-17

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



## FD-302a (Rev. 11-29-10)

NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 03/01/17 To: 03/31/17

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

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

# DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA011032-007-DW3P  
From: 03/01/17

To: 03/31/17

Facility: River Ranch Resort WWTF

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	Nitrogen, Total (as N) mg/L	Phosphorus, Total (as P) mg/L		
Code	80082	50060	74055	00620	00530	00400	50050	00600	00665		
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	EFA-01	EFA-01		
1		1.8				7.1	.041				
2		1.6				7.1	.058				
3		1.5				7.1	.061				
4		1.8				7.1	.061				
5							.084				
6		2.0				7.1	.084				
7		2.0				7.1	.084				
8		2.5				7.1	.071				
9		3.0				7.1	.068				
10		3.0				7.1	.070				
11		3.0				7.1	.084				
12							.091				
13		2.5				7.1	.091				
14		3.0				7.1	.091				
15		3.0				7.1	.092				
16		2.5				7.1	.087				
17		2.2				7.1	.078				
18							.094				
19		1.8				7.1	.094				
20		2.5				7.1	.094				
21	<2.0	2.0	<1	0.22	20.0	7.1	.051	14.3	2.13		
22		2.5				7.1	0.048				
23		2.0				7.1	.042				
24		2.2				7.1	.089				
25							.089				
26		1.8				7.1	.089				
27		2.0				7.1	.071				
28		2.2				7.1	.064				
29		2.2				7.1	.087				
30		2.0				7.1	.061				
31		2.0				7.1	.059				
Total											
Mo. Avg.											

## PLANT STAFFING:

Day Shift Operator      Class: C      Certificate No: 7196      Name: Mike Harrison

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

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

Lead Operator      Class: \_\_\_\_\_      Certificate No: \_\_\_\_\_      Name: \_\_\_\_\_

**MID FLORIDA WATER LAB**

LABORATORY CERTIFICATION # E84567

8 OAKWOOD ROAD, WINTER HAVEN FL 33880  
Phone: (863) 965-2540 Fax: (863) 967-8601 Toll Free (888) 244-5657

Margaret Rajpaul, Director

**LABORATORY RESULTS**CLIENT: MICHAEL HARRISONADDRESS: 1871 BETH LANE, WINTER HAVEN FL 33880SAMPLE DESCRIPTION: WASTEWATERSAMPLE COLLECTION MIKE HARRISON 03/21/17 @ 10.30 amSYSTEM NAME: RIVER RANCH RESORTDATE AND TIME RECEIVED: 03/21/17 @ 2.54 pm

Lab I.D. Number	Parameter	Result	Units	Method	MDL	Date & Time Start	Date & Time Completed
17030720	EFFLUENT FECAL	<1 CFU	#/100 ml	SM9222D	1	03/21/17@ 3.20 pm	03/22/17@ 2.05 pm
	INFLUENT CBOD <sub>5</sub>		mg/L	SM5210-B	2.00		
17030862	EFFLUENT CBOD <sub>5</sub>	<2	mg/L	SM5210-B	2.00	03/21/17@ 4.10 pm	03/26/17@ 2.45 pm
	INFLUENT TSS		mg/L	SM2540-D	1.00		
17030862	EFFLUENT TSS	20.0	mg/L	SM2540-D	1.00	03/21/17@ 3.30 pm	03/22/17@ 10.00 am
17030862	EFFLUENT NO <sub>3</sub> -N	0.22	mg/L	SM4500N03E	0.05	03/21/17@ 3.15 pm	03/21/17@ 4.05 pm
17030862	TOTAL KJELDAHL NITROGEN	14.3	mg/L	351.2	0.05	03/27/17@ 1.24 pm	E84167
17030862	TOTAL PHOSPHORUS	2.13	mg/L	365.3	0.008	03/23/17@ 1.59 pm	E84167

COMMENTS: **TOTAL NITROGEN = 14.52 MG/L**

THESE TESTS MEET NELAC REQUIREMENTS.

The test results in this report relate only to the analyses of the samples submitted

QUALIFIERS THAT MAY APPLY:

U = BELOW DETECTION LIMIT

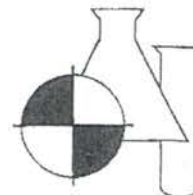
Margaret Rajpaul 3/28/17

Margaret Rajpaul - Contact Person



# BENCHMARK

EnviroAnalytical Inc.



NELAC Certification #E84167

## ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : 17030970

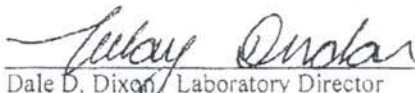
Mid Florida Water Lab  
8 Oakwood Rd.  
Winter Haven, FL 33880

Project Name : HARRISON WASTE WATER  
Date Received : 03/22/2017  
Time Received : 1529

Margaret Rajpaul

Submission Number:	17030970	Sample Date:	03/21/2017
Sample Number:	001	Sample Time:	1030
Sample Description:	River Ranch	Sample Method:	Grab

Parameter	Result	Units	MDL	PQL	Procedure	Analysis Date/Time	Analyst
TOTAL KJELDAHL NITROGEN	14.3	MG/L	0.05	0.20	351.2	03/27/2017 13:24	PN
TOTAL PHOSPHORUS AS P	2.13	MG/L	0.008	0.032	366.3	03/23/2017 13:59	BLB

  
Dale D. Dixon, Laboratory Director

03/30/2017

Date

Tülay Tanrısever / QC Officer

Deborah A. Murphy / Project Manager

### DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.  
B = Results based upon colony counts outside the ideal range.  
H = Value based on field kit determination. Results may not be accurate.  
I = Reported value is between the laboratory MDL and the PQL.  
J1 = Estimated value. Surrogate recovery limits exceeded.  
J2 = Estimated value. No quality control criteria exists for component.  
J3 = Estimated value. Quality control criteria for precision or accuracy not met.  
J4 = Estimated value. Sample matrix interference suspected.  
J5 = Estimated value. Data questionable due to improper lab or field protocols.  
K = Off-scale low. Value is known to be < the value reported.  
L = Off-scale high. Value is known to be > the value reported.  
N = Presumptive evidence of presence of material.  
O = Sampled, but analysis lost or not performed.

Q = Sample held beyond accepted hold time.  
T = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.  
U = Analyte analyzed but not detected at the value indicated.  
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.  
Y = Analysis performed on an improperly preserved sample. Data may be inaccurate.  
Z = Too many colonies were present (TNTC). The numeric value represents the filtration volume.  
! = Data deviate from historically established concentration ranges.  
? = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.  
\* = Not reported due to interference.

### NOTES:

MBAS calculated as LAS, molecular weight = 340.  
PQL = 4xMDL.  
ND = Not detected at or above the adjusted reporting limit.  
X = Value exceeds MCL.  
G1 = Accuracy standard does not meet method control limits, but does meet lab control limits that are in agreement with USEPA generated data. USEPA letter available upon request.

### COMMENTS:

For questions or comments regarding these results, please contact us at (941) 723-9986.

Results relate only to the samples.

# CHAIN OF CUSTODY

No 74702

PAGE 2 OF 2



## MID FLORIDA WATER LAB

Margaret Rajpaul, Director  
8 Oakwood Rd.  
Winter Haven, FL 33880

FDOH Cert#E84567

Phone (863) 965-2540  
Fax (863) 967-8601  
Toll Free 888-244-5657

FOR LAB USE ONLY

RECEIVED

2017 MAR 21 P 2:54

Client Name <u>Harrison Waste Water</u>							Analysis	TESTS REQUIRED		Remarks		
Address												
City: State: ZIP:												
Phone #												
FAX #												
Collected by: <u>[Signature]</u>												
State Collected From:												
Sample ID	Matrix	Date	Time	Comp/Grab	Sample Location	Preservative	C.B.O.D.	TSS	NITRATE	FECAL	Total N	Total P
1	EFF M/W	3/21/17	1030	1	River Bank	on ice	0862	0862	0862	6720	0862	0862
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												

### CUSTODY TRANSFERS

Relinquished by [Signature] Date 3/21/17 Time 2:54pm  
Received by [Signature] Date 3/21/17 Time 2:54pm  
Laboratory Remarks

☐ Delivered Directly to Lab ☐ Shipped  
Method of Shipment On Ice  
Containers Received

MATRIX CODES  
GW — GROUND WATER  
SW — SURFACE WATER  
SO — SOIL  
SL — SLUDGE  
WW — WASTE WATER



# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Interim  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001

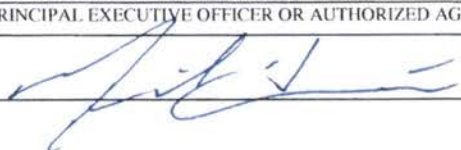
REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 04/01/17 To: 04/30/17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Prior to Construction)	Sample Measurement	.066				0		
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.095 (An.Avg.)	MGD				Monthly	Calculation
Flow	Sample Measurement	.067				0		
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.66		0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.08	2.08	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab
Solids, Total Suspended	Sample Measurement			7.72		0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)		mg/L	Monthly	Calculation
Solids, Total Suspended	Sample Measurement			1.00	1.00	0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab

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NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	5-26-17

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



## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: River Ranch Resort WWTF

MONITORING GROUP NUMBER: R-001

PERMIT NUMBER: FLA011032-007-DW3P

MONITORING PERIOD From: 04/01/17 To: 04/30/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				2			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement				200 (An.Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<1	<1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement				Report (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Monthly	Grab
pH	Sample Measurement			7.1		7.1		0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			1.6				0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					6.58		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement					12.0 (Max.)	mg/L		Monthly	Grab
Nitrogen, Total (as N)	Sample Measurement					0.795		0		
PARM Code 00600 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)	mg/L		Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement					0.072		0		
PARM Code 00665 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)			Monthly	Grab
Flow (Prior to Construction)	Sample Measurement	0.074						0		
PARM Code 50050 R Mon. Site No. FLW-01	Permit Requirement	0.095 (3Mo.Avg.)	MGD						5 Days/Week	Flow Totalizer
Percent Capacity, (TMADF/Permit Capacity) x 100	Sample Measurement					78%		0		
PARM Code 00180 1 Mon. Site No. FLW-01	Permit Requirement					Report (Mo.Avg.)	percent		Monthly	Calculated

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER:

FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT:  
CLASS SIZE:  
MONITORING GROUP NUMBER:  
MONITORING GROUP DESCRIPTION:

Final  
N/A  
R-001  
R-001 RIBs with Influent

REPORT FREQUENCY: Annually  
PROGRAM: Domestic


COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD

From: 04/01/17 To: 04/30/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement					MNR		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement					Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement					MNR		0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement					Report (Max.)	mg/L		Annually	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	5-26-17

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

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER:

FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL


LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: RMP-Q  
MONITORING GROUP DESCRIPTION: Biosolids Quantity  
RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 04/01/17 To: 04/30/17

REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP-001	Permit Requirement	Report (Mo.Total)	Dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	0				0		
PARM Code B0007 + Mon. Site No. RMP-002	Permit Requirement	Report (Mo.Total)	Dry tons				Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	5-26-17

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



**MID FLORIDA WATER LAB**

LABORATORY CERTIFICATION #: E84567

8 OAKWOOD ROAD, WINTER HAVEN FL 33880

Phone: (863) 965-2540 Fax: (863) 967-8601 Toll Free (888) 244-5657

Margaret Rajpaul, Director

**LABORATORY RESULTS**CLIENT: MICHAEL HARRISONADDRESS: 1871 BETH LANE, WINTER HAVEN FL 33880SAMPLE DESCRIPTION: WASTEWATERSAMPLE COLLECTION MIKE HARRISON 04/28/17 @ 6.45 amSYSTEM NAME: RIVER RANCDATE AND TIME RECEIVED: 04/28/17 @ 12.01 pm

Lab I.D. Number	Parameter	Result	Units	Method	MDL	Date & Time Start	Date & Time Completed
17041078	EFFLUENT FECAL	<1 CFU	#/100 ml	SM9222D	1	04/28/17@ 12.25 pm	04/29/17@ 11.18 am
	INFLUENT CBOD <sub>5</sub>		mg/L	SM5210-B	2.00		
17041283	EFFLUENT CBOD <sub>5</sub>	2.08	mg/L	SM5210-B	2.00	04/28/17@ 4.00 pm	05/03/17@ 3.00 pm
	INFLUENT TSS		mg/L	SM2540-D	1.00		
17041283	EFFLUENT TSS	1.00	mg/L	SM2540-D	1.00	04/28/17@ 1.40 pm	04/29/17@ 10.00 am
17041283	EFFLUENT NO <sub>3</sub> -N	6.58	mg/L	SM4500N03E	0.05	04/28/17@ 3.10 pm	04/28/17@ 5.15 pm
17041283	TOTAL KJELDAHL NITROGEN	0.795	mg/L	351.2	0.05	05/09/17@ 10.17 am	E84167
17041283	TOTAL PHOSPHORUS	0.072	mg/L	365.3	0.008	05/04/17@ 12.58 pm	E84167

COMMENTS: **TOTAL NITROGEN = 7.37 MG/L**

THESE TESTS MEET NELAC REQUIREMENTS.

The test results in this report relate only to the analyses of the samples submitted

QUALIFIERS THAT MAY APPLY:

U = BELOW DETECTION LIMIT

*Margaret Rajpaul 5/10/17*  
Margaret Rajpaul – Contact Person

# DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA011032-007-DW3P

From: 04/01/17

To: 04/30/17

Facility: River Ranch Resort WWTF

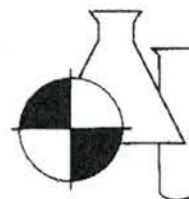
	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	Nitrogen, Total (as N) mg/L	Phosphorus, Total (as P) mg/L		
Code	80082	50060	74055	00620	00530	00400	50050	00600	00665		
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	EFA-01	EFA-01		
1		2.0				7.1	.081				
2							.081				
3		2.2				7.1	.081				
4		2.4				7.1	.081				
5		2.0				7.1	.062				
6		1.8				7.1	.061				
7		2.2				7.1	.071				
8		1.6				7.1	.048				
9							.048				
10		2.4				7.1	.048				
11		2.0				7.1	.071				
12		1.8				7.1	.060				
13		2.0				7.1	.064				
14		2.4				7.1	.066				
15		2.5				7.1	.060				
16							.072				
17		2.0				7.1	.072				
18		2.4				7.1	.072				
19		2.5				7.1	.084				
20		2.0				7.1	.070				
21		2.4				7.1	.066				
22		2.2				7.1	.071				
23							.071				
24		2.5				7.1	.071				
25		2.0				7.1	.084				
26		2.2				7.1	.071				
27		2.0				7.1	.066				
28	2.08	2.0	<1	6.58	1.00	7.1	.041	0.795	0.072		
29		2.0				7.1	.039				
30							.068				
31											
Total											
Mo. Avg.											

**PLANT STAFFING:**

Day Shift Operator	Class: C	Certificate No: 7196	Name: Mike Harrison
Evening Shift Operator	Class: _____	Certificate No: _____	Name: _____
Night Shift Operator	Class: _____	Certificate No: _____	Name: _____
Lead Operator	Class: _____	Certificate No: _____	Name: _____

# BENCHMARK

EnviroAnalytical Inc.



NELAC Certification #E84167

## ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : 17050150

Mid Florida Water Lab  
8 Oakwood Rd.  
Winter Haven, FL 33880

Project Name : HARRISON WW  
Date Received : 05/03/2017  
Time Received : 1400

Margaret Rajpaul

Submission Number: 17050150  
Sample Number: 001  
Sample Description: River Ranch

Sample Date: 04/28/2017  
Sample Time: 0645  
Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Analysis Date/Time	Analyst
TOTAL KJELDAHL NITROGEN	0.795	MG/L	0.05	0.20	351.2	05/09/2017 10:17	PN
TOTAL PHOSPHORUS AS P	0.072	MG/L	0.008	0.032	365.3	05/04/2017 12:58	BLB

*Tilley Tanrisever*  
Dale B. Dixon / Laboratory Director

05/10/2017

Date

Tilley Tanrisever / QC Officer

Deborah A. Murphy / Project Manager

### DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.  
B = Results based upon colony counts outside the ideal range.  
H = Value based on field kit determination. Results may not be accurate.  
I = Reported value is between the laboratory MDL and the PQL.  
J1 = Estimated value. Surrogate recovery limits exceeded.  
J2 = Estimated value. No quality control criteria exists for component.  
J3 = Estimated value. Quality control criteria for precision or accuracy not met.  
J4 = Estimated value. Sample matrix interference suspected.  
J5 = Estimated value. Data questionable due to improper lab or field protocols.  
K = Off-scale low. Value is known to be < the value reported.  
L = Off-scale high. Value is known to be > the value reported.  
N = Presumptive evidence of presence of material.  
O = Sampled, but analysis lost or not performed.

Q = Sample held beyond accepted hold time.  
T = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.  
U = Analyte analyzed but not detected at the value indicated.  
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.  
Y = Analysis performed on an improperly preserved sample. Data may be inaccurate.  
Z = Too many colonies were present (TNTC). The numeric value represents the filtration volume.  
! = Data deviate from historically established concentration ranges.  
? = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.  
\* = Not reported due to interference.

### NOTES:

MBAS calculated as LAS; molecular weight = 340.  
PQL = 4xMDL  
ND = Not detected at or above the adjusted reporting limit.  
X = Value exceeds MCL  
G1 = Accuracy standard does not meet method control limits, but does meet lab control limits that are in agreement with USEPA generated data. USEPA letter available upon request.

### COMMENTS:

For questions or comments regarding these results, please contact us at (941) 723-9986.

Results relate only to the samples.



# CHAIN OF CUSTODY

No 75125

PAGE 2 OF 4



## MID FLORIDA WATER LAB

Margaret Rajpaul, Director  
8 Oakwood Rd.  
Winter Haven, FL 33880

FDOH Cert#E84567

Phone (863) 965-2540  
Fax (863) 967-8601  
Toll Free 888-244-5657

FOR LAB USE ONLY

RECEIVED

2017 APR 28 P 12:01

Client Name: <u>Harrison Waste Water</u>							TESTS REQUIRED							Remarks
Address							Analysis							
City: _____ State: _____ ZIP: _____														
Phone # _____														
FAX # _____														
Collected by: <u>[Signature]</u> State Collected From: _____														
Sample ID	Matrix	Date	Time	Comp/Grab	Sample Location	Preservative	C.B.O.D.	TSS	NITRATE	FECAL	Total P	Total N	Temp	
1	EFF	N/N	4/28/17	645	G	River Bank	1704	1283	1283	1283	1704	1704	Temp Gun 12.2	
2	EFF			730		Sheniff Youth Villa	1284	1284	1284	1704	1283	1283	Temp 6.1°C	
3	EFF			815		Ten Rocks	1285	1285	1285	1704			TSS 6.1°C	
4	EFF			900		Scenic View mtr P	1286	1286	1286	1704				
5	EFF			935		Elm mtr P	1287	1287	1287	1704				
6	EFF			1005		Lake Land Juice	1288	1288	1288	1704				
7	EFF			1045		Blk City B P	1289	1289	1289	1704				
8														
9														
10														
11														
12														
13														
14														

### CUSTODY TRANSFERS

Relinquished by [Signature] Date 4-28-17 Time 12:01  
Received by [Signature] Date 4/28/17 Time 12:01  
Laboratory Remarks \_\_\_\_\_

☒ Delivered Directly to Lab ☐ Shipped

Method of Shipment On Ice

Containers Received \_\_\_\_\_

### MATRIX CODES

GW — GROUND WATER  
SW — SURFACE WATER  
SO — SOIL  
SL — SLUDGE  
WW — WASTE WATER



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

**When Completed mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT:  
CLASS SIZE: Interim  
MONITORING GROUP NUMBER: N/A  
MONITORING GROUP DESCRIPTION: R-001  
RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐

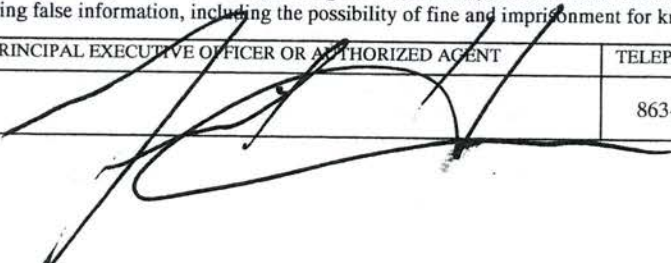
REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

MONITORING PERIOD From: 05/01/17 To: 05/31/17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Prior to Construction)	Sample Measurement	.064				0		
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.095 (An.Avg.)	MGD				Monthly	Calculation
Flow	Sample Measurement	.062				0		
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.81		0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.78	3.78	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab
Solids, Total Suspended	Sample Measurement			7.96		0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)		mg/L	Monthly	Calculation
Solids, Total Suspended	Sample Measurement			7.60	7.60	0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	6-28-17

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



## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: River Ranch Resort WWTF

MONITORING C P R-001  
NUMBER:  
MONITORING PERIOD From: 05/01/07 To:

PERMIT NUMBER: FLA011032-007-L

05/31/17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement			2		0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement			200 (An.Avg.)	#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement			<1	<1	0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement			Report (Mo.Geo.Mn.)	800 (Max.)	#/100mL	Monthly	Grab
pH	Sample Measurement			7.0	7.1	0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)	s.u.	5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			1.2		0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)		mg/L	5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				<0.05	0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement				12.0 (Max.)	mg/L	Monthly	Grab
Nitrogen, Total (as N)	Sample Measurement				2.21	0		
PARM Code 00600 A Mon. Site No. EFA-01	Permit Requirement				Report (Max.)	mg/L	Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement				3.80	0		
PARM Code 00665 A Mon. Site No. EFA-01	Permit Requirement				Report (Max.)		Monthly	Grab
Flow (Prior to Construction)	Sample Measurement	.068				0		
PARM Code 50050 R Mon. Site No. FLW-01	Permit Requirement	0.095 (3Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Percent Capacity, (TMADF/Permit Capacity) x 100	Sample Measurement				72%	0		
PARM Code 00180 1 Mon. Site No. FLW-01	Permit Requirement				Report (Mo.Avg.)	percent	Monthly	Calculated



# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed, mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Ten. Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

COUNTY: Polk  
OFFICE: Southwest District

PERMIT NUMBER: FLA011032-007-DW3P  
LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001 RIBs with Influent

RE-SUBMITTED DMR: ☐

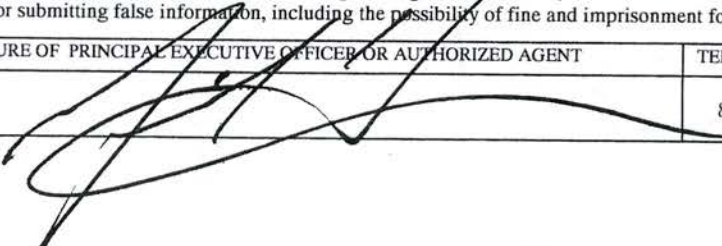
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: 05/01/17 To: 05/31/17

REPORT FREQUENCY: Annually  
PROGRAM: Domestic

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement			MNR		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement			MNR		0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	6-28-17

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

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed: **File this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Ten. Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: RMP-Q  
MONITORING GROUP DESCRIPTION: Biosolids Quantity

REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

RE-SUBMITTED DMR: ☐

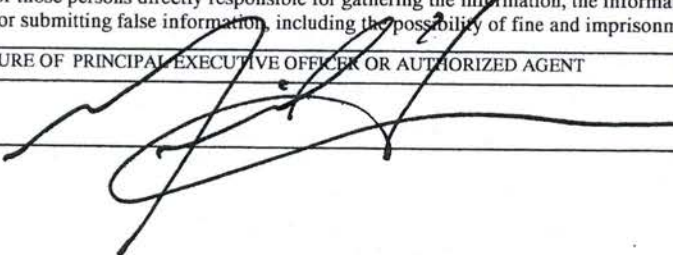
NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: 05/01/17 To: 05/31/17

COUNTY: Polk  
OFFICE: Southwest District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP-001	Permit Requirement	Report (Mo. Total)	Dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	0				0		
PARM Code B0007 + Mon. Site No. RMP-002	Permit Requirement	Report (Mo. Total)	Dry tons				Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	6-28-17

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



# **DAILY SAMPLE RESULTS - PART B**

Permit Number:  
Monitoring Period

FLA011032-007-DW3P

From: 05/01/17

To: 05/31/17

Facility: River Ranch Resort WWTF

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	Nitrogen, Total (as N) mg/L	Phosphorus, Total (as P) mg/L		
Code	80082	50060	74055	00620	00530	00400	50050	00600	00665		
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	EFA-01	EFA-01		
1		1.6				7.1	.084				
2		1.5				7.1	.088				
3		1.8				7.1	.072				
4		2.0				7.1	.061				
5		2.5				7.1	.039				
6		2.2				7.1	.061				
7							.055				
8		2.4				7.1	.055				
9		2.2				7.1	.055				
10		2.0				7.1	.072				
11		2.2				7.1	.061				
12		2.4				7.1	.071				
13		1.8				7.1	.068				
14							.068				
15		2.2				7.1	.068				
16		2.0				7.1	.028				
17		2.2				7.1	.026				
18		2.0				7.1	.034				
19		2.5				7.1	.040				
20		2.0				7.1	.089				
21							.089				
22		2.2				7.1	.089				
23		3.0				7.1	.061				
24		3.0				7.1	.055				
25	3.78	3.0	<1	<0.05	7.60	7.1	.061	2.21	3.80		
26		3.0				7.1	.059				
27							.061				
28		1.2				7.1	.061				
29		3.0				7.1	.061				
30		3.0				7.0	.081				
31		3.0				7.0	.061				
Total											
Mo. Avg.											

**PLANT STAFFING:**

Day Shift Operator

Class: C

Certificate No: 7196

Name: Mike Harrison

Evening Shift Operator

Class:

Certificate No:

Name:

Night Shift Operator

Class:

Certificate No:

Name:

Lead Operator

Class:

Certificate No:

Name:



# CHAIN OF CUSTODY

No 75298

PAGE 7 OF 9



## MID FLORIDA WATER LAB

Margaret Rajpaul, Director  
8 Oakwood Rd.  
Winter Haven, FL 33880

FDOH Cert#E84567

Phone (863) 965-2540  
Fax (863) 967-8601  
Toll Free 888-244-5657

FOR LAB USE ONLY

RECEIVED

2017 MAY 25 A 11:34

Client Name <u>Harrison Waste Water</u>							TESTS REQUIRED						
Address							Analysis						
City: State: ZIP:							C.B.O.D. TSS NITRATE FECAL Total P Total Nit						
Phone #													
FAX #													
Collected by: <u>RJA</u> State Collected From:													
Sample ID	Matrix	Date	Time	Comp/Grab	Sample Location	Preservative	C.B.O.D.	TSS	NITRATE	FECAL	Total P	Total Nit	Remarks
1	Eft	W/4	5/25/17	530 AM	River Ranch	ON	1556	1556	1556	1310	1556	1556	Temp Gu IR2
2		W/W		630 AM	Sherriff Youth Ranch		1705	1705	1705	1705			Temp
3				740 AM	Polk City B.P.		1556	1556	1556	1311			Fecal 7.92
4				825	Elm		1556	1556	1556	1312			TSS 7.92
5				845	Lake Land Justice		1705	1705	1705	1313			
6				930	Scene View		1556	1556	1556	1315			
7				1016	Ten Rocks		1705	1705	1705	1315			
8							1562	1562	1562	1316			
9													
10													
11													
12													
13													
14													

CUSTODY TRANSFERS			
Relinquished by <u>M. Rajpaul</u>	Date <u>5/25/17</u>	Time <u>11:34 am</u>	<input checked="" type="checkbox"/> Delivered Directly to Lab <input type="checkbox"/> Shipped
Received by <u>M. Rajpaul</u>	Date <u>5/25/17</u>	Time <u>11:34 am</u>	Method of Shipment <u>On Ice</u>
Laboratory Remarks			Containers Received

MATRIX CODES

GW — GROUND WATER

SW — SURFACE WATER

SO — SOIL

SL — SLUDGE

WW — WASTE WATER



# CHAIN OF CUSTODY

No 75298

PAGE 7 OF 9



## MID FLORIDA WATER LAB

Margaret Rajpaul, Director  
8 Oakwood Rd.  
Winter Haven, FL 33880

FDOH Cert#E84567

Phone (863) 965-2540  
Fax (863) 967-8601  
Toll Free 888-244-5657

FOR LAB USE ONLY

mc RECEIVED

2017 MAY 25 A 11:34

Client Name <u>Harrison Waste Water</u>							TESTS REQUIRED						
Address							Analysis						
City: State: ZIP:							C.B.O.D. TSS NITRATE FECAL Total P Total Nit						
Phone #													
FAX #													
Collected by: <u>[Signature]</u> State Collected From:													
Sample ID	Matrix	Date	Time	Comp/Grab	Sample Location	Preservative	C.B.O.D.	TSS	NITRATE	FECAL	Total P	Total Nit	Remarks
1	Eft	W/W	5/25/17	530 AM	River Ranch	BY	1305	1556	1586	1310	1556	1556	Temp Gu IR2
2		W/W		630 AM	Sheriff Youth Ranch		1305	1556	1586	1310			Temp
3				740 AM	Polk City B.P.		1305	1556	1586	1310			Fecal 7.92
4				825	Elm		1305	1556	1586	1310			TSS 7.92
5				845	Lakeview Justice		1305	1556	1586	1310			
6				930	Scene View		1305	1556	1586	1310			
7				1016	Ten Rocks		1305	1556	1586	1310			
8							1562	1562	1562	1316			
9													
10													
11													
12													
13													
14													

CUSTODY TRANSFERS			
Relinquished by <u>[Signature]</u>	Date <u>5/25/17</u>	Time <u>11:34 am</u>	<input checked="" type="checkbox"/> Delivered Directly to Lab <input type="checkbox"/> Shipped
Received by <u>[Signature]</u>	Date <u>5/25/17</u>	Time <u>11:34 am</u>	Method of Shipment <u>On Ice</u>
Laboratory Remarks			Containers Received <u>29 200</u>

MATRIX CODES	
GW	GROUND WATER
SW	SURFACE WATER
SO	SOIL
SL	SLUDGE
WW	WASTE WATER



**MID FLORIDA WATER LAB**

LABORATORY CERTIFICATION #: E84567

8 OAKWOOD ROAD, WINTER HAVEN FL 33880  
Phone: (863) 965-2540 Fax: (863) 967-8601 Toll Free (888) 244-5657

Margaret Rajpaul, Director

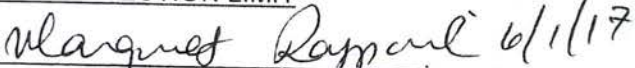
**LABORATORY RESULTS**CLIENT: MICHAEL HARRISONADDRESS: 1871 BETH LANE, WINTER HAVEN FL 33880SAMPLE DESCRIPTION: WASTEWATERSAMPLE COLLECTION MIKE HARRISON 05/25/17 @ 5.30 amSYSTEM NAME: RIVER RANCHDATE AND TIME RECEIVED: 05/25/17 @ 11.34 am

Lab I.D. Number	Parameter	Result	Units	Method	MDL	Date & Time Start	Date & Time Completed
17051310	EFFLUENT FECAL	<1 CFU	#/100 ml	SM9222D	1	05/25/17@ 12.00 pm	05/26/17@ 1.10 pm
	INFLUENT CBOD <sub>5</sub>		mg/L	SM5210-B	2.00		
17051556	EFFLUENT CBOD <sub>5</sub>	3.78	mg/L	SM5210-B	2.00	05/25/17@ 5.30 pm	05/30/17@ 3.00 pm
	INFLUENT TSS		mg/L	SM2540-D	1.00		
17051556	EFFLUENT TSS	7.60	mg/L	SM2540-D	1.00	05/25/17@ 1.00 pm	05/26/17@ 10.00 am
17051556	EFFLUENT NO <sub>3</sub> -N	U	mg/L	SM4500N03E	0.05	05/25/17@ 12.25 pm	05/25/17@ 6.40 pm
17051556	TOTAL KJELDAHL NITROGEN	2.21	mg/L	351.2	0.05	06/01/17@ 10.20 am	E84167
17051666	TOTAL PHOSPHORUS	3.80	mg/L	365.3	0.008	05/31/17@ 2.49 pm	E84167

COMMENTS: **TOTAL NITROGEN = 2.21 MG/L**

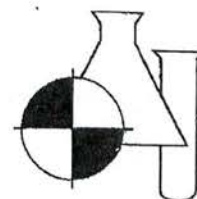
THESE TESTS MEET NELAC REQUIREMENTS.

The test results in this report relate only to the analyses of the samples submitted

QUALIFIERS THAT MAY APPLY:U = BELOW DETECTION LIMIT  
Margaret Rajpaul - Contact Person

# BENCHMARK

EnviroAnalytical Inc.



NELAC Certification #E84167

## ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : 17051061

Mid Florida Water Lab  
8 Oakwood Rd.  
Winter Haven, FL 33880

Project Name : HARRISON WASTE WATER  
Date Received : 05/26/2017  
Time Received : 1508

Margaret Rajpaul

Submission Number: 17051061  
Sample Number: 001  
Sample Description: River Ranch  
Sample Date: 05/25/2017  
Sample Time: 0530  
Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Analysis Date/Time	Analyst
TOTAL KJELDAHL NITROGEN	2.21	MG/L	0.05	0.20	351.2	06/01/2017 10:20	PN
TOTAL PHOSPHORUS AS P	3.60	MG/L	0.008	0.032	365.3	05/31/2017 14:49	BLB

*Tulay Tanrisever*  
Dale B. Dixon / Laboratory Director

06/02/2017

Date

Tulay Tanrisever / QC Officer

Deborah A. Murphy / Project Manager

### DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.  
B = Results based upon colony counts outside the ideal range.  
H = Value based on field kit determination. Results may not be accurate.  
I = Reported value is between the laboratory MDL and the PQL.  
J1 = Estimated value. Surrogate recovery limits exceeded.  
J2 = Estimated value. No quality control criteria exists for component.  
J3 = Estimated value. Quality control criteria for precision or accuracy not met.  
J4 = Estimated value. Sample matrix interference suspected.  
J5 = Estimated value. Data questionable due to improper lab or field protocols.  
K = Off-scale low. Value is known to be < the value reported.  
L = Off-scale high. Value is known to be > the value reported.  
N = Presumptive evidence of presence of material.  
O = Sampled, but analysis lost or not performed.

Q = Sample held beyond accepted hold time.  
T = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.  
U = Analyte analyzed but not detected at the value indicated.  
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.  
Y = Analysis performed on an improperly preserved sample. Data may be inaccurate.  
Z = Too many colonies were present (TNTC). The numeric value represents the filtration volume.  
I = Data deviate from historically established concentration ranges.  
? = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.  
\* = Not reported due to interference.

### NOTES:

MBAS calculated as LAS; molecular weight = 340.  
PQL = 4xMDL.  
ND = Not detected at or above the adjusted reporting limit.  
X = Value exceeds MCL.  
G1 = Accuracy standard does not meet method control limits, but does meet lab control limits that are in agreement with USEPA generated data. USEPA letter available upon request.

### COMMENTS:

For questions or comments regarding these results, please contact us at (941) 723-9986.

Results relate only to the samples.



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

**When Completed Mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temp. Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Interim  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001

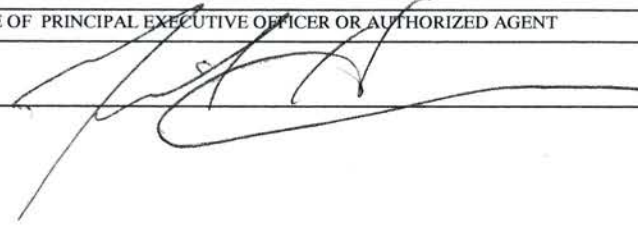
REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 06/01/17 To: 06/30/17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Prior to Construction)	Sample Measurement	.063				0		
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.095 (An.Avg.)	MGD				Monthly	Calculation
Flow	Sample Measurement	.047				0		
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.98		0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.12	4.12	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab
Solids, Total Suspended	Sample Measurement			7.96		0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)		mg/L	Monthly	Calculation
Solids, Total Suspended	Sample Measurement			1.60	1.60	0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	7-27-17

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

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: River Ranch Resort WWTF

MONITORING GROUP: R-001

PERMIT NUMBER: FLA011032-007-DW3P

NUMBER:

MONITORING PERIOD From: 06/01/17 To:

06/30/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				<1			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement				200 (An.Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<1	<1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement				Report (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Monthly	Grab
pH	Sample Measurement			7.0		7.1		0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			1.2				0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					<0.05		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement					12.0 (Max.)	mg/L		Monthly	Grab
Nitrogen, Total (as N)	Sample Measurement					26.4		0		
PARM Code 00600 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)	mg/L		Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement					3.47		0		
PARM Code 00665 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)			Monthly	Grab
Flow (Prior to Construction)	Sample Measurement		.059					0		
PARM Code 50050 R Mon. Site No. FLW-01	Permit Requirement		0.095 (3Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
Percent Capacity, (TMADE/Permit Capacity) x 100	Sample Measurement					52%		0		
PARM Code 00180 1 Mon. Site No. FLW-01	Permit Requirement					Report (Mo.Avg.)	percent		Monthly	Calculated



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

**When Completed Mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001 RIBs with Influent

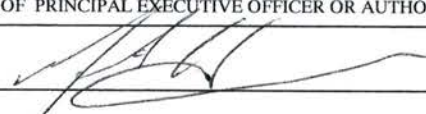
REPORT FREQUENCY: Annually  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 06/01/17 To: 06/30/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement					MNR		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement					Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement					MNR		0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement					Report (Max.)	mg/L		Annually	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	7-27-17

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

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

**When Completed, Mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temp. Terrace, FL 33637-0926

**PERMITTEE NAME:** River Ranch Water Management, L.L.C.  
**MAILING ADDRESS:** 5601 Windhover Drive  
 Orlando, Florida 32819-7914

**PERMIT NUMBER:** FLA011032-007-DW3P

**FACILITY:** River Ranch Resort WWTF  
**LOCATION:** 24700 SR 60 East  
 Lake Wales, FL

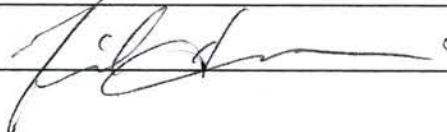
**LIMIT:**  
**CLASS SIZE:**  
**MONITORING GROUP NUMBER:**  
**MONITORING GROUP DESCRIPTION:**  
 RE-SUBMITTED DMR: ☐  
 NO DISCHARGE FROM SITE: ☐  
**MONITORING PERIOD** From: 06/01/17 To: 06/30/17

**Final**  
**N/A**  
**RMP-Q**  
**Biosolids Quantity**  
**REPORT FREQUENCY:** Monthly  
**PROGRAM:** Domestic

**COUNTY:** Polk  
**OFFICE:** Southwest District

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement		0						0		
PARM Code B0008 + Mon. Site No. RMP-001	Permit Requirement		Report (Mo.Total)	Dry tons						Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement		0						0		
PARM Code B0007 + Mon. Site No. RMP-002	Permit Requirement		Report (Mo.Total)	Dry tons						Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	7-27-17

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



# **DAILY SAMPLE RESULTS - PART B**

Permit Number:  
Monitoring Period

FLA011032-007-DW3P

From: 06/01/17

To: 06/30/17

Facility: River Ranch Resort WWTF

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	Nitrogen, Total (as N) mg/L	Phosphorus, Total (as P) mg/L		
Code	80082	50060	74055	00620	00530	00400	50050	00600	00665		
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	EFA-01	EFA-01		
1		3.0				7.1	.039				
2		2.0				7.1	.044				
3		1.8				7.0	.038				
4							.038				
5		1.6				7.0	.038				
6		1.5				7.0	.061				
7		2.0				7.0	.055				
8		1.6				7.0	.051				
9		2.0				7.0	.044				
10		2.2				7.0	.046				
11							.046				
12		1.8				7.0	.046				
13		2.2				7.0	.039				
14		1.6				7.0	.058				
15		1.4				7.0	.050				
16		1.2				7.0	.042				
17		1.8				7.0	.059				
18							.059				
19		1.6				7.0	.059				
20		1.4				7.0	.046				
21		2.2				7.0	.048				
22		2.5				7.0	.040				
23		3.0				7.0	.038				
24		1.6				7.0	.052				
25							.052				
26		2.2				7.1	.052				
27	4.12	2.0	<1	<0.005	1.60	7.1	.038	26.4	3.47		
28		1.8				7.0	.040				
29		2.0				7.0	.046				
30		2.0				7.0	.052				
31											
Total											
Mo. Avg.											

**PLANT STAFFING:**

Day Shift Operator	Class: C	Certificate No: 7196	Name: Mike Harrison
Evening Shift Operator	Class: _____	Certificate No: _____	Name: _____
Night Shift Operator	Class: _____	Certificate No: _____	Name: _____
Lead Operator	Class: _____	Certificate No: _____	Name: _____

**MID FLORIDA WATER LAB**

LABORATORY CERTIFICATION #: E84567

8 OAKWOOD ROAD, WINTER HAVEN FL 33880  
Phone: (863) 965-2540 Fax: (863) 967-8601 Toll Free (888) 244-5657

Margaret Rajpaul, Director

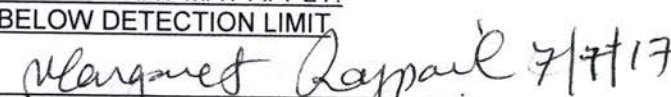
**LABORATORY RESULTS**CLIENT: MICHAEL HARRISONADDRESS: 1871 BETH LANE, WINTER HAVEN FL 33880SAMPLE DESCRIPTION: WASTEWATERSAMPLE COLLECTION MIKE HARRISON 06/27/17 @ 7.00 amSYSTEM NAME: RIVER RANCHDATE AND TIME RECEIVED: 06/27/17 @ 9.14 am

Lab I.D. Number	Parameter	Result	Units	Method	MDL	Date & Time Start	Date & Time Completed
17061582	EFFLUENT FECAL	<1 CFU	#/100 ml	SM9222D	1	06/27/17@ 10.00 am	06/28/17@ 11.00 am
	INFLUENT CBOD <sub>5</sub>		mg/L	SM5210-B	2.00		
17051863	EFFLUENT CBOD <sub>5</sub>	4.12	mg/L	SM5210-B	2.00	06/27/17@ 2.40 pm	07/02/17@ 3.00 pm
	INFLUENT TSS		mg/L	SM2540-D	1.00		
17061863	EFFLUENT TSS	1.60	mg/L	SM2540-D	1.00	06/27/17@ 12.00 pm	06/28/17@ 10.00 am
17061863	EFFLUENT NO <sub>3</sub> -N	U	mg/L	SM4500N03E	0.05	06/27/17@ 11.35 am	06/27/17@ 2.45 pm
17061863	TOTAL KJELDAHL NITROGEN	26.4	mg/L	351.2	0.05	07/03/17@ 12.46 pm	E84167
17061863	TOTAL PHOSPHORUS	3.47	mg/L	365.3	0.008	06/29/17@ 1.10 pm	E84167

COMMENTS: **TOTAL NITROGEN = 3.47 MG/L**

THESE TESTS MEET NELAC REQUIREMENTS.

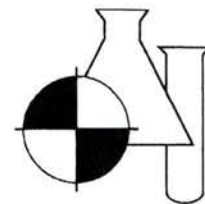
The test results in this report relate only to the analyses of the samples submitted

QUALIFIERS THAT MAY APPLY:U = BELOW DETECTION LIMIT  
Margaret Rajpaul – Contact Person



# BENCHMARK

## EnviroAnalytical Inc.



NELAC Certification #E84167

### ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : 17061241

Mid Florida Water Lab  
8 Oakwood Rd.  
Winter Haven, FL 33880

Project Name : HARRISON WASTE WATER  
Date Received : 06/28/2017  
Time Received : 1449

Margaret Rajpaul

Submission Number: 17061241  
Sample Number: 001  
Sample Description: River Ranch

Sample Date: 06/27/2017  
Sample Time: 0700  
Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Analysis Date/Time	Analyst
TOTAL KJELDAHL NITROGEN	26.4	MG/L	0.05	0.20	351.2	07/03/2017 12:46	PN
TOTAL PHOSPHORUS AS P	3.47	MG/L	0.008	0.032	365.3	06/29/2017 13:10	CE

  
Dale D. Dixon / Laboratory Director  
Tülay Tanrisever / QC Officer  
Deborah A. Murphy / Project Manager

07/05/2017

Date

#### DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.  
B = Results based upon colony counts outside the ideal range.  
H = Value based on field kit determination. Results may not be accurate.  
I = Reported value is between the laboratory MDL and the PQL.  
J1 = Estimated value. Surrogate recovery limits exceeded.  
J2 = Estimated value. No quality control criteria exists for component.  
J3 = Estimated value. Quality control criteria for precision or accuracy not met.  
J4 = Estimated value. Sample matrix interference suspected.  
J5 = Estimated value. Data questionable due to improper lab or field protocols.  
K = Off-scale low. Value is known to be < the value reported.  
L = Off-scale high. Value is known to be > the value reported.  
N = Presumptive evidence of presence of material.  
O = Sampled, but analysis lost or not performed.

Q = Sample held beyond accepted hold time.  
T = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.  
U = Analyte analyzed but not detected at the value indicated.  
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.  
Y = Analysis performed on an improperly preserved sample. Data may be inaccurate.  
Z = Too many colonies were present (TNTC). The numeric value represents the filtration volume.  
^ = Data deviate from historically established concentration ranges.  
? = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.  
\* = Not reported due to interference.

#### NOTES:

MBAS calculated as LAS: molecular weight = 340.  
PQL = 4xMDL.  
ND = Not detected at or above the adjusted reporting limit.  
X = Value exceeds MCL.  
G1 = Accuracy standard does not meet method control limits, but does meet lab control limits that are in agreement with USEPA generated data. USEPA letter available upon request.

#### COMMENTS:

For questions or comments regarding these results, please contact us at (941) 723-9986.

Results relate only to the samples.

D.S.A. -  
CHAIN OF  
CUSTODY



MID FLORIDA WATER LAB

No 76668

Margaret Rajpaul, Director  
8 Oakwood Road  
Winter Haven, FL 33880

PHONE: (863) 965-2540  
FAX: (863) 967-8601  
TOLL FREE: 888-244-5657

FDOH Cert# E84567

FOR LAB USE ON

RECEIVED

2017 JUN 27 A 9:14  
Pyrometer IR

Client Name <u>Harrison Waste Wt</u>							TESTS REQUIRED									
Address							Analysis									
City: State: ZIP:																
Phone #																
FAX #																
Collected by: <u>SA</u> State Collected From:																
Sample ID	Matrix	Date	Time	Comp/Grab	Sample Location	Preservative	1706 C.B.O.D.	1706 TSS	1706 NITRATE	1706 FECAL	1706 Total P	1706 Total N	Temp	Remarks		
1	EFF	W/W	6/27/17	700	6	River Bank	6.3	1863	1863	1863	1863	1863	1863	Temp	Gen 7R2	
2	EFF			810	6	Harbor MTD		1706	1706	1706	1706			Fecal	2.9c	
3								1864	1864	1864	1583			TSS	7.9c	
4																
5																
6																
7																
8																
9																
10																
11																
12																
13																
14																

CUSTODY TRANSFERS				Delivered Directly to Lab <input checked="" type="checkbox"/> Shipped <input type="checkbox"/>		Method of Shipment <u>on 11/4</u>		Containers Received	
Relinquished by	<u>[Signature]</u>	Date	<u>6/27/17</u>	Time	<u>9:14</u>				
Received by	<u>[Signature]</u>	Date	<u>6/27/17</u>	Time	<u>9:14</u>				
Laboratory Remarks									

MATRIX CODES	
GW	GROUND WATER
SW	SURFACE WATER
SO	SOIL
SL	SLUDGE
WW	WASTE WATER



# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed: **File this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temp. Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Interim  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001

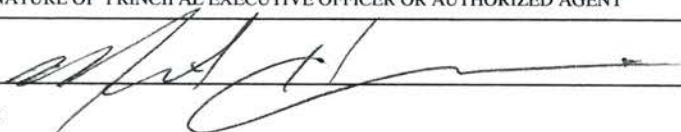
REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 07/01/17 To: 07/31/17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Prior to Construction)	Sample Measurement	.063				0		
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.095 (An.Avg.)	MGD				Monthly	Calculation
Flow	Sample Measurement	.051				0		
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.77		0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.00	3.00	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab
Solids, Total Suspended	Sample Measurement			7.23		0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)		mg/L	Monthly	Calculation
Solids, Total Suspended	Sample Measurement			2.00	2.00	0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	8-28-17

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

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: River Ranch Resort WWTF

MONITORING GROUP

R-001

PERMIT NUMBER: FLA011032-007-DWSP

NUMBER:

MONITORING PERIOD

From: 07/01/17 To:

07/31/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				<1			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement				200 (An.Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<1	<1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement				Report (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Monthly	Grab
pH	Sample Measurement			7.1		7.1		0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			1.4				0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					8.24		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement					12.0 (Max.)	mg/L		Monthly	Grab
Nitrogen, Total (as N)	Sample Measurement					2.05		0		
PARM Code 00600 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)	mg/L		Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement					1.06		0		
PARM Code 00665 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)			Monthly	Grab
Flow (Prior to Construction)	Sample Measurement		.053					0		
PARM Code 50050 R Mon. Site No. FLW-01	Permit Requirement		0.095 (3Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
Percent Capacity, (TMADF/Permit Capacity) x 100	Sample Measurement					56%		0		
PARM Code 00180 1 Mon. Site No. FLW-01	Permit Requirement					Report (Mo.Avg.)	percent		Monthly	Calculated



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

**When Completed:** Mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001 RIBs with Influent


REPORT FREQUENCY: Annually  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 07/01/17 To: 07/31/17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement			MNR		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement			MNR		0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	8-28-17

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

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed: Mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: RMP-Q  
MONITORING GROUP DESCRIPTION: Biosolids Quantity

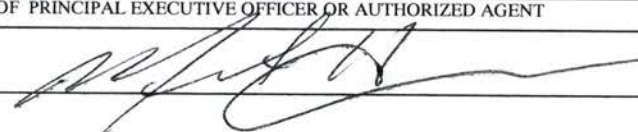
REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 07/01/17 To: 07/31/17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP-001	Permit Requirement	Report (Mo.Total)	Dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	0				0		
PARM Code B0007 + Mon. Site No. RMP-002	Permit Requirement	Report (Mo.Total)	Dry tons				Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	8-28-17

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



# DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA011032-007-DW3P

From: To:

Facility: River Ranch Resort WWTF

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	Nitrogen, Total (as N) mg/L	Phosphorus, Total (as P) mg/L		
Code	80082	50060	74055	00620	00530	00400	50050	00600	00665		
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	EFA-01	EFA-01		
1							.061				
2		1.8				7.1	.061				
3		2.0				7.1	.050				
4		2.0				7.1	.039				
5		2.2				7.1	0.46				
6		2.0				7.1	.038				
7		2.2				7.1	.061				
8							.061				
9		2.5				7.1	.061				
10		3.0				7.1	.055				
11		3.0				7.1	.040				
12		2.2				7.1	.036				
13		2.0				7.1	.042				
14		2.2				7.1	.044				
15							.044				
16		2.5				7.1	.044				
17		2.2				7.1	.049				
18		2.0				7.1	.036				
19		2.5				7.1	.046				
20		2.2				7.1	.051				
21		2.4				7.1	.049				
22							.049				
23		2.5				7.1	.049				
24		1.6				7.1	.054				
25		1.4				7.1	.051				
26		1.8				7.1	.055				
27	3.00	2.0	<1	8.24	2.00	7.1	.058	2.05	1.06		
28		2.0				7.1	.056				
29		1.6				7.1	.069				
30							.069				
31		2.8				7.1	.069				
Total											
Mo. Avg.											

## PLANT STAFFING:

Day Shift Operator Class: C Certificate No: 7196 Name: Mike Harrison

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

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

Lead Operator Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_

**MID FLORIDA WATER LAB**

LABORATORY CERTIFICATION #: E84567

8 OAKWOOD ROAD, WINTER HAVEN FL 33880  
Phone: (863) 965-2540 Fax: (863) 967-8601 Toll Free (888) 244-5657

Margaret Rajpaul, Director

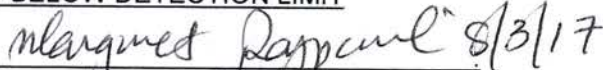
**LABORATORY RESULTS**CLIENT: MICHAEL HARRISONADDRESS: 1871 BETH LANE, WINTER HAVEN FL 33880SAMPLE DESCRIPTION: WASTEWATERSAMPLE COLLECTION MIKE HARRISON 07/27/17 @ 5.30 amSYSTEM NAME: RIVER RANCHDATE AND TIME RECEIVED: 07/27/17 @ 10.09 am

Lab I.D. Number	Parameter	Result	Units	Method	MDL	Date & Time Start	Date & Time Completed
17071884	EFFLUENT FECAL	<1 CFU	#/100 ml	SM9222D	1	07/27/17@ 10.40 am	07/28/17@ 10.10 am
	INFLUENT CBOD <sub>5</sub>		mg/L	SM5210-B	2.00		
17072185	EFFLUENT CBOD <sub>5</sub>	3.00	mg/L	SM5210-B	2.00	07/27/17@ 5.15 pm	08/01/17@ 3.00 pm
	INFLUENT TSS		mg/L	SM2540-D	1.00		
17072185	EFFLUENT TSS	2.00	mg/L	SM2540-D	1.00	07/27/17@ 12.15 pm	07/28/17@ 10.00 am
17072185	EFFLUENT NO <sub>3</sub> -N	8.24	mg/L	SM4500N03E	0.05	07/27/17@ 2.15 pm	07/27/17@ 5.50 pm
17072185	TOTAL KJELDAHL NITROGEN	2.05	mg/L	351.2	0.05	08/02/17@ 12.25 pm	E84167
17072185	TOTAL PHOSPHORUS	1.06	mg/L	365.3	0.008	07/31/17@ 11.49 am	E84167

COMMENTS: **TOTAL NITROGEN = 10.29 MG/L**

THESE TESTS MEET NELAC REQUIREMENTS.

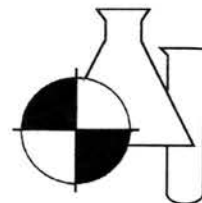
The test results in this report relate only to the analyses of the samples submitted

QUALIFIERS THAT MAY APPLY:U = BELOW DETECTION LIMIT  
Margaret Rajpaul – Contact Person



# BENCHMARK

## EnviroAnalytical Inc.



NELAC Certification #E84167

### ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : 17071098

Mid Florida Water Lab  
8 Oakwood Rd.  
Winter Haven, FL 33880

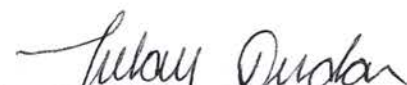
Project Name : HARRISON WASTE WATER  
Date Received : 07/28/2017  
Time Received : 1510

Margaret Rajpaul

Submission Number: 17071098  
Sample Number: 001  
Sample Description: River Ranch

Sample Date: 07/27/2017  
Sample Time: 0530  
Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Analysis Date/Time	Analyst
TOTAL KJELDAHL NITROGEN	2.05	MG/L	0.05	0.20	351.2	08/02/2017 12:25	PN
TOTAL PHOSPHORUS AS P	1.06	MG/L	0.008	0.032	365.3	07/31/2017 11:49	CE

  
Dale D. Dixon / Laboratory Director

08/03/2017

Date

Tulay Tanrisever / QC Officer

Deborah A. Murphy / Project Manager

#### DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.  
B = Results based upon colony counts outside the ideal range.  
H = Value based on field kit determination. Results may not be accurate.  
I = Reported value is between the laboratory MDL and the PQL.  
J1 = Estimated value. Surrogate recovery limits exceeded.  
J2 = Estimated value. No quality control criteria exists for component.  
J3 = Estimated value. Quality control criteria for precision or accuracy not met.  
J4 = Estimated value. Sample matrix interference suspected.  
J5 = Estimated value. Data questionable due to improper lab or field protocols.  
K = Off-scale low. Value is known to be < the value reported.  
L = Off-scale high. Value is known to be > the value reported.  
N = Presumptive evidence of presence of material.  
O = Sampled, but analysis lost or not performed.

Q = Sample held beyond accepted hold time.  
T = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.  
U = Analyte analyzed but not detected at the value indicated.  
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.  
Y = Analysis performed on an improperly preserved sample. Data may be inaccurate.  
Z = Too many colonies were present (TNTC). The numeric value represents the filtration volume.  
! = Data deviate from historically established concentration ranges.  
? = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.  
\* = Not reported due to interference.

#### NOTES:

MBAS calculated as LAS; molecular weight = 340.  
PQL = 4xMDL.  
ND = Not detected at or above the adjusted reporting limit.  
X = Value exceeds MCL.  
G1 = Accuracy standard does not meet method control limits, but does meet lab control limits that are in agreement with USEPA generated data. USEPA letter available upon request.

#### COMMENTS:

For questions or comments regarding these results, please contact us at (941) 723-9986.

Results relate only to the samples.

CHAIN OF  
CUSTODY

77397



# MID FLORIDA WATER LAB

Margaret Rajpaul, Director  
8 Oakwood Road  
Winter Haven, FL 33880

PHONE: (863) 965-2540  
FAX: (863) 967-8601  
TOLL FREE: 888-244-5657

FDOH Cert# E84567

FOR LAB USE ONLY

RECEIVED

REVISION #3

2017 JUL 27 A 10:09

Client Name							TESTS REQUIRED									
Address							Analysis									
City:		State:		ZIP:			C.B.O.D.		TSS		NITRATE		FECAL		Remarks	
Phone #							Total		Perf		Total					
FAX #																
Collected by:							State Collected From:									
Sample ID	Matrix	Date	Time	Comp/Grab	Sample Location		Preservative	C.B.O.D.	TSS	NITRATE	FECAL	Total	Perf	Total	Pyrometer IR #	
1	EFF	W/W	7/27/17	6:30 AM	6	Diver Bank	on ice	2105	2105	2105	1804	1707	1707		Temp	
2	/	/	/	7:00 AM		Harbor mt. P		2106	2106	2106	1707	2105	2105		Fecal 7.8°C	
3	/	/	/	8:05 AM		Pelk City BP		1707	1707	1707	1707	1707	1707		TSS 7.8°C	
4	/	/	/	/	/	/		2107	2107	2107						
5																
6																
7																
8																
9																
10																
11																
12																
13																
14																

## CUSTODY TRANSFERS

Relinquished by C. Rajpaul Date 7/27/17 Time 10:10  
Received by C. Rajpaul Date 7/27/17 Time 10:09  
Laboratory Remarks \_\_\_\_\_

☒ Delivered Directly to Lab ☐ Shipped

Method of Shipment on ice

Containers Received \_\_\_\_\_

MATRIX CODES  
GW — GROUND WATER  
SW — SURFACE WATER  
SO — SOIL  
SL — SLUDGE  
WW — WASTE WATER



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

**When Completed Mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temp. Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Interim  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001


REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 08/01/17 To: 08/31/17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Prior to Construction)	Sample Measurement	.062				0		
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.095 (An.Avg.)	MGD				Monthly	Calculation
Flow	Sample Measurement	.048				0		
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.56		0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.17	4.17	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab
Solids, Total Suspended	Sample Measurement			7.18		0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)		mg/L	Monthly	Calculation
Solids, Total Suspended	Sample Measurement			1.00	1.00	0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	8-26-17

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

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: River Ranch Resort WWTF

MONITORING GROUP

R-001

PERMIT NUMBER: FLA011032-007-Dw. JP

NUMBER:

MONITORING PERIOD

From: 08/01/17 To:

8/31/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				<1			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement				200 (An.Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<1	<1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement				Report (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Monthly	Grab
pH	Sample Measurement			7.1		7.3		0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			1.6				0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					7.72		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement					12.0 (Max.)	mg/L		Monthly	Grab
Nitrogen, Total (as N)	Sample Measurement					1.52		0		
PARM Code 00600 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)	mg/L		Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement					0.609		0		
PARM Code 00665 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)			Monthly	Grab
Flow (Prior to Construction)	Sample Measurement		.049					0		
PARM Code 50050 R Mon. Site No. FLW-01	Permit Requirement		0.095 (3Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
Percent Capacity, (TMADF/Permit Capacity) x 100	Sample Measurement					52%		0		
PARM Code 00180 1 Mon. Site No. FLW-01	Permit Requirement					Report (Mo.Avg.)	percent		Monthly	Calculated



# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed Mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temp. Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001 RIBs with Influent


REPORT FREQUENCY: Annually  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 08/01/17 To: 08/31/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement					MNR		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement					Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement					MNR		0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement					Report (Max.)	mg/L		Annually	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/ Operator		863-287-4075	8-26-17

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

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed Mail this report to: Department of Environmental Protection, 13051 N Telecom Pkwy, Temp. Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: RMP-Q  
MONITORING GROUP DESCRIPTION: Biosolids Quantity


REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 08/01/17 To: 08/31/17

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement		0								
PARM Code B0008 + Mon. Site No. RMP-001	Permit Requirement		Report (Mo.Total)	Dry tons						Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement		0								
PARM Code B0007 + Mon. Site No. RMP-002	Permit Requirement		Report (Mo.Total)	Dry tons						Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	8-26-17

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



# DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA011032-007-DW3P

From: 08/01/17 To: 08-31-17

Facility: River Ranch Resort WWTF

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	Nitrogen, Total (as N) mg/L	Phosphorus, Total (as P) mg/L		
Code	80082	50060	74055	00620	00530	00400	50050	00600	00665		
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	EFA-01	EFA-01		
1		1.6				7.1	.036				
2		2.2				7.2	.039				
3		2.5				7.2	.046				
4		2.0				7.2	.051				
5		1.6				7.2	.052				
6							.052				
7		3.0				7.2	.052				
8		2.5				7.2	.050				
9		3.0				7.2	.058				
10		3.0				7.2	.036				
11		2.2				7.2	.039				
12		2.5				7.2	.064				
13							.064				
14		2.4				7.3	.064				
15		2.5				7.3	.038				
16		2.2				7.3	.044				
17		2.5				7.3	.051				
18		2.0				7.3	.060				
19		2.2				7.3	.061				
20							.044				
21		2.8				7.3	.044				
22		3.0				7.3	.038				
23		3.0				7.3	.042				
24	4.17	2.2	<1	7.72	1.00	7.3	.056	1.52	0.609		
25		2.8				7.3	.048				
26		2.5				7.3	.057				
27							.051				
28		2.5				7.3	.051				
29		2.4				7.3	.035				
30		2.8				7.3	.033				
31		3.0				7.3	.033				
Total											
Mo. Avg.											

## PLANT STAFFING:

Day Shift Operator	Class: <u>C</u>	Certificate No: <u>7196</u>	Name: <u>Mike Harrison</u>
Evening Shift Operator	Class: _____	Certificate No: _____	Name: _____
Night Shift Operator	Class: _____	Certificate No: _____	Name: _____
Lead Operator	Class: _____	Certificate No: _____	Name: _____

**MID FLORIDA WATER LAB**

LABORATORY CERTIFICATION #: E84567

8 OAKWOOD ROAD, WINTER HAVEN FL 33880  
Phone: (863) 965-2540 Fax: (863) 967-8601 Toll Free (888) 244-5657

Margaret Rajpaul, Director

**LABORATORY RESULTS**CLIENT: MICHAEL HARRISONADDRESS: 1871 BETH LANE, WINTER HAVEN FL 33880SAMPLE DESCRIPTION: WASTEWATERSAMPLE COLLECTION MIKE HARRISON 08/24/17 @ 12.00 pmSYSTEM NAME: RIVER RANCHDATE AND TIME RECEIVED: 08/24/17 @ 2.49 pm

Lab I.D. Number	Parameter	Result	Units	Method	MDL	Date & Time Start	Date & Time Completed
17082138	EFFLUENT FECAL	<1 CFU	#/100 ml	SM9222D	1	08/24/17@ 3.10 pm	08/25/17@ 2.40 pm
	INFLUENT CBOD <sub>5</sub>		mg/L	SM5210-B	2.00		
17082463	EFFLUENT CBOD <sub>5</sub>	4.17	mg/L	SM5210-B	2.00	08/24/17@ 5.10 pm	08/29/17@ 3.00 pm
	INFLUENT TSS		mg/L	SM2540-D	1.00		
17082463	EFFLUENT TSS	1.00	mg/L	SM2540-D	1.00	08/24/17@ 4.35 pm	08/25/17@ 10.00 am
17082463	EFFLUENT NO <sub>3</sub> -N	7.72	mg/L	SM4500NO <sub>3</sub> E	0.05	08/24/17@ 5.10 pm	08/24/17@ 6.15 pm
17082463	TOTAL KJELDAHL NITROGEN	1.52	mg/L	351.2	0.05	08/31/17@ 1.05 pm	E84167
17082463	TOTAL PHOSPHORUS	0.609	mg/L	365.3	0.008	08/30/17@ 10.58 am	E84167

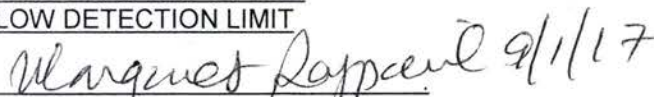
COMMENTS: **TOTAL NITROGEN = 9.24 MG/L**

THESE TESTS MEET NELAC REQUIREMENTS.

The test results in this report relate only to the analyses of the samples submitted

QUALIFIERS THAT MAY APPLY:

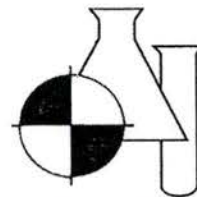
U = BELOW DETECTION LIMIT

  
Margaret Rajpaul – Contact Person



# BENCHMARK

*EnviroAnalytical Inc.*



NELAC Certification #E84167

## ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : 17081238

Mid Florida Water Lab  
8 Oakwood Rd.  
Winter Haven, FL 33880

Project Name : HARRISON WASTE WATER  
Date Received : 08/25/2017  
Time Received : 1445

Margaret Rajpaul

Submission Number: 17081238  
Sample Number: 001  
Sample Description: River Ranch

Sample Date: 08/24/2017  
Sample Time: 1200  
Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Analysis Date/Time	Analyst
TOTAL KJELDAHL NITROGEN	1.52	MG/L	0.05	0.20	351.2	08/31/2017 13:05	PN
TOTAL PHOSPHORUS AS P	0.609	MG/L	0.008	0.032	365.3	08/30/2017 10:56	CE

*Tulay Tanrisever*

09/01/2017

Dale D. Dixon / Laboratory Director

Date

Tulay Tanrisever / QC Officer

### DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.  
B = Results based upon colony counts outside the ideal range.  
H = Value based on field kit determination. Results may not be accurate.  
I = Reported value is between the laboratory MDL and the PQL.  
J1 = Estimated value. Surrogate recovery limits exceeded.  
J2 = Estimated value. No quality control criteria exists for component.  
J3 = Estimated value. Quality control criteria for precision or accuracy not met.  
J4 = Estimated value. Sample matrix interference suspected.  
J5 = Estimated value. Data questionable due to improper lab or field protocols.  
K = Off-scale low. Value is known to be < the value reported.  
L = Off-scale high. Value is known to be > the value reported.  
N = Presumptive evidence of presence of material.  
O = Sampled, but analysis lost or not performed.

Q = Sample held beyond accepted hold time.  
T = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.  
U = Analyte analyzed but not detected at the value indicated.  
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.  
Y = Analysis performed on an improperly preserved sample. Data may be inaccurate.  
Z = Too many colonies were present (TNTC). The numeric value represents the filtration volume.  
! = Data deviate from historically established concentration ranges.  
? = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.  
\* = Not reported due to interference.

### NOTES:

MBAS calculated as LAS; molecular weight = 340.  
PQL = 4xMDL.  
ND = Not detected at or above the adjusted reporting limit.  
X = Value exceeds MCL.  
G1 = Accuracy standard does not meet method control limits, but does meet lab control limits that are in agreement with USEPA generated data. USEPA letter available upon request.

### COMMENTS:

For questions or comments regarding these results, please contact us at (941) 723-9986.

Results relate only to the samples.

CHAIN OF  
CUSTODY  
77814



# MID FLORIDA WATER LAB

Margaret Rajpaul, Director  
8 Oakwood Road  
Winter Haven, FL 33880

EDOH Cert# E84567  
PHONE: (863) 965-2540  
FAX: (863) 967-8601  
TOLL FREE: 888-244-5657

FOR LAB USE ONLY  
**RECEIVED**  
2017 AUG 24 P 2:49

REVISION #3

Client Name <u>Harrison Waste Water</u>						TESTS REQUIRED									
Address						Analysis									
City:		State:		ZIP:		<div style="display: flex; justify-content: space-between;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">Preservative</div> <div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">S.B.O.D.</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">NITRATE</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">FECAL</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">Total-P</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">Total-Nit</div> </div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">Remarks</div> </div>									
Phone #															
FAX #															
Collected by <u>SA</u> State Collected From:															
	Sample ID	Matrix	Date	Time	Comp/Grab	Sample Location	1708	1708	1708	1708	1708	1708	Pyrometer IR # <u>2</u>		
1	EFF	W/W	8/24/17	1200	0	River Ditch	2463	2463	2463	2463	2463	Temps fecal 7.9°C TSS 7.9°C			
2	/	/	/	115	/	Harbor MHP	2463	2463	2463	2463	2463				
3	/	/	/	215	/	POR City BP	1708	1708	1708	1708	1708				
4	/	/	/	/	/	/	2463	2463	2463	2463	2463				
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															

**CUSTODY TRANSFERS**  
 Relinquished by [Signature] Date 8-24-17 Time 2:49  
 Received by [Signature] Date 8/24/17 Time 2:49  
 Laboratory Remarks \_\_\_\_\_

☒ Delivered Directly to Lab ☐ Shipped  
 Method of Shipment ON ICE  
 Containers Received \_\_\_\_\_

**MATRIX CODES**  
 GW -- GROUND WATER  
 SW -- SURFACE WATER  
 SO -- SOIL  
 SL -- SLUDGE  
 WW -- WASTE WATER



# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When Completed Mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Interim  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001

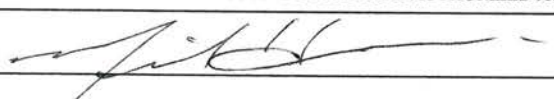
REPORT FREQUENCY: Monthly  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 09/01/17 To: 09/30/17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Prior to Construction)	Sample Measurement	.064				0		
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.095 (An.Avg.)	MGD				Monthly	Calculation
Flow	Sample Measurement	.077				0		
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.70		0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.68	4.68	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab
Solids, Total Suspended	Sample Measurement			6.49		0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)		mg/L	Monthly	Calculation
Solids, Total Suspended	Sample Measurement			<1.0	<1.0	0		
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L	Monthly	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harriao/Operator		863-287-4075	10-31-17

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

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: River Ranch Resort WWTF

MONITORING GROUP: R-001

PERMIT NUMBER: FLA011032-007-DW3P

NUMBER:

MONITORING PERIOD From: 09/01/17 To:

09/30/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				<1			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement				200 (An.Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement				6	6		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement				Report (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Monthly	Grab
pH	Sample Measurement			7.1		7.3		0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			1.8				0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					6.29		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement					12.0 (Max.)	mg/L		Monthly	Grab
Nitrogen, Total (as N)	Sample Measurement					1.36		0		
PARM Code 00600 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)	mg/L		Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement					0.909		0		
PARM Code 00665 A Mon. Site No. EFA-01	Permit Requirement					Report (Max.)			Monthly	Grab
Flow (Prior to Construction)	Sample Measurement		.059					0		
PARM Code 50050 R Mon. Site No. FLW-01	Permit Requirement		0.095 (3Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
Percent Capacity, (TMADF/Permit Capacity) x 100	Sample Measurement					62%		0		
PARM Code 00180 1 Mon. Site No. FLW-01	Permit Requirement					Report (Mo.Avg.)	percent		Monthly	Calculated



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

**When Completed, Mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Temple Terrace, FL 33637-0926

PERMITTEE NAME: River Ranch Water Management, L.L.C.  
MAILING ADDRESS: 5601 Windhover Drive  
Orlando, Florida 32819-7914

PERMIT NUMBER: FLA011032-007-DW3P

FACILITY: River Ranch Resort WWTF  
LOCATION: 24700 SR 60 East  
Lake Wales, FL

LIMIT: Final  
CLASS SIZE: N/A  
MONITORING GROUP NUMBER: R-001  
MONITORING GROUP DESCRIPTION: R-001 RIBs with Influent


REPORT FREQUENCY: Annually  
PROGRAM: Domestic

COUNTY: Polk  
OFFICE: Southwest District

RE-SUBMITTED DMR: ☐  
NO DISCHARGE FROM SITE: ☐  
MONITORING PERIOD From: 09/01/17 To: 09/30/17

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement					MNR		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement					Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement					MNR		0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement					Report (Max.)	mg/L		Annually	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/ Operator		863-287-4075	10-31-17

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

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

**When Completed, Mail this report to:** Department of Environmental Protection, 13051 N Telecom Pkwy, Tallahassee, FL 32310-9026

**PERMITTEE NAME:** River Ranch Water Management, L.L.C.  
**MAILING ADDRESS:** 5601 Windhover Drive  
 Orlando, Florida 32819-7914

**PERMIT NUMBER:**

FLA011032-007-DW3P

**FACILITY:** River Ranch Resort WWTF  
**LOCATION:** 24700 SR 60 East  
 Lake Wales, FL

**LIMIT:**  
**CLASS SIZE:**  
**MONITORING GROUP NUMBER:**  
**MONITORING GROUP DESCRIPTION:**  
**RE-SUBMITTED DMR:** ☐  
**NO DISCHARGE FROM SITE:** ☐  
**MONITORING PERIOD**

**Final**  
 N/A  
 RMP-Q  
 Biosolids Quantity


**REPORT FREQUENCY:** Monthly  
**PROGRAM:** Domestic

**COUNTY:** Polk  
**OFFICE:** Southwest District

**From:** 09/01/17 **To:** 09/30/17

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement		0						0		
PARM Code B0008 + Mon. Site No. RMP-001	Permit Requirement		Report (Mo. Total)	Dry tons						Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement		0						0		
PARM Code B0007 + Mon. Site No. RMP-002	Permit Requirement		Report (Mo. Total)	Dry tons						Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mike Harrison/Operator		863-287-4075	10-31-17

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



# DAILY SAMPLE RESULTS - PART B

Permit Number:  
Monitoring Period

FLA011032-007-DW3P  
From: 09/01/17

To: 09/30/17

Facility: River Ranch Resort WWTF

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	Nitrogen, Total (as N) mg/L	Phosphorus, Total (as P) mg/L		
Code	80082	50060	74055	00620	00530	00400	50050	00600	00665		
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	EFA-01	EFA-01		
1		2.2				7.3	.089				
2		2.5				7.3	.077				
3							.077				
4		2.2				7.1	.0077				
5		2.5				7.1	.064				
6		2.4				7.1	.051				
7		2.2				7.1	.052				
8		2.0				7.1	.050				
9							.098				
10							.098				
11		2.2				7.1	.098				
12		2.5				7.1	.079				
13		2.2				7.1	.084				
14		2.4				7.1	.088				
15		2.2				7.1	.089				
16		1.8				7.1	.080				
17							.080				
18		2.2				7.1	.080				
19		2.4				7.1	.094				
20		2.5				7.1	.091				
21		2.2				7.1	.088				
22		2.0				7.1	.077				
23		1.8				7.1	.065				
24							.064				
25		3.0				7.1	.064				
26		3.0				7.1	.064				
27		2.2				7.1	.077				
28	4.68	2.0	6	6.29	<1.0	7.1	.084	1.36	0.909		
29		2.2				7.1	.068				
30											
31											
Total											
Mo. Avg.											

## PLANT STAFFING:

Day Shift Operator

Class: C Certificate No: 7196 Name: Mike Harrison

Evening Shift Operator

Class: Certificate No: Name:

Night Shift Operator

Class: Certificate No: Name:

Lead Operator

Class: Certificate No: Name:

**MID FLORIDA WATER LAB**

LABORATORY CERTIFICATION #: E84567

8 OAKWOOD ROAD, WINTER HAVEN FL 33880  
Phone: (883) 965-2540 Fax: (863) 967-8601 Toll Free (888) 244-5657

Margaret Rajpaul, Director

**LABORATORY RESULTS**CLIENT: MICHAEL HARRISONADDRESS: 1871 BETH LANE, WINTER HAVEN FL 33880SAMPLE DESCRIPTION: WASTEWATERSAMPLE COLLECTION MIKE HARRISON 09/28/17 @ 7.10 amSYSTEM NAME: RIVER RANCHDATE AND TIME RECEIVED: 09/28/17 @ 2.15 pm

Lab I.D. Number	Parameter	Result	Units	Method	MDL	Date & Time Start	Date & Time Completed
17092549	EFFLUENT FECAL	6 CFU	#/100 ml	SM9222D	1	09/28/17@ 2.55 pm	09/29/17@ 1.20 pm
	INFLUENT CBOD <sub>5</sub>		mg/L	SM5210-B	2.00		
17092790	EFFLUENT CBOD <sub>5</sub>	4.68	mg/L	SM5210-B	2.00	09/28/17@ 5.30 pm	10/03/17@ 3.00 pm
	INFLUENT TSS		mg/L	SM2540-D	1.00		
17092790	EFFLUENT TSS	<1	mg/L	SM2540-D	1.00	09/28/17@ 3.00 pm	09/29/17@ 10.00 am
17092790	EFFLUENT NO <sub>3</sub> -N	6.29	mg/L	SM4500N03E	0.05	09/29/17@ 1.05 pm	09/29/17@ 4.20 pm
17092790	TOTAL KJELDAHL NITROGEN	1.36	mg/L	351.2	0.05	10/12/17@ 12.15 pm	E84167
17092790	TOTAL PHOSPHORUS	0.909	mg/L	365.3	0.008	10/04/17@ 1.34 pm	E84167

COMMENTS: TOTAL NITROGEN = 7.199 MG/L

THESE TESTS MEET NELAC REQUIREMENTS.

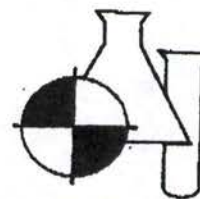
The test results in this report relate only to the analyses of the samples submitted

QUALIFIERS THAT MAY APPLY:U = BELOW DETECTION LIMITMargaret Rajpaul 10/12/17  
Margaret Rajpaul - Contact Person



# BENCHMARK

EnviroAnalytical Inc.



NELAC Certification #B84167

## ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : 17091439

Mid Florida Water Lab  
8 Oakwood Rd.  
Winter Haven, FL 33880

Project Name : HARRISON WASTE WATER  
Date Received : 09/29/2017  
Time Received : 1514

Margaret Rajpaul

Submission Number: 17091439

Sample Number: 001

Sample Description: River

Sample Date: 09/28/2017

Sample Time: 0710

Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Analysis Date/Time	Analyst
TOTAL KJELDAHL NITROGEN	1.98	MG/L	0.05	0.20	361.2	10/12/2017 12:15	PN
TOTAL PHOSPHORUS AS P	0.909	MG/L	0.008	0.032	365.3	10/04/2017 13:34	CE

*Dale D. Dixon*  
Dale D. Dixon Laboratory Director

10/12/2017

Date

Tolay Tennisever / Michael Graves - QC Officers

### DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.  
B = Results based upon colony counts outside the ideal range.  
H = Value based on field kit determination. Results may not be accurate.  
I = Reported value is between the laboratory MDL and the PQL.  
J1 = Estimated value. Surrogate recovery limits exceeded.  
J2 = Estimated value. No quality control criteria exists for component.  
J3 = Estimated value. Quality control criteria for precision or accuracy not met.  
J4 = Estimated value. Sample matrix interference suspected.  
J5 = Estimated value. Data questionable due to improper lab or field protocols.  
K = Off-scale low. Value is known to be < the value reported.  
L = Off-scale high. Value is known to be > the value reported.  
N = Presumptive evidence of presence of material.  
O = Sampled, but analysis lost or not performed.

### NOTES:

MBAS calculated as LAS; molecular weight = 240.  
PQL = 4xMDL  
ND = Not detected at or above the adjusted reporting limit.  
X = Value exceeds MDL.  
G1 = Accuracy standard does not meet method control limits, but does meet lab control limits that are in agreement with USEPA generated data. USEPA letter available upon request.

Q = Sample held beyond accepted hold time.  
Y = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.  
U = Analyte analyzed but not detected at the value indicated.  
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.  
Z = Analysis performed on an improperly preserved sample. Data may be inaccurate.  
I = Too many colonies were present (TNTC). The numeric value represents the filtration volume.  
I = Data deviate from historically established concentration ranges.  
? = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.  
\* = Not reported due to interference.  
Oil & Grease - If client does not send sufficient sample quantity for spike evaluation surface water samples are supplied by the laboratory.

### COMMENTS:

For questions or comments regarding these results, please contact us at (941) 723-9986.  
Results relate only to the samples.

#98



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

See page 4 for Instructions.

POLK

## General Information for the Month/Year of:

October-16

## A. Public Water System (PWS) Information

PWS Name:	New River Ranch & RV Resort 1& 2	PWS Identification Number:	353-1517
PWS Type:	Community		
Number of Service Connections at End of Month:	700	Total Population Served at End of Month:	200
PWS Owner:	River Ranch		
Contact Person:	Shelly Kirkland	Contact Person's Title:	Administrative Assistant
Contact Person's Mailing Address:	PO Box 30030	City:	River Ranch
Contact Person's Telephone Number:	863-692-1321	State:	FL
Contact Person's E-Mail Address:	shelly_kirkland@wqresorts.ca	Zip Code:	33867
		Contact Person's Fax Number:	None

## B. Water Treatment Plant Information

Plant Name:	New River Ranch	Plant Telephone Number:	863-692-2946
Plant Address:	3200 River Ranch Blvd	City:	Lake Wales
		State:	FL
		Zip Code:	33967
Type of Water Treated by Plant:	Raw ground water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	720,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	5	Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Larry Scott	C	8567
Other Operators:	Keith Johnson	C	7451
	William Goodman	D	17443
	Tony Johnson	D	18154
			1/month
			11/Month

## II. Certification by Lead/Chief Operator

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

*Larry Scott* 11-3-16  
Signature and Date

Larry Scott  
Printed or Typed Name

8567  
License Number



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

PWS Identification Number: 353-1517 Plant Name: New River Ranch

III. Daily Data for the Month/Year of: October-16

Means of Achieving Four-Log Virus Inactivation/Removal:\*

Type of Disinfectant Residual Maintained in Distribution System				Free Chlorine										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculation, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*											
				CT Calculations							UV Dose				
				Peak Flow rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/l	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/l.	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2			
1		24	101850												
2		24	101850												
3	x	24	101850										0.2		
4		24	160750												
5	x	24	160750										0.2		
6		24	117875												
7	x	24	117875										0.2		
8		24	159517												
9		24	159517												
10	x	24	159517										0.2	cl2 pump 6.5-7	
11		24	142800												
12	x	24	142800										0.2		
13		24	139350												
14	x	24	139350										0.6		
15		24	151400												
16		24	151400												
17	x	24	151400										2.0		
18		24	139750												
19	x	24	139750										2.0		
20		24	154300												
21	x	24	154300										2.2		
22		24	177733												
23		24	177733												
24	x	24	177733										2.0		
25		24	160150												
26	x	24	160150										2.3		
27		24	155330												
28	x	24	155330										2.0		
29		24	163633												
30		24	163633												
31	x	24	163633										2.2		
Total			4603009												
Average			148484												
Maximum			177733												

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



DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION  
AND LABORATORY REPORTING FORMAT

Mid Florida Water Lab  
8 Oakwood Road  
Winter Haven, FL 33880  
(883) 885-2640  
LAB I.D. # E84687

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

Analysis Requested: (please check all that apply)

☒ Total Coliform/E. coli ☐ Total Coliform/Fecal ☐ Enterococci ☐ Coliphage ☐ HPC ☐ Other: \_\_\_\_\_

Public Water System Name: **Westgate River Ranch**

PWS ID: **353-1517**

PWS Address: **3200 River Ranch Rd**

City: **River Ranch, FL 33887**

PWS or PWS Owner's Phone #: **407-351-3351 ext. 631**

Fax #: \_\_\_\_\_

Email Address: **shelly.kirkland@wvresorts.com**

Collector: **TOBY JOHNSON**

Collector's Phone #: **863-885-1438**

Type System: **Community Water System**

Send Report to: **Folk County Bact. Reports**

Reason for Sampling: ☒ Routine Distribution ☒ Raw (triggered or assessment)

Sample Collection Date: **10-10-16**

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

2016 OCT 11 A 9:12

Analysis Date & Time: **10/11/16 @ 9:25 AM**

Sample Acceptance Criteria:

Sample Preservation: ☒ On Ice ☐ Not On Ice **6.0** °C

Disinfectant Check: ☒ Not Detected ☐ mg/L

This sample does not meet the following NELAC requirements: \_\_\_\_\_

Sample Number	Sample Point (Location or Specific Address)	Collection Time	Sample Type	Disinfect Resid (mg/L)	pH	Total Coliform Analysis Method: SM9222B				Lab Sample Number
						E. coli Analysis Method: SM9222G-EC				
						Non Coliform	Total Coliform	E. coli	Data Qualifier	
A	Raw at well # 1	1156	R	0.74		A	A			012657
B	Raw at well # 2	1159	R	0.74		A	A			012658
C	Lodge	1202	D	.2		A	A			012659
D	Motel	1206	D	.2		A	A			012660

Average of disinfectant residuals for routine and repeat samples:

**Free Chlorine** or Total chlorine (circle one) **1.2**

Disinfectant Residual Analysis Method:

☒ DPD Colorimetric ☐ Other: \_\_\_\_\_

Person performing disinfectant analysis is:

☒ A certified operator (# **18154**)  
☐ Supervised by a certified operator (# \_\_\_\_\_)  
☐ Employed by a certified lab  
☐ Employed DEP or DOH  
☐ Authorized representative of supplier of water

Unless otherwise noted All tests are performed in accordance with  
NELAC Standards, and the results relate to the samples.

Date and time PWS notified of positive results: \_\_\_\_\_

Date and time DEP/DOH notified of positive results: \_\_\_\_\_

Date Report issued: **10/12/16**

Lab Signature: **Shelly Kirkland**

Title: **Lab Manager**

Name and Mailing Address of Person to Receive Report

Tri Florida Water Treatment  
226 East Lake Ave  
Auburndale, FL 33823

☐ Satisfactory  
☐ Incomplete Collection Information  
☐ Repeat Samples Required  
☐ Replacement Samples Required

DEP/DOH USE ONLY

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

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





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

See page 4 for Instructions.

POLK

General Information for the Month/Year of: November-16

## A. Public Water System (PWS) Information

PWS Name:	New River Ranch & RV Resort 1& 2	PWS Identification Number:	353-1517
PWS Type:	Community		
Number of Service Connections at End of Month:	700	Total Population Served at End of Month:	200
PWS Owner:	River Ranch		
Contact Person:	Shelly Kirkland	Contact Person's Title:	Administrative Assistant
Contact Person's Mailing Address:	PO Box 30030	City:	River Ranch
Contact Person's Telephone Number:	863-692-1321	State:	FL
Contact Person's E-Mail Address:	shelly_kirkland@wgresorts.com	Zip Code:	33867
		Contact Person's Fax Number:	None

## 3. Water Treatment Plant Information

Plant Name:	New River Ranch	Plant Telephone Number:	863-692-2946
Plant Address:	3200 River Ranch Blvd	City:	Lake Wales
		State:	FL
Type of Water Treated by Plant:	Raw ground water	Zip Code:	33967
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	720,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	5	Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Larry Scott	C	8567
Other Operators:	Keith Johnson	C	7451
	William Goodman	D	17443
	Tony Johnson	D	18154
			13/Month

## I. Certification by Lead/Chief Operator

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

Signature and Date: Larry Scott 12-6-16

Larry Scott  
Printed or Typed Name

8567  
License Number

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

PWS Identification Number: 353-1517 Plant Name: New River Ranch

III. Daily Data for the Month/Year of: November-16

Means of Achieving Four-Log Virus Inactivation/Removal:\*

Type of Disinfectant Residual Maintained in Distribution System Mar-16 Free Chlorine

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculation, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*									Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations							UV Dose			
				Peak Flow rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/l	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2		
1		24	150765											
2	x	24	150765									2.0		
3		24	197600											
4	x	24	197600									2.0		
5		24	207033											
6		24	207033											
7	x	24	207033									1.5		
8		24	182600											
9	x	24	182600									0.2		
10		24	175100											
11	x	24	175100									1.0		
12		24	193033											
13		24	193033											
14	x	24	193033									0.5		
15		24	198750											
16	x	24	198750									0.2		
17		24	163150											
18	x	24	163150									0.2		
19		24	187167											
20		24	187167											
21	x	24	187167									3.0		
22		24	314400											
23	x	24	314400									0.8	Cl2 pump #2 #7 stnner tube	
24		24	62500											
25	x	24	62500									0.2	replace rotor assy W/bearing	
26		24	215733											
27		24	215733											
28	x	24	215733									2.0		
29		24	189400											
30	x	24	189400									1.5		
31														
Total			5677428											
Average			183143											
Maximum			314400											

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



DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION  
AND LABORATORY REPORTING FORMAT

Mid Florida Water Lab  
8 Oakwood Road  
Winter Haven, FL 33880  
(863) 965-2540  
LAB I.D. # E84567

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

Analysis Requested: (please check all that apply)

☒ Total Coliform/Fecal ☐ Total Coliform/Fecal Enterococci ☐ Coliform ☐ HPC ☐ Other \_\_\_\_\_

Public Water System Name: **Westgate River Ranch**

PWS ID: **353-1517**

PWS Address: **3200 River Ranch Rd**

City: **River Ranch, FL 33867**

PWS or PWS Owners Phone #: **407-351-3351 ext. 531**

Email Address: **shelly\_kirkland@wqresorts.com**

Collector: **Tony Johnson**

Collector's Phone #: **863-965-1439**

Type System: **Community Water System**

Send Report to: **Polk County Bact. Reports**

Reason for Sampling: ☒ Routine Distribution ☒ Raw (triggered or assessment)

Sample Collection Date: **11-9-16**

Sample Number	Sample Point (Location or Specific Address)	Collection Time	Sample Type	Dist. Res. (mg/L)	pH	Total Coliform	Total Coliform	Enterococci	Data Quarter	Lab Sample Number
A	Raw at well # 1	1330	R	0.74		A	A			014275
B	Raw at well # 2	1333	R	0.74		A	A			014276
D	Apartment # 406	1336	D	.2		A	A			014277
E	Condo # 451	1340	D	.2		A	A			014278

Average of disinfectant residuals for routine and repeat samples.

Free Chlorine \_\_\_\_\_ or Total Chlorine \_\_\_\_\_ (mg/L)

Disinfectant Residual Analysis Method:

☒ DPD Colorimetric ☐ Other \_\_\_\_\_

Person performing disinfectant analysis is:

☒ A. certified operator (# **18154**)

☐ Supervised by a certified operator (# \_\_\_\_\_)

☐ Employed by a certified lab

☐ Employed DEP or FWH

☐ Authorized representative of supplier of water

Unless otherwise noted All tests are performed in accordance with NELAP Standards and the results relate to the samples.

Date and time (UTC) received of positive result: \_\_\_\_\_

Date and time (UTC) received of positive result: \_\_\_\_\_

Date Report issued: \_\_\_\_\_

Lab Signature: **Shelly Kirkland**

Title: **Lab Manager**

Name and Mailing Address of Person to Receive Report

Tri Florida Water Treatment  
226 East Lake Ave  
Auburndale, FL 33823

Lab Facility: \_\_\_\_\_

Lab Facility Collection Information: \_\_\_\_\_

Report Samples Required: \_\_\_\_\_

Repeat Samples Required: \_\_\_\_\_

Date Reviewed by Lab: \_\_\_\_\_

Lab Test Frequency: \_\_\_\_\_

RECEIVED

2016 NOV 10 A 8:13

Analysis Date & Time: **11/10/16 @ 9:30a**

Sample Acceptance Criteria: **63**

Sample Preservation: **8**

Disinfectant Check: **8**

This sample does not meet the following NELAP requirements:

**TEMP GUP FR#2**



Tri - Florida Water Treatment, Inc.  
226 East Lake Avenue  
Auburndale, FL 33823  
(863) 965-1439

Month - Yr. 11-16

Page # 03

# Operation - Maintenance Log

Facility Name New River Ranch PWS No. 653-1517  
Facility Address 2-486661000 Operator T Johnson  
Ending Prev. Mo. Reading 10-31 1-134342400 Certification # 18154

Date	Meter Reading	H <sub>2</sub> O Used - Gal.	CL <sup>2</sup> Pint	CL <sup>2</sup> Rmt	TIME IN	TIME OUT	Signature	CL Add.	Operation, Maint., Performed, Samples Taken, Etc.
1									
2	134615700		35	20	1130	1140	TJ	Ø	486760000
3									
4	134919900		32	20	1053	1103	TJ	Ø	486851000
5									
6									
7	135262000		.6	15	1148	1158	TJ	Ø	487130000
8									
9	135533200		2.5	12	1330	1340	TJ	Ø	487224000
10									
11	135797400		30	10	1057	1107	TJ	Ø	487310000
12									
13									
14	136190500		2.0	.5	1145	1155	TJ	Ø	487496000
15									
16	136420000		2.0	.2	1215	1225	TJ	Ø	487664000
17									
18	136662300		20	.2	1008	1018	TJ	Ø	487748000
19									
20									
21	137076800		38	30	1249	1254	TJ	Ø	487895000
22									
23	137327900		2.0	.8	1201	1211	TJ	Ø	488021000 CL2 pump #2 sterner #7 T45e
24									
25	137569600		1.0	.2	0941	0955	TJ	Ø	488156000 - replace Rotor Assy/Bearings
26									
27									
28	137963800		3.8	20	1127	1157	TJ	Ø	488409000
29									
30	138231600		3.7	1.5	1300	1310	TJ	Ø	488520000
31									

Beginning Next Month Reading \_\_\_\_\_





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

See page 4 for Instructions.

POLK

<b>I. General Information for the Month/Year of:</b>		December-16	
<b>A. Public Water System (PWS) Information</b>			
PWS Name:	New River Ranch & RV Resort 1& 2	PWS Identification Number:	353-1517
PWS Type:	Community		
Number of Service Connections at End of Month:	700	Total Population Served at End of Month:	200
PWS Owner:	River Ranch		
Contact Person:	Shelly Kirkland	Contact Person's Title:	Administrative Assistant
Contact Person's Mailing Address:	PO Box 30030	City:	River Ranch
Contact Person's Telephone Number:	863-692-1321	State:	FL
Contact Person's E-Mail Address:	shelly_kirkland@wgresorts.c	Zip Code:	33867
		Contact Person's Fax Number:	None
<b>B. Water Treatment Plant Information</b>			
Plant Name:	New River Ranch	Plant Telephone Number:	863-692-2946
Plant Address:	3200 River Ranch Blvd	City:	Lake Wales
Type of Water Treated by Plant:	Raw ground water	State:	FL
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	720,000	Zip Code:	33967
Plant Category (per subsection 62-699.310(4), F.A.C.):	5	Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Larry Scott	C	8567
Other Operators:	Keith Johnson	C	7451
	William Goodman	D	17443
	Tony Johnson	D	18154
			13/Month

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

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

*Larry Scott* 1-3-17  
Signature and Date

Larry Scott  
Printed or Typed Name

8567  
License Number

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

PWS Identification Number: 353-1517 Plant Name: New River Ranch

III. Daily Data for the Month/Year of: December-16

Means of Achieving Four-Log Virus Inactivation/Removal:\*

Type of Disinfectant Residual Maintained in Distribution System Mar-16 Free Chlorine

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculation, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*									Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations						UV Dose				
				Peak Flow rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/l	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2		
1		24	193200											
2	x	24	193200										2.0	
3		24	191933											
4		24	191933											
5	x	24	191933										1.8	
6		24	199450											
7	x	24	199450										1.8	
8		24	187250											
9	x	24	187250										1.8	
10		24	165933											
11		24	165933											
12	x	24	165933										0.2	
13		24	187300											
14	x	24	187300										0.8	
15		24	183300											
16	x	24	183300										0.8	
17		24	165633											
18		24	165633											
19	x	24	165633										1.5	
20		24	161500											
21	x	24	161500										2.0	
22		24	143300											
23	x	24	143300										2.0	
24		24	175767											
25		24	175767											
26	x	24	175767										2.3	
27		24	181150											
28	x	24	181150										2.5	
29		24	189400											
30	x	24	189400										2.0	
31		24	17500											
Total			5366998											
Average			173129											
Maximum			199450											

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



DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION  
AND LABORATORY REPORTING FORMAT

Mid Florida Water Lab  
2 Oakwood Road  
Winter Haven, FL 33980  
(863) 936-2640  
LAB I.D. # E94567

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

Analyte Requested: (please check all that apply)

☒ Total Coliform/E. coli ☐ Total Coliform/Fecal ☐ Enterococci ☐ Coliphage ☐ HPC ☐ Other \_\_\_\_\_

Public Water System Name: **Westgate River Ranch**

PWS ID: **353-1517**

PWS Address: **3200 River Ranch Rd**

City: **River Ranch Fl.**

PWS or PWS Owner's Phone #: **407-351-3351 ext. 531**

Fax #: \_\_\_\_\_

Email Address: **chelly.kirland@wresorts.com**

Collector: **Tony Johnson**

Collector's Phone #: **863-885-1430**

Type System: **Community Water System**

Send Report to: **Polk County Bact. Reports**

Reason for Sampling: ☒ Routine Distribution ☒ Raw (triggered or assessment)

Sample Collection Date: **12-12-16**

Sample Number	Sample Point (Location or Specific Address)	Collection Time	Sample Type	Disturb Res'd (mg/L)	pH	Total Coliform Analysis Method	Fecal or E. coli Analysis Method	Lab Sample Number
A	Raw at well #1	1104	R	0.24		A	A	015655
B	Raw at well #2	1107	R	0.24		A	A	015656
G	RV Lot 326	1111	D	.2		A	A	015657
H	RV Lot 574	1114	D	.2		A	A	015658

Average of 0.24 mg/L residuals for routine and repeat samples.  
☒ Free Chlorine or ☐ Total Chlorine (circle one) **1.2**

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

Person performing disinfectant analysis is:  
☒ A certified operator (# **18154**)  
☐ Supervised by a certified operator (# \_\_\_\_\_)  
☐ Employed by a certified lab  
☐ Employed DEP or DOH  
☐ Authorized representative of supplier of water

Unless otherwise noted All tests are performed in accordance with NELAP Standards, and the results relate to the samples

Date and time PWS notified of positive results: \_\_\_\_\_

Date and time DEP/DOH notified of positive results: \_\_\_\_\_

Date Report issued: **12/14/16**

Lab Signature: **[Signature]**

Title: **Lab Manager**

Name and Mailing Address of Person to Receive Report

Tri Florida Water Treatment  
226 East Lake Ave  
Auburndale, FL 33823

DEP/DOH USE ONLY

☐ Satisfactory  
☐ Incomplete Collection Information  
☐ Repeat Samples Required  
☐ Replacement Samples Required

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

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



Tri - Florida Water Treatment, Inc.  
226 East Lake Avenue  
Auburndale, FL 33823  
(863) 965-1439

Month - Yr. 12-16

Page # 04

# Operation - Maintenance Log

Facility Name New River Ranch PWS No. 653-1517  
Facility Address 2-48852000 Operator T Johnson  
Ending Prev. Mo. Reading 11-30 1-138231600 Certification # 18154

Date	Meter Reading	H <sub>2</sub> O Used - Gal.	CL <sup>2</sup> Pint	CL <sup>2</sup> Rmt	TIME IN	TIME OUT	Signature	CL Add.	Operation, Maint., Performed, Samples Taken, Etc.
1									All Adj. CL <sup>2</sup> pumps 7-6
2	138461000		3.8	20	1106	1116	J	Ø	488677000
3									
4									
5	138803800		2.2	1.8	1136	1146	J	Ø	488910000
6									
7	139064700		2.0	18	1155	1205	J	Ø	489048000
8									
9	139305200		3.0	18	1210	1220	J	Ø	489182000
10									
11									
12	139580000		1.5	2	1104	1114	J	Ø	489405000
13									All Adj. CL <sup>2</sup> pumps 6-7
14	139809600		2.0	.8	1140	1150	J	Ø	489550000
15									
16	140023200		2.5	.8	1110	1120	J	Ø	489703000
17									
18									
19	140348100		3.8	1.5	1120	1130	J	Ø	489875000
20									
21	140567100		3.5	2.0	1235	1245	J	Ø	489979000
22									
23	140750700		3.6	2.0	1031	1041	J	Ø	490082000
24									
25									
26	141070000		3.8	2.3	1205	1215	J	Ø	490290000
27									
28	141307300		3.8	2.5	1245	1255	J	Ø	490415000 All
29									CL <sup>2</sup> pumps 7-6
30	141578500		3.8	2.0	1120	1130	J	Ø	490552000
31									

Beginning Next Month Reading \_\_\_\_\_





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

See page 4 for Instructions.

POLK

I. General Information for the Month/Year of:		January-17	
A. Public Water System (PWS) Information			
PWS Name:	New River Ranch & RV Resort 1 & 2	PWS Identification Number:	353-1517
PWS Type:	Community		
Number of Service Connections at End of Month:	700	Total Population Served at End of Month:	200
PWS Owner:	River Ranch		
Contact Person:	Shelly Kirkland	Contact Person's Title:	Administrative Assistant
Contact Person's Mailing Address:	PO Box 30030	City:	River Ranch
Contact Person's Telephone Number:	863-692-1321	State:	FL
Contact Person's E-Mail Address:	shelly_kirkland@wgresorts.com	Zip Code:	33867
Contact Person's Fax Number:	None		
B. Water Treatment Plant Information			
Plant Name:	New River Ranch	Plant Telephone Number:	863-692-2946
Plant Address:	3200 River Ranch Blvd	City:	Lake Wales
Type of Water Treated by Plant:	Raw ground water	State:	FL
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	720,000	Zip Code:	33967
Plant Category (per subsection 62-699.310(4), F.A.C.):	5	Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Larry Scott	C	8567
Other Operators:	Keith Johnson	C	7451
	William Goodman	D	17443
	Tony Johnson	D	18154
			13/Month

## II. Certification by Lead/Chief Operator

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

*Larry Scott* 2-2-17  
Signature and Date

Larry Scott  
Printed or Typed Name

8567  
License Number

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

PWS Identification Number: 353-1517 Plant Name: New River Ranch

III. Daily Data for the Month/Year of: January-17

Means of Achieving Four-Log Virus Inactivation/Removal:\*

Type of Disinfectant Residual Maintained in Distribution System Mar-16 Free Chlorine

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculation, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations							UV Dose				
				Peak Flow rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/l	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2			
1		24	177667												
2	x	24	177667										1.5		
3		24	200800												
4	x	24	200800										1.5		
5		24	173050												
6	x	24	173050										1.6		
7		24	167967												
8		24	167967												
9	x	24	167967										1.5		
10		24	184100												
11	x	24	184100										0.5		
12		24	187100												
13	x	24	187100										1.8		
14		24	167800												
15		24	167800												
16	x	24	167800										2.0		
17		24	211250												
18	x	24	211250										2.0		
19		24	162700												
20	x	24	162700										0.4		
21		24	164933												
22		24	164933												
23	x	24	164933										0.5		
24		24	194200												
25	x	24	194200										0.2		
26		24	144350												
27	x	24	144350										0.2	2- #7 stenner tube, 2-duckbills	
28		24	189400												
29		24	189400												
30	x	24	189400										0.2		
31		24	17500												
Total			5358234												
Average			172846												
Maximum			211250												

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



DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION  
AND LABORATORY REPORTING FORMAT

Mid Florida Water Lab  
8 Oakwood Road  
Winter Haven, FL 33880  
(888) 885-2540  
LAB I.D. # 884567

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

Analyte Requested: (please check all that apply)

☒ Total Coliform/E. coli ☐ Total Coliform/Fecal ☐ Enterococci ☐ Coliphage ☐ HPC ☐ Other: \_\_\_\_\_

Public Water System Name: **Westgate River Ranch**

PWS ID: **353-1517**

PWS Address: **3200 River Ranch Rd**

City: **River Ranch, FL 33887**

PWS or PWS Owner's Phone #: **407-351-3351 ext. 531**

Fax #: \_\_\_\_\_

Email Address: **shelly.kirkland@wvresorts.com**

Collector: **Joey Johnson**

Collector's Phone #: **888-885-1430**

Type System: **Community Water System**

Send Report to: **Polk County Elect. Reports**

Reason for Sampling: ☒ Routine Distribution ☒ Raw (triggered or assessment)

Sample Collection Date: **1-9-17**

Lab Receipt Date & Time:

*C*

2017 JAN 10 A 9:14

Analysis Date & Time: **1/10/17 9:40am**

Sample Acceptance Criteria:

Sample Preservation ☒ On Ice ☐ Not On Ice **7.1** °C

Disinfectant Check: ☒ Not Detected **mg/L**

This sample does not meet the following NELAP requirements:

**100% Coliform 1.5**

Sample Number	Sample Point (Location or Specific Address)	Collection Time	Sample Type <sup>1</sup>	Disinfectant Res'd (mg/L)	pH	Total Coliform Analysis Method: SM222B	E. coli Analysis Method: SM222G-EC	Lab Sample Number	
						Non Coliform	Total Coliform	E. coli	Data Qualifier <sup>2</sup>
A	Raw at well #1	1130	R	0.74		A	A		
B	Raw at well #2	1133	R	0.74		A	A		
C	Ledge	1136	D	1.5		A	A		
D	Metal	1140	D	1.5		A	A		

Average of disinfectant residuals for routine and repeat samples: **1.5**  
Free Chlorine or Total Chlorine (circle one)

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

Person performing disinfectant analysis to:  
☒ A certified operator (# **18154**)  
☐ Supervised by a certified operator (# \_\_\_\_\_)  
☐ Employed by a certified lab  
☐ Employed DEP or DOH  
☐ Authorized representative of supplier of water

Unless otherwise noted all tests are performed in accordance with NELAP Standards, and the results relate to the samples.

Date and time PWS notified of positive results: \_\_\_\_\_

Date and time DEP/DOH notified of positive results: \_\_\_\_\_

Date Report issued: **1/10/17**

Lab Signature: **Shelly Kirkland**

Title: **Lab Manager**

Name and Mailing Address of Person to Receive Report

**Tri Florida Water Treatment**  
**226 East Lake Ave**  
**Auburndale, FL 33823**

DEP/DOH USE ONLY

☐ Satisfactory  
☐ Incomplete Collection Information  
☐ Repeat Samples Required  
☐ Replacement Samples Required

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

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



Tri - Florida Water Treatment, Inc.  
226 East Lake Avenue  
Auburndale, FL 33823  
(863) 965-1439

Month - Yr. 1-17

Page # 05

# Operation - Maintenance Log

Facility Name New River Ranch PWS No. 653-1517  
Facility Address 2-190552000 Operator T. Johnson  
Ending Prev. Mo. Reading 12-30 1-141578500 Certification # 18154

Date	Meter Reading	H <sub>2</sub> O Used - Gal.	CL <sup>2</sup> Pint	CL <sup>2</sup> Rmt	TIME		Signature	CL Add.	Operation, Maint., Performed, Samples Taken, Etc.
					IN	OUT			
1									
2	141921500		3.6	1.5	1138	1148	29	Ø	490742000
3									
4	142233100		38	1.5	1213	1223	29	Ø	490832000
5									
6	142463200		30	1.6	0950	1000	29	Ø	490948000
7									
8									
9	142795100		35	1.5	1130	1140	29	Ø	491120000
10									
11	143079300		38	.5	1250	1300	29	Ø	491204000
12									
13	143298500		30	1.8	1136	1146	29	Ø	491359000
14									
15									
16	143644900		2.8	2.0	1058	1108	29	Ø	491516000
17									
18	143919400		2.5	2.0	1215	1225	29	Ø	491664000
19									
20	144133800		3.2	.4	1039	1049	29	Ø	491775000
21									
22									
23	144472600		2.5	.5	1240	1250	29	Ø	491931000
24									
25	144705000		.4	.2	1235	1245	29	Ø	492087000
26									CL pump, 243
27	144895700		1.4	.2	1112	1122	29	Ø	2-sterner 7 Tube
28									2-DuckBills
29									
30	145241800		2.2	.2	1400	1410	29	Ø	492334000
31									

Beginning Next Month Reading \_\_\_\_\_





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

See page 4 for Instructions.

POLK

I. General Information for the Month/Year of: February-17

A. Public Water System (PWS) Information

PWS Name:	New River Ranch & RV Resort 1& 2	PWS Identification Number:	353-1517
PWS Type:	Community		
Number of Service Connections at End of Month:	700	Total Population Served at End of Month:	200
PWS Owner:	River Ranch		
Contact Person:	Shelly Kirkland	Contact Person's Title:	Administrative Assistant
Contact Person's Mailing Address:	PO Box 30030	City:	River Ranch State: FL Zip Code: 33867
Contact Person's Telephone Number:	863-692-1321	Contact Person's Fax Number:	None
Contact Person's E-Mail Address:	shelly_kirkland@wqresorts.com		

B. Water Treatment Plant Information

Plant Name:	New River Ranch	Plant Telephone Number:	863-692-2946	
Plant Address:	3200 River Ranch Blvd	City:	Lake Wales State: FL Zip Code: 33967	
Type of Water Treated by Plant:	Raw ground water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	720,000			
Plant Category (per subsection 62-699.310(4), F.A.C.):	5	Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Larry Scott	C	8567	3/Month
Other Operators:	Keith Johnson	C	7451	3/Month
	William Goodman	D	17443	
	Tony Johnson	D	18154	2/Month
	Ben Carlton	D	24188	4/Month

II. Certification by Lead/Chief Operator

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

Signature and Date: Larry Scott 3-6-17

Printed or Typed Name: Larry Scott

License Number: 8567

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

PWS Identification Number: 353-1517 Plant Name: New River Ranch

III. Daily Data for the Month/Year of: February-17

Means of Achieving Four-Log Virus Inactivation/Removal:\*

Type of Disinfectant Residual Maintained in Distribution System Mar-16 Free Chlorine

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculation, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations							UV Dose				
				Peak Flow rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/l	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2			
1	x	24	159950										0.2		
2		24	192700												
3	x	24	192700										2.0		
4		24	168100												
5		24	168100												
6	x	24	168100										2.0		
7		24	160300												
8	x	24	160300										0.2		
9		24	165050												
10	x	24	165050										0.2		
11		24	199533												
12		24	199533												
13	x	24	199533										0.5		
14		24	200500												
15	x	24	200500										0.5		
16		24	163100												
17	x	24	163100										0.2		
18		24	213333												
19		24	213333												
20	x	24	213333										1.0		
21		24	215850												
22	x	24	215850										0.2		
23		24	180600												
24	x	24	180600										0.2		
25		24	181267												
26		24	181267												
27	x	24	181267										0.2	2 duckbills	
28		24	189400												
29															
30															
31															
Total			5192249												
Average			167492												
Maximum			215850												

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



DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION  
AND LABORATORY REPORTING FORMAT

Mid Florida Water Lab  
8 Oakwood Road  
Winter Haven, FL 33880  
(888) 886-2540  
LAB I.D. # E04667

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

Analysis Requested: (please check all that apply)

☒ Total Coliform/E. coli ☐ Total Coliform/Fecal ☐ Enterococci ☐ Coliphage ☐ HPC ☐ Other \_\_\_\_\_

Public Water System Name: **Westgate River Ranch**

PWS ID: **353-1517**

PWS Address: **3200 River Ranch Rd**

City: **River Ranch, FL 33667**

PWS or PWS Owner's Phone #: **407-351-3351 ext. 531**

Fax #: \_\_\_\_\_

Email Address: **shelly\_kirland@wvresorts.com**

Collector: **Tony Jackson**

Collector's Phone #: **863-965-1438**

Type System: **Community Water System**

Send Report to: **Polk County Hlth. Reports**

Reason for Sampling: ☒ Routine Distribution ☒ Raw (triggered or assessment)

Sample Collection Date: **2-15-17**

Sample Water	Sample Point (Location or Specific Address)	Collection Time	Sample Type	Disinfect Resid (mg/L)	pH	Total Coliform Analysis Method				Lab Sample Number
						Non- Coliform	Total Coliform	Fecal or E. coli	Data Qualifier	
A	Raw at well #1	0900	R	0.74		A	A			002101
B	Raw at well #2	0903	R	0.74		A	A			002102
D	Apartment #406	0906	D	.5		A	A			002103
E	Condo #451	0909	D	.5		A	A			002104

Average of disinfectant residuals for routine and repeat samples.

☒ Free Chlorine ☐ or ☐ Total chlorine (circle one) **.5**

Disinfectant Residual Analysis Method:

☒ DPD Colorimetric ☐ Other: \_\_\_\_\_

Person performing disinfectant analysis is:

☒ A certified operator (ID: **18154**)  
☐ Supervised by a certified operator (ID: \_\_\_\_\_)  
☐ Employed by a certified lab  
☐ Employed DEP or DOH  
☐ Authorized representative of supplier of water

Unless otherwise noted All tests are performed in accordance with  
NEMAS Standards, and the results relate to the samples.

Date and time PWS notified of positive results: \_\_\_\_\_

Date and time DEP/DOH notified of positive results: \_\_\_\_\_

Date Report issued: **2/17/17**

Lab Signature: **Shelly Kirland**

Title: **Lab Manager**

Name and Mailing Address of Person to Receive Report

Tri Florida Water Treatment  
226 East Lake Ave  
Auburndale, FL 33823

☐ Satisfactory  
☐ Incomplete Collection Information  
☐ Repeat Sampling Required  
☐ Replacement Samples Required

DEP/DOH USE ONLY

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

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



Month - Yr. 2-17

Page # 06

## Operation - Maintenance Log

Facility Name New River Ranch  
Facility Address 2-492334000  
Ending Prev. Mo. Reading 1-30 1-145241800

PWS No. 653-1517  
Operator T. Johnson  
Certification # 18154

Date	Meter Reading	H <sub>2</sub> O Used - Gal.	CL <sup>2</sup> Pint	CL <sup>2</sup> Rmt	TIME IN	TIME OUT	Signature	CL Add.	Operation, Maint., Performed, Samples Taken, Etc.
1	145480700	700	2.0	.2	1210	1220	J	Ø	492415000
2									
3	145701100		3.8	20	1130	1140	J	Ø	492580000
4									
5									
6	145964400		3.7	20	1313	1323	J	Ø	492821000
7									
8	146201000		.4	.2	1217	1227	KJ	Ø	492905000
9									
10	146397100		.4	.2	1028	1038	KJ	Ø	493039000
11									
12									
14	146726700		1.0	.5	1200	1210	J LWS	Ø	493308000
15	146958700		18	.5	1338	1348	J LWS	Ø	493471000
16									
17	147117900		20	.2	1252	1302	J LWS	Ø	493586000
18									
19									
20	147520900		1.5	1.0	11:18	11:28	BC	Ø	493831000
21									
22	147848600		0.4	0.2	11:30	11:40	BC	Ø	493985000
23									
24	148132800		2.0	0.2	10:51	11:01	BC	Ø	494062000
25									
26									
27	148490600		0.4	0.2	10:53	11:03	BC	Ø	494248000
28									2 Duckbills 4P
29									
31									

Beginning Next Month Reading \_\_\_\_\_





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

See page 4 for Instructions.

POLK

<b>I. General Information for the Month/Year of:</b>		March-17	
<b>A. Public Water System (PWS) Information</b>			
PWS Name:	New River Ranch & RV Resort 1& 2	PWS Identification Number:	353-1517
PWS Type:	Community		
Number of Service Connections at End of Month:	700	Total Population Served at End of Month:	200
PWS Owner:	River Ranch		
Contact Person:	Shelly Kirkland	Contact Person's Title:	Administrative Assistant
Contact Person's Mailing Address:	PO Box 30030	City:	River Ranch
Contact Person's Telephone Number:	863-692-1321	State:	FL
Contact Person's E-Mail Address:	shelly_kirkland@wgresorts.co	Zip Code:	33867
		Contact Person's Fax Number:	None
<b>B. Water Treatment Plant Information</b>			
Plant Name:	New River Ranch	Plant Telephone Number:	863-692-2946
Plant Address:	3200 River Ranch Blvd	City:	Lake Wales
Type of Water Treated by Plant:	Raw ground water	State:	FL
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	720,000	Zip Code:	33967
Plant Category (per subsection 62-699.310(4), F.A.C.):	5	Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Larry Scott	C	8567
Other Operators:	Keith Johnson	C	7451
	William Goodman	D	17443
	Tony Johnson	D	18154
	Ben Carlton	D	24188
			13/Month
<b>II. Certification by Lead/Chief Operator</b>			

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

Signature and Date  
*Larry Scott* 4-6-17

Larry Scott  
Printed or Typed Name

8567  
License Number

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

PWS Identification Number: 353-1517 Plant Name: New River Ranch

III. Daily Data for the Month/Year of: March-17

Means of Achieving Four-Log Virus Inactivation/Removal:\*

Type of Disinfectant Residual Maintained in Distribution System Mar-16 Free Chlorine

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculation, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations							UV Dose				
				Peak Flow rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/l	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2			
1	x	24	202100										0.2		
2		24	193200												
3	x	24	193200										0.2		
4		24	202400												
5		24	202400												
6	x	24	202400										1.0		
7		24	246100												
8	x	24	246100										1.0		
9		24	238100												
10	x	24	238100										0.4		
11		24	220433												
12		24	220433												
13	x	24	220433										0.2		
14		24	214050												
15	x	24	214050										0.4		
16		24	197850												
17	x	24	197850										0.3		
18		24	204000												
19		24	204000												
20	x	24	204000										0.2		
21		24	241200												
22	x	24	241200										2.0		
23		24	217750												
24	x	24	217750										1.2		
25		24	220967												
26		24	220967												
27	x	24	220967										1.0		
28		24	249950												
29	x	24	249950										1.8		
30		24	259200												
31	x	24	259200										1.6		
Total			6860300												
Average			221300												
Maximum			259200												

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



DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION  
AND LABORATORY REPORTING FORMAT

Mid Florida Water Lab  
8 Oakwood Road  
Winter Haven, FL 33880  
(863) 965-2540  
LAB I.D. # E84567

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

Analysis Requested: (please check all that apply)

☒ Total Coliform/E. coli \_\_\_\_\_ Total Coliform/Fecal \_\_\_\_\_ Enterococci \_\_\_\_\_ Coliphage \_\_\_\_\_ HPC \_\_\_\_\_ Other \_\_\_\_\_

Public Water System Name: **Westgate River Ranch**

PWS Address: **3200 River Ranch Rd**

PWS or PWS Owner's Phone #: **407-351-3351 ext. 531**

Collector: **Tony Johnson**

Type System: **Community Water System**

Reason for Sampling: ☒ Routine Distribution ☒ Raw (triggered or assessment)

Sample Collection Date: **3-6-17**

Lab Receipt Date & Time

Analysis Date & Time: **3/7/17 9:40am**  
Sample Acceptance Criteria:  
Sample Preservation: ☒ On Ice ☐ Not On Ice **6.0** °C  
Disinfectant Check: ☒ Not Detected \_\_\_\_\_ mg/L  
This sample does not meet the following NELAC requirements:  
**Temp 60h TR2**

Sample Number	Sample Point (Location or Specific Address)	Collection Time	Sample Type <sup>1</sup>	Disinfect Res'd (mg/L)	pH	Total Coliform Analysis Method SM9222B				Lab Sample Number
						Non Coliform	Total Coliform	Fecal or E. coli	Data Qualifier <sup>2</sup>	
A	Raw at well #1	1138	R	0.4		A	A			002836
B	Raw at well #2	1141	R	0.4		A	A			002837
G	RV Lot 326	1145	D	.8		A	A			002838
H	RV Lot 574	1148	D	.8		A	A			002839

Average of disinfectant residuals for routine and repeat samples.

☒ Free Chlorine or ☐ Total chlorine (circle one) **.8**

Disinfectant Residual Analysis Method:

☒ DPD Colorimetric ☐ Other: \_\_\_\_\_

Person performing disinfectant analysis is:

☒ A certified operator (# \_\_\_\_\_)  
☐ Supervised by a certified operator (# \_\_\_\_\_)  
☐ Employed by a certified lab  
☐ Employed DEP or DOH  
☐ Authorized representative of supplier of water

Unless otherwise noted All tests are performed in accordance with  
NELAC Standards, and the results relate to the samples

Date and time FWS notified of positive results: \_\_\_\_\_

Date and time DEP/DOH notified of positive results: \_\_\_\_\_

Date Report Issued: **3/8/17**

Lab Signature: **[Signature]**

Title: **Lab Manager**

Name and Mailing Address of Person to Receive Report

Tri Florida Water Treatment  
226 East Lake Ave  
Auburndale, FL 33823

☐ Satisfactory  
☐ Incomplete Collection Information  
☐ Repeat Samples Required  
☐ Replacement Samples Required

DEP/DOH USE ONLY

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

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

<sup>1</sup>DEP Sample Type Codes: D=Distribution (Routine Compliance); C=Reset of Check; R=Raw; N=Entry to Distribution; P=Plant Tap; S=Special (clearance, etc.)

Analysis Methods: MF = SM9222B & D; MTF = 9221B & C/MUG; MMD/MUG = SM9223B; HPC = SM9215B

Results: A = coliforms are absent; P = coliforms are present; C = confluent growth; TNTC = too numerous to count

Month - Yr. 3/17

Page # 07

# Operation - Maintenance Log

Facility Name New River Ranch

PWS No. 653-1517

Facility Address 1-142490600

Operator Ben Canton

Ending Prev. Mo. Reading 2/22 2-49428000

Certification # 24188

Date	Meter Reading	H <sub>2</sub> O Used - Gal.	CL <sup>2</sup> Pint	CL <sup>2</sup> Rmt	TIME IN	TIME OUT	Signature	CL Add.	Operation, Maint., Performed, Samples Taken, Etc.
1	148793800		1.5	0.2	11:40	11:50	BC	0	494381000
2									
3	148998200		2.0	0.2	11:22	11:32	BC	0	494563000
4									
5									
6	149344400		1.4	1.0	11:39	11:49	BC	0	494824000
7									
8	149626600		1.5	1.0	12:21	12:31	BC	0	494984000
9									
10	149957800		1.5	0.4	12:13	12:23	BC	0	495179000
11									
12									
13	150327100		1.0	0.2	1:48	1:58	BC	0	495471000
14									
15	150543200		0.6	0.4	2:40	2:50	BC	0	495683000
16									
17	150714900		0.5	0.3	1:50	2:00	BC	0	495907000
18									
19									
20	151069900		0.4	0.2	1:42	1:52	BC	0	496164000
21									Adjustable CL <sub>2</sub> pumps to 26 ft
22	151408300		3.0	2.0	2:42	2:52	BC	0	496308000
23									
24	151615800		1.8	1.2	1:44	1:54	BC	0	496536000
25									
26									
27	152028700		2.0	1.0	12:45	12:55	29 LWS	0	496786000
28									
29	152368600		2.0	1.8	1:39	1:49	BC	0	496946000
30									
31	152692000		1.8	1.6	2:42	2:52	BC	0	497141000

Beginning Next Month Reading \_\_\_\_\_





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

See page 4 for Instructions.

POLK

## I. General Information for the Month/Year of:

April-17

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

PWS Name:	New River Ranch & RV Resort 1& 2	PWS Identification Number:	353-1517
PWS Type:	Community		
Number of Service Connections at End of Month:	700	Total Population Served at End of Month:	200
PWS Owner:	River Ranch		
Contact Person:	Shelly Kirkland	Contact Person's Title:	Administrative Assistant
Contact Person's Mailing Address:	PO Box 30030	City:	River Ranch
		State:	FL
		Zip Code:	33867
Contact Person's Telephone Number:	863-692-1321	Contact Person's Fax Number:	None
Contact Person's E-Mail Address:	shelly_kirkland@wgresorts.c		

### B. Water Treatment Plant Information

Plant Name:	New River Ranch	Plant Telephone Number:	863-692-2946
Plant Address:	3200 River Ranch Blvd	City:	Lake Wales
		State:	FL
		Zip Code:	33967
Type of Water Treated by Plant:	Raw ground water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	720,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	5	Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Larry Scott	C	8567
Other Operators:	Keith Johnson	C	7451
	William Goodman	D	17443
	Tony Johnson	D	18154
	Ben Carlton	D	24188
			12/Month

## II. Certification by Lead/Chief Operator

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

*Larry Scott* 5-4-17  
Signature and Date

Larry Scott  
Printed or Typed Name

8567  
License Number

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

PWS Identification Number: 353-1517 Plant Name: New River Ranch

## III. Daily Data for the Month/Year of: April-17

Means of Achieving Four-Log Virus Inactivation/Removal:\*

Type of Disinfectant Residual Maintained in Distribution System Mar-16 Free Chlorine

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculation, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations								UV Dose			
				Peak Flow rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/l	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/l	Temp. of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2			
1		24	188250												
2	x	24	188250										2.0		
3		24	301133												
4		24	301133												
5	x	24	301133										0.8		
6		24	175500												
7	x	24	175500										2.2		
8		24	210867												
9		24	210867												
10	x	24	210867										2.8		
11		24	237650												
12	x	24	237650										3.0		
13		24	206050												
14	x	24	206050										2.8		
15		24	218100												
16		24	218100												
17	x	24	218100										1.5		
18		24	221200												
19	x	24	221200										1.0	New index plate; variable cam	
20		24	198700												
21	x	24	198700										0.8	New index plate; variable cam	
22		24	207067												
23		24	207067												
24	x	24	207067										1.5		
25		24	209700												
26	x	24	209700										1.4	Vacuum breaker in restaurant	
27		24	237550												
28	x	24	237550										1.0		
29		24	237550												
30		24	237550												
Total			6635801												
Average			221193												
Maximum			301133												

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



Month - Yr. 4/17

Page # 08

## Operation - Maintenance Log

Facility Name New River Ranch PWS No. 653-1517  
Facility Address 1-152692000 Operator Ben Carlton  
Ending Prev. Mo. Reading 3/31/2017-2-497141000 Certification # 24188

Date	Meter Reading	H <sub>2</sub> O Used - Gal.	CL <sup>2</sup> Pint	CL <sup>2</sup> Rmt	TIME IN	TIME OUT	Signature	CL Add.	Operation, Maint., Performed, Samples Taken, Etc.
1									
2	152998500		30	20	10:41	10:51	BC	0	497211000
3									
4									
5	153527900		30	08	3:12	3:22	BC	0	497585000
6									
7	153773900		35	22	11:45	11:55	BC	0	497690000
8									CL2 pumps to 6.5 from 6.5
9									
10	154160500		35	28	2:16	2:26	BC	0	497936000
11									
12	154431800		34	30	2:55	3:05	BC	0	498140000
13									CL2 pumps to 6.25 from 6.5
14	154686900		30	28	10:55	11:05	BC	0	498297000
15									
16									
17	155111200		18	1.5	2:35	2:45	BC	0	498527000
18									
19	155379600		15	1.0	3:32	3:42	BC	0	498701000
20									NEW 2nd Pump 1.5 from 1.0
21	155633000		10	08	12:15	12:25	BC	0	498845000
22									CL2 pumps to 6.5 from 6.25
23									CL2 pump 2.1 - NEW 2nd Pump 1.5 from 1.0
24	15635200		1.8	1.5	2:41	2:51	BC	0	499064000
25									
26	156310600		1.6	1.4	2:57	3:07	BC	0	499208000 - 1st pump 2nd pump
27									CL2 pump to 6.75 from 6.5
28	156614700		2.8	1.0	12:59	1:09	BC	0	<del>499411379000</del>
29									CL2 pumps to 6.5 from 6.25
30									6.75
31									

Beginning Next Month Reading \_\_\_\_\_



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

See page 4 for Instructions.

POLK

## I. General Information for the Month/Year of: May-17

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

PWS Name:	Westgate River Ranch & RV Resort 1& 2	PWS Identification Number:	353-1517
PWS Type:	Community		
Number of Service Connections at End of Month:	700	Total Population Served at End of Month:	200
PWS Owner:	River Ranch		
Contact Person:	Shelly Kirkland	Contact Person's Title:	Administrative Assistant
Contact Person's Mailing Address:	P.O. Box 30030	City:	River Ranch
		State:	FL
		Zip Code:	33867
Contact Person's Telephone Number:	863-692-1321	Contact Person's Fax Number:	
Contact Person's E-Mail Address:	shelly_kirkland@wgresorts.com		

### B. Water Treatment Plant Information

Plant Name:	Westgate River Ranch	Plant Telephone Number:	863-692-2946
Plant Address:	3200 River Ranch Blvd	City:	Lake Wales
		State:	FL
		Zip Code:	33967
Type of Water Treated by Plant:	Raw Ground Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	720,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	5	Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Larry Scott	C	8567
Other Operators:	Tony Johnson	D	18154
	Keith Johnson	C	7451
	William Goodman	D	17443
	Ben Carlton	D	24188
			12/Month

## II. Certification by Lead/Chief Operator

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

Signature and Date: Larry Scott 6-6-17

Larry Scott  
Printed or Typed

8567  
License Number



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

PWS Identification Number: 353-1517 Plant Name: New River Ranch

III. Daily Data for the Month/Year of: May-17

Means of Achieving Four-Log Virus Inactivation/Removal:\*

Type of Disinfectant Residual Maintained in Distribution System Mar-16 Free Chlorine

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculation, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations								UV Dose			
				Peak Flow rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/l	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/l.	Temp. of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2			
1		24	202725												
2	x	24	202725										0.5		
3		24	194650												
4	x	24	194650										0.4		
5		24	166200												
6	x	24	166200										1.5		
7		24	181833												
8		24	181833												
9	x	24	181833										0.2	System repairs complete; system restarting during visit	
10		24	297950										0.2	Duckbills - pumps 2A, 1A,1B	
11	x	24	297950												
12		24	189550												
13	x	24	189550										3.0		
14		24	235725												
15		24	235725											Hwy 60 blocked/closed @ hwy 630	
16		24	235725												
17	x	24	235725										2.0		
18		24	273100												
19	x	24	273100										2.2		
20		24	208467												
21		24	208467												
22	x	24	208467										2.0		
23		24	270400												
24	x	24	270400										0.6		
25		24	140750												
26	x	24	140750										0.4		
27		24	232175												
28		24	232175												
29		24	232175												
30	x	24	232175										0.2		
31		24	232175												
Total			6513150												
Average			217105												
Maximum			297950												

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



Tri - Florida Water Treatment, Inc.  
226 East Lake Avenue  
Auburndale, FL 33823  
(863) 965-1439

Month - Yr. 5/17

Page # 09

# Operation - Maintenance Log

Facility Name New River Ranch PWS No. 653-1517

Facility Address 1-156614700 Operator Ben Cullen

Ending Prev. Mo. Reading 4/27/2017 - 2-419379000 Certification # 24188

Date	Meter Reading	H <sub>2</sub> O Used - Gal.	CL <sup>2</sup> Pint	CL <sup>2</sup> Rmt	TIME IN	TIME OUT	Signature	CL Add.	Operation, Maint., Performed, Samples Taken, Etc.
1									
2	157084600		20	05	3:05	3:15	BC	✓	499720000
3									
4	157354900		18	04	3:25	3:35	BC	✓	499839000
5									
6	157607300		20	15	1:28	1:38	BC		499419000
7									
8	157928800								
9	15798		10	02	11:45	11:55	BC	✓	500143000
10									System repairs complete system to be shut down until
11	158169700		08	02	2:58	3:08	BC	✓	500498000 - Pump 3 Pump 2 11/11
12									CL2 pumps to 7 from 65
13	158411800		34	30	1:15	1:25	BC	✓	500635000
14									CL2 pumps to 65 from 7
15		HWY 60 BLOCKED/CLOSED @ HWY 630 JCT							
16									CL2 pumps to 64 from 65
17	158960700		32	20	3:15	3:25	BC	✓	501029000
18									
19	159296900		33	22	2:16	2:26	BC	✓	501239000
20									CL2 pumps to 625 from 64
21									
22	159707300		26	20	12:52	1:02	BC	✓	501454000
23									
24	159993100		1.1	0.6	3:52	4:02	BC	✓	501709000
25									CL2 pumps to 6.5 from 625
26	160222600		3.2	0.4	12:35	12:45	BC	✓	501761000
27									CL2 pumps to 6 from 65
28									
29									
30	160723300		1.4	0.2	2:45	2:55	BC	✓	502189000
31									

Beginning Next Month Reading \_\_\_\_\_



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

Mid Florida Water Lab  
8 Oakwood Road  
Winter Haven, FL 33880  
(863) 965-2640  
LAB I.D. # EB4567

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

Analysis Requested: (please check all that apply)

☒ Total Coliforms/E. coli ☐ Total Coliform/Fecal ☐ Enterococci ☐ Coliphage ☐ HPC ☐ Other: \_\_\_\_\_

Public Water System Name: **Westgate River Ranch**

PWS ID: **353-1517**

PWS Address: **3200 River Ranch Rd**

City: **River Ranch FL**

PWS or PWS Owner's Phone #: **407-351-3351 ext. 531**

Fax #: \_\_\_\_\_

Email Address: **phelly.kirkland@regreos.com**

Collector: **Ben C. Hall**

Collector's Phone: **863-865-1439**

Type System: **Community Water System**

Send Report to: **Polk County Bact. Reports**

Reason for Sampling: ☒ Routine Distribution ☒ Raw (triggered or assessment)

Sample Collection Date: **6/26/2017**

Sample Number	Sample Point (Location or Specific Address)	Collection Time	Sample Type	Disinfected Res'd (mg/L)	pH	Total Coliform Analysis Method: SM 9222B				Lab Sample Number
						Non Coliform	Total Coliform	Fecal or E. coli	Data Qualifier	
A	Raw at well #1	14:36	R	0			A	A		007668
B	Raw at well #2	14:40	R	0			A	A		007669
G	RV Lot 325	14:45	D	0.2			A	A		007670
H	RV Lot 574	14:50	D	0.2			A	A		007671

Average of disinfectant residuals for routine and repeat samples.

☒ Free Chlorine or ☐ Total chlorine (circle one) **0.2**

Disinfectant Residual Analysis Method:

☒ DPD Colorimetric ☐ Other: \_\_\_\_\_

Person performing disinfectant analysis is:

☒ A certified operator (P# **24188**)  
☐ Supervised by a certified operator (P# \_\_\_\_\_)  
☐ Employed by a certified lab  
☐ Employed DEP or DOH  
☐ Authorized representative of supplier of water

Unless otherwise noted All tests are performed in accordance with NELAP Standards, and the results relate to the samples.

Date and time PWS notified of positive results: \_\_\_\_\_

Date and time DEP/DOH notified of positive results: \_\_\_\_\_

Date Report issued: **6/28/17**

Lab Signature: **[Signature]**

Title: **Lab Manager**

Name and Mailing Address of Person to Receive Report

Tri Florida Water Treatment  
228 East Lake Ave  
Auburndale, FL 33823

☐ Satisfactory  
☐ Incomplete Collection Information  
☐ Repeat Samples Required  
☐ Replacement Samples Required

DEP/DOH USE ONLY

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

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



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

See page 4 for Instructions.

POLK

**I. General Information for the Month/Year of:** June-17

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

PWS Name:	Westgate River Ranch & RV Resort 1& 2	PWS Identification Number:	353-1517
PWS Type:	Community		
Number of Service Connections at End of Month:	700	Total Population Served at End of Month:	200
PWS Owner:	River Ranch		
Contact Person:	Shelly Kirkland	Contact Person's Title:	Administrative Assistant
Contact Person's Mailing Address:	P.O. Box 30030	City:	River Ranch State: FL Zip Code: 33867
Contact Person's Telephone Number:	863-692-1321	Contact Person's Fax Number:	
Contact Person's E-Mail Address:	shelly_kirkland@wgresorts.com		

**B. Water Treatment Plant Information**

Plant Name:	Westgate River Ranch	Plant Telephone Number:	863-692-2946
Plant Address:	3200 River Ranch Blvd	City:	Lake Wales State: FL Zip Code: 33967
Type of Water Treated by Plant:	Raw Ground Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	720,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	5	Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Larry Scott	C	8567
Other Operators:	Tony Johnson	D	18154
	Keith Johnson	C	7451
	William Goodman	D	17443
	Ben Carlton	D	24188
			13/Month

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

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

Signature and Date  
*Larry Scott* 7-7-17

Larry Scott  
Printed or Typed Name

8567  
License Number



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

PWS Identification Number: 353-1517 Plant Name: New River Ranch

III. Daily Data for the Month/Year of: June-17

Means of Achieving Four-Log Virus Inactivation/Removal:\*

Type of Disinfectant Residual Maintained in Distribution System Mar-16 Free Chlorine

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculation, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations							UV Dose				
				Peak Flow rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/l	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2			
1	x	24	194500										0.2		
2		24	152275												
3		24	152275												
4		24	152275												
5	x	24	152275										0.2		
6		24	158600												
7	x	24	158600										0.4		
8		24	152850												
9	x	24	152850										0.2		
10		24	158467												
11		24	158467												
12	x	24	158467										0.2	3 duckbills; 4' of 1/4" pickup tubing & 30' of 1/4" discharge tubing (1B)	
13		24	172900												
14	x	24	172900										0.2	Duckbill; compression nut	
15		24	150600												
16	x	24	150600										0.2	Duckbill - bad unit	
17		24	120200												
18		24	120200												
19	x	24	120200										0.3	30' 1/4" discharge tubing (2A)	
20		24	114400												
21	x	24	114400										0.2	Duckbill - bad unit	
22		24	139150												
23	x	24	139150										0.3		
24		24	138867												
25		24	138867												
26	x	24	138867										0.2		
27		24	130000												
28	x	24	130000										0.2	2 duckbills	
29		24	142050												
30	x	24	142050										0.2		
Total			4377302												
Average			145910												
Maximum			194500												

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

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

Mid Florida Water Lab  
8 Oakwood Road  
Winter Haven, FL 33880  
(863) 965-2540  
LAB I.D. # EB4557

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

Analysis Requested: (please check all that apply)

☒ Total Coliform/E. coli ☐ Total Coliform/Fecal ☐ Enterococci ☐ Coliphage ☐ HPC ☐ Other: \_\_\_\_\_

Public Water System Name: **Westgate River Ranch**

PWS Address: **3200 River Ranch Rd**

PWS or PWS Owner's Phone #: **407-351-3351 ext. 531**

Collector: **Ben C. N. H.**

Type System: **Community Water System**

Reason for Sampling: ☒ Routine Distribution ☒ Raw (triggered or assessment)

Sample Collection Date: **6/26/2017**

Lab Receipt Date & Time:

**RECEIVED**

**6/27/17 @ 12:40 PM  
2017 JUN 27 P 12:08**

Analysis Date & Time:

Sample Preservation: ☒ On Ice ☐ Not On Ice **68°**

Disinfectant Check: ☒ Not Detected \_\_\_\_\_ mg/L

This sample does not meet the following NELAP requirements:  
**Temp Gun 122**

PWS ID: **353-1517**

City: **River Ranch FL**

Email Address: **shelly.kirkland@pwrwater.com**

Collector's Phone: **863-865-1439**

Send Report to: **Polk County Bact. Reports**

Sample Number	Sample Point (Location or Specific Address)	Collection Time	Sample Type	Disinfectant Res'd (mg/L)	pH	Total Coliform Analysis Method: SM 9222B				Lab Sample Number
						Non Coliform	Total Coliform	Fecal or E. coli	Date Quotient	
A	Raw at well #1	14:36	R	0		A	A			007668
B	Raw at well #2	14:40	R	0		A	A			007669
G	RV Lot 326	14:45	D	0.2		A	A			007670
H	RV Lot 574	14:50	D	0.2		A	A			007671

Average of disinfectant residuals for routine and repeat samples:  
Free Chlorine \_\_\_\_\_ or Total Chlorine (circle one) **0.2**

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

Person performing disinfectant analysis is:  
☒ A certified operator (ID **24188**)  
☐ Supervised by a certified operator (ID \_\_\_\_\_)  
☐ Employed by a certified lab  
☐ Employed DEP or DOH  
☐ Authorized representative of supplier of water

Unless otherwise noted All tests are performed in accordance with NELAP Standards, and the results relate to the samples.

Date and time PWS notified of positive results: \_\_\_\_\_

Date and time DEP/DOH notified of positive results: \_\_\_\_\_

Date Report issued: **6/28/17**

Lab Signature: **[Signature]**

Title: **Lab Manager**

Name and Mailing Address of Person to Receive Report

Tri Florida Water Treatment  
226 East Lake Ave  
Auburndale, FL 33823

☐ Satisfactory ☐ Incomplete Collection Information ☐ Repeat Samples Required ☐ Replacement Samples Required

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

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



Month - Yr. 6/17

Page # 10

# Operation - Maintenance Log

Facility Name Wetlands River Ranch PWS No. 653-1517

Facility Address #1-16022300 Operator Ben Carlton

Ending Prev. Mo. Reading 5/31/2017 - #2-502189000 Certification # 24188

Date	Meter Reading	H <sub>2</sub> O Used - Gal.	CL <sup>2</sup> Pint	CL <sup>2</sup> Rmt	TIME IN	TIME OUT	Signature	CL Add.	Operation, Maint., Performed, Samples Taken, Etc.
1	160921300		1.0	0.2	3:10	3:20	BC	0	502330000
2									
3									
4									
5	161363400		2.6	0.2	2:15	2:15	BC	0	502547000
6									
7	161635600		2.0	0.4	3:02	3:12	BC	0	502592000
8									
9	161882300		2.0	0.2	1:40	1:50	BC	0	502651000
10									
11									3 Duct Bill (5 1/4" pipe)
12	162184200		0.4	0.2	1:56	2:06	BC	0	502824000
13									30" 1/4" discharge tubing (18)
14	162445300		1.2	0.2	2:05	2:15	BC	0	502909000 Duct Bill
15									compressor pit - cl2 pump to be
16	162661200		1.2	0.2	11:30	11:40	BC	0	502994000
17									Duct Bill - 8" pit
18									
19	162893300		0.5	0.3	2:12	2:22	BC	0	503123000
20									30" 1/4" discharge tubing TV600
21	163000100		0.4	0.2	4:13	4:23	BC	0	503245000 503245000
22									Duct Bill - 8" pit
23	163200400		1.8	0.3	3:08	3:18	BC	0	503390000
24									
25									cl2 pump to 8" pipe
26	163501000		0.4	0.2	2:36	3:06	BC	0	503439000
27									
28	163642000		0.4	0.2	3:05	3:15	BC	0	503558000 - 2 Duct Bill
29									
30	163862100		0.4	0.2	2:35	2:45	BC	0	503617000
31									cl2 pump (12" pipe)

Beginning Next Month Reading \_\_\_\_\_

163511000



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

See page 4 for Instructions.

POLK

## I. General Information for the Month/Year of: July-17

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


PWS Name:	Westgate River Ranch & RV Resort 1& 2	PWS Identification Number:	353-1517
PWS Type:	Community		
Number of Service Connections at End of Month:	700	Total Population Served at End of Month:	200
PWS Owner:	River Ranch		
Contact Person:	Shelly Kirkland	Contact Person's Title:	Administrative Assistant
Contact Person's Mailing Address:	P.O. Box 30030	City:	River Ranch
Contact Person's Telephone Number:	863-692-1321	State:	FL
Contact Person's E-Mail Address:	shelly_kirkland@wgresorts.com	Zip Code:	33867
		Contact Person's Fax Number:	

### B. Water Treatment Plant Information

Plant Name:	Westgate River Ranch	Plant Telephone Number:	863-692-2946
Plant Address:	3200 River Ranch Blvd	City:	Lake Wales
		State:	FL
Type of Water Treated by Plant:	Raw Ground Water	Zip Code:	33967
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	720,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	5	Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Larry Scott	C	8567
Other Operators:	Tony Johnson	D	18154
	Keith Johnson	C	7451
	William Goodman	D	17443
	Ben Carlton	D	24188

## II. Certification by Lead/Chief Operator

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

 8-7-17  
Signature and Date

Larry Scott  
Printed or Typed Name

8567  
License Number



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

PWS Identification Number: 353-1517 Plant Name: New River Ranch

III. Daily Data for the Month/Year of: July-17

Means of Achieving Four-Log Virus Inactivation/Removal:\*

Type of Disinfectant Residual Maintained in Distribution System Mar-16 Free Chlorine

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculation, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations								UV Dose			
				Peak Flow rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/l	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2			
1		24	224500												
2	x	24	224500										0.2		
3		24	107633												
4		24	107633												
5	x	24	107633										0.2	Stenner #7	
6		24	131850												
7	x	24	131850										0.2	Pulled pump 1A; others to 10 to compensate	
8		24	143267												
9		24	143267												
10	x	24	143267										0.2	Flipped index plate (1B)	
11		24	143900												
12	x	24	143900										0.2	Rotor assembly (1A)	
13		24	117100												
14	x	24	117100										0.2	Duckbill	
15		24	151667												
16		24	151667												
17	x	24	151667										0.5	Duckbill; Stenner #7 tube (1B)	
18		24	157950												
19	x	24	157950										0.8		
20		24	143850												
21	x	24	143850										0.6		
22		24	110250												
23	x	24	110250										1.0		
24		24	181300												
25		24	181300												
26	x	24	181300										0.3	Stenner #7 tube	
27		24	125350												
28	x	24	125350										0.2		
29		24	136167												
30		24	136167												
31	x	24	136167										0.2	3 duckbills	
Total			4469602												
Average			144181												
Maximum			224500												

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

Tri - Florida Water Treatment, Inc.  
226 East Lake Avenue  
Auburndale, FL 33823  
(863) 965-1439

Month - Yr. 7/17

Page # 11

# Operation - Maintenance Log

Facility Name Westgate New River Ranch

PWS No. 653-1517

Facility Address 1-165265100

Operator Ben Cristan

Ending Prev. Mo. Reading 6/30/2017 - 503612000

Certification # 24128

Date	Meter Reading	H <sub>2</sub> O Used - Gal.	CL <sup>2</sup> Pint	CL <sup>2</sup> Rmt	TIME IN	TIME OUT	Signature	CL Add.	Operation, Maint., Performed, Samples Taken, Etc.
1									
2	164216100		0.4	0.2	7:15	7:25	BC	0	503212000
3									
4									
5	164412000		0.4	0.2	3:02	3:12	BC	0	503839000
6									Steamer #7706 (CA)
7	164608200		0.4	0.2	2:18	2:28	BC	0	503911000
8									Pull pump & other parts
9									to compensate
10	164901500		0.4	0.2	2:06	2:16	BC	0	504048000
11									Flipped 2.1x 11 (12)
12	165051300		0.4	0.2	2:55	3:05	BC	0	50416000 - Rotol Assembly
13									CL2 pumps to 2:15
14	165210500		0.4	0.2	11:25	11:35	BC	0	504261000 - Daily
15									CL2 pumps to 10:15
16									Daily Steamer #7706
17	165532500		3.4	0.5	2:45	2:55	BC	0	504874000
18									CL2 pumps to 8:15
19	165768400		2.4	0.8	3:45	3:55	BC	0	504934000
20									
21	165987100		1.8	0.6	1:10	1:20	BC	0	504543000
22									
23	166101600		1.5	1.0	12:05	12:15	BC	0	504649000
24									CL2 pumps to 8:15
25									<del>CL2 pumps to 8:15</del>
26	166482500		0.5	0.3	3:05	3:15	BC	0	504812000
27									Steamer #7706
28	166616200		0.4	0.2	11:17	11:27	BC	0	504929000
29									CL2 pumps to 8:15
30									CL2 pumps to 8:15
31	166831200		0.4	0.2	2:30	2:40	BC	0	505072000

Beginning Next Month Reading \_\_\_\_\_

3701800



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

Mid Florida Water Lab  
8 Oakwood Road  
Winter Haven, FL 33880  
(863) 965-2540  
LAB I.D. # E64657

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

Lab Receipt Date & Time:

Analysis Date & Time: 7/20/17 @ 12:05 pm

Sample Acquisition Criteria: (2017) JUL 20

Sample Preservation: Not Detected

Disinfectant Check: Not Detected

This sample does not meet the following NELAC requirements:

Analysis Requested: (please check all that apply)

☒ Total Coliform/E. coli ☐ Total Coliform/Fecal ☐ Enterococci ☐ Coliphage ☐ HPC ☐ Other: \_\_\_\_\_

Public Water System Name: **Westgate River Ranch**

PWS ID: **353-1517**

PWS Address: **3200 River Ranch Rd**

City: **River Ranch, FL 33867**

PWS or PWS Owner's Phone #: **407-351-3351 ext. 531**

Fax #: \_\_\_\_\_

Email Address: **shelly.kirton@floridawater.com**

Collector: **Ben Carlton**

Collector's Phone: **863-965-1439**

Type System: **Community Water System**

Send Report to: **Polk County Bact. Reports**

Reason for Sampling: ☒ Routine Distribution ☒ Raw (triggered or assessment)

Sample Collection Date: **7/19/2017**

Sample Number	Sample Point (Location or Specific Address)	Collection Time	Sample Type <sup>1</sup>	Disinfectant Res'd (mg/L)	pH	Total Coliform Analysis Method: SM 5222B	E. coli Analysis Method: SM 5222B-EC	Lab Sample Number
A	Raw at well #1	15:34	R	0		A	A	008821
B	Raw at well #2	15:40	R	0		A	A	008822
C	Lodge	15:45	D	0.8		A	A	008823
D	Motel	15:50	D	0.8		A	A	008824

Average of disinfectant residuals for routine and repeat samples:

Free Chlorine: \_\_\_\_\_ or Total Chlorine (circle one) **0.8**

Disinfectant Residual Analysis Method:

☒ DPD Colorimetric ☐ Other: \_\_\_\_\_

Person performing disinfectant analysis is:

☒ A certified operator (a **24188**)

☐ Supervised by a certified operator (b) \_\_\_\_\_

☐ Employed by a certified lab

☐ Employed DEP or DOH

☐ Authorized representative of supplier of water

Unless otherwise noted All tests are performed in accordance with NELAC Standards, and the results relate to the samples.

Date and time PWS notified of positive results: \_\_\_\_\_

Date and time DEP/DOH notified of positive results: **7/21/17**

Date Report Issued: \_\_\_\_\_

Lab Signature: **Shelly Kirton**

Title: **Lab Manager**

Name and Mailing Address of Person to Receive Report

Tri Florida Water Treatment  
226 East Lake Ave  
Auburndale, FL 33823

☐ Satisfactory  
☐ Incomplete Collection Information  
☐ Repeat Samples Required  
☐ Replacement Samples Required

DEP/DOH USE ONLY

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

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



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

See page 4 for Instructions.

POLK

I. General Information for the Month/Year of:		August-17		
A. Public Water System (PWS) Information				
PWS Name:	Westgate River Ranch & RV Resort I& 2		PWS Identification Number:	353-1517
PWS Type:	Community			
Number of Service Connections at End of Month:	700	Total Population Served at End of Month:	200	
PWS Owner:	River Ranch			
Contact Person:	Shelly Kirkland	Contact Person's Title:	Administrative Assistant	
Contact Person's Mailing Address:	P.O. Box 30030	City:	River Ranch	State: FL Zip Code: 33867
Contact Person's Telephone Number:	863-692-1321	Contact Person's Fax Number:		
Contact Person's E-Mail Address:	shelly_kirkland@wgresorts.com			
B. Water Treatment Plant Information				
Plant Name:	Westgate River Ranch		Plant Telephone Number:	863-692-2946
Plant Address:	3200 River Ranch Blvd	City:	Lake Wales	State: FL Zip Code: 33967
Type of Water Treated by Plant:	Raw Ground Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	720,000			
Plant Category (per subsection 62-699.310(4), F.A.C.):	5	Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Larry Scott	C	8567	
Other Operators:	Tony Johnson	D	18154	
	Keith Johnson	C	7451	
	William Goodman	D	17443	
	Ben Carlton	D	24188	13/Month

II. Certification by Lead/Chief Operator

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

Signature and Date: Larry Scott 9-6-17

Printed or Typed Name: Larry Scott

License Number: 8567



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

PWS Identification Number: 353-1517 Plant Name: Westgate River Ranch

III. Daily Data for the Month/Year of: August-17

Means of Achieving Four-Log Virus Inactivation/Removal:\*

Type of Disinfectant Residual Maintained in Distribution System Aug-17 Free Chlorine

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculation, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations								UV Dose			
				Peak Flow rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/l	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2			
1		24	130950												
2	x	24	130950										0.2		
3		24	127400												
4	x	24	127400										0.2		
5		24	147067												
6		24	147067												
7	x	24	147067										0.2		
8		24	184900												
9	x	24	184900										0.2		
10		24	154200												
11	x	24	154200										0.2		
12		24	142267												
13		24	142267												
14	x	24	142267										0.2	Main shaft; roller assy; Stenner #7; tube housing cover w/ bushing (1B)	
15		24	156850												
16	x	24	156850										2.8		
17		24	135150												
18	x	24	135150										2.0		
19		24	130600												
20		24	130600												
21	x	24	130600										1.0	Roller assy; main shaft; Stenner #7 (1A)	
22		24	131450												
23	x	24	131450										1.4		
24		24	155200												
25	x	24	155200										1.8		
26		24	126067												
27		24	126067												
28	x	24	126067										1.6		
29		24	160100												
30	x	24	160100										1.8		
31		24	160100												
Total			4470503												
Average			144210												
Maximum			184900												

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

Tri - Florida Water Treatment, Inc.  
226 East Lake Avenue  
Auburndale, FL 33823  
(863) 965-1439

Month - Yr. 8/12

Page # 12

Wrs/gate **Operation - Maintenance Log**

Facility Name New River Ranch PWS No. 353-1517  
Facility Address 1-166881200 Operator Ben Collins  
Ending Prev. Mo. Reading 7/31/2012 50502000 Certification # 24188

Date	Meter Reading	H <sub>2</sub> O Used - Gal.	CL <sup>2</sup> Pint	CL <sup>2</sup> Rmt	TIME IN	TIME OUT	Signature	CL Add.	Operation, Maint., Performed, Samples Taken, Etc.
1									CL pumps to 1.1 mm 8.25
2	16105400		0.4	0.2	2:47	2:57	BC	0	505158000
3									
4	16238400		0.6	0.2	1:30	1:40	BC	0	505232000
5									
6									CL pumps to 9.25 mm 9
7	162560600		0.5	0.2	2:19	2:29	BC	0	505351000
8									CL pumps to 9.5 mm 9.25
9	162878400		0.4	0.2	2:42	2:52	BC	0	505403000
10									CL pumps to 9.5 mm 9.5
11	163113800		0.6	0.2	1:32	1:42	BC	0	505426000
12									
13									Mid shift filter change complete 12:15
14	163410600		0.4	0.2	2:25	2:35	BC	0	505606000
15									CL pumps to 9.1 mm 9.5
16	163639300		3.6	2.8	3:26	3:36	BC	0	505671000
17									CL pumps to 8.5 mm 9
18	163842600		3.0	2.0	1:59	2:09	BC	0	505753000
19									
20									Repl/condensed 12:30 (12)
21	16412400		1.8	1.0	1:13	1:24	BC	0	505874000
22									CL pumps to 8.5 mm 8.5
23	164310300		2.8	1.4	11:15	11:25	BC	0	505945000
24									
25	164500700		2.6	1.8	1:37	1:47	BC	0	506065000
26									
27	164739900								
28	50624000		2.4	1.6	2:23	2:33	BC	0	506240000
29									
30	164983100		2.8	1.8	3:01	3:11	BC	0	506281000
31									CL pumps to 8.25 mm 8.5

Beginning Next Month Reading \_\_\_\_\_



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

Mid Florida Water Lab  
8 Oakwood Road  
Winter Haven, FL 33880  
(863) 965-2540  
LAB I.D. # E84567

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

Analysis Requested: (please check all that apply)

☒ Total Coliform/E. coli ☐ Total Coliform/Fecal ☐ Enterococci ☐ Coliphage ☐ HPC ☐ Other: \_\_\_\_\_

Public Water System Name: **Westgate River Ranch**

PWS Address: **3200 River Ranch Rd**

PWS or PWS Owner's Phone #: **407-351-3351 ext. 531**

Fax #: \_\_\_\_\_

Collector: **Ben Carlton**

Type System: **Community Water System**

Reason for Sampling: ☒ Routine Distribution ☒ Raw (triggered or assessment)

Sample Collection Date: **8/2/2017**

Lab Receipt Date & Time:

**RECEIVED**

Analysis Date & Time: **8/2/2017 2:00 PM**

Sample Acceptance Criteria:

Sample Preservation: ☒ On Ice ☐ Not On Ice **7.1** °C

Disinfectant Check: ☒ Not Detected \_\_\_\_\_ mg/L

This sample does not meet the following NELAC requirements:

**pyrometer 11 #2**

PWS ID: **353-1517**

City: **River Ranch, FL 33867**

Email Address: **shelly.kirkland@wgrresort.com**

Collector's Phone: **863-965-1439**

Send Report to: **Polk County Bact. Reports**

Sample Number	Sample Point (Location or Specific Address)	Collection Time	Sample Type	Disinfectant Res'd (mg/L)	pH	Total Coliform Analysis Method: SM 9222B	Fecal or E. coli Analysis Method: SM 9222B	Non Coliform	Total Coliform	Count of E. coli	Date	Lab Sample Number
A	Raw at well #1	14:19	R	0		A	A					009461
B	Raw at well #2	14:23	R	0		A	A					009462
D	Apartment #405	14:26	D	0.2		A	A					009463
E	Condo #451	14:31	D	0.2		A	A					009464

Average of disinfectant residuals for routine and repeat samples: **0.2**  
Free Chlorine or Total Chlorine (circle one)

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

Person performing disinfectant analysis is:  
☒ A certified operator (# **24188**)  
☐ Supervised by a certified operator (# \_\_\_\_\_)  
☐ Employed by a certified lab  
☐ Employed DEP or DOH  
☐ Authorized representative of supplier of water

Unless otherwise noted All tests are performed in accordance with NELAC Standards, and the results relate to the samples.

Date and time PWS notified of positive results: \_\_\_\_\_

Date and time DEP/DOH notified of positive results: \_\_\_\_\_

Date Report issued: **8/9/17**

Lab Signature: **Wendy Rappaport**  
**Director**

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

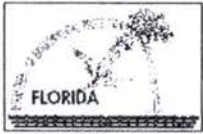
Name and Mailing Address of Person to Receive Report

Tri Florida Water Treatment  
226 East Lake Ave  
Auburndale, FL 33823

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

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

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



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

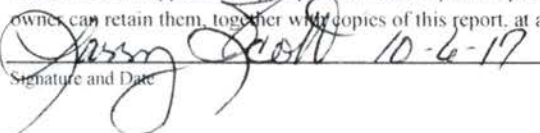
See page 4 for Instructions.

POLK

<b>I. General Information for the Month/Year of:</b>		September-17		
<b>A. Public Water System (PWS) Information</b>				
PWS Name:	Westgate River Ranch & RV Resort 1& 2		PWS Identification Number:	353-1517
PWS Type:	Community			
Number of Service Connections at End of Month:	700	Total Population Served at End of Month:	200	
PWS Owner:	River Ranch			
Contact Person:	Shelly Kirkland	Contact Person's Title:	Administrative Assistant	
Contact Person's Mailing Address:	P.O. Box 30030	City:	River Ranch	State: FL Zip Code: 33867
Contact Person's Telephone Number:	863-692-1321	Contact Person's Fax Number:		
Contact Person's E-Mail Address:	shelly_kirkland@wgresorts.com			
<b>B. Water Treatment Plant Information</b>				
Plant Name:	Westgate River Ranch		Plant Telephone Number:	863-692-2946
Plant Address:	3200 River Ranch Blvd	City:	Lake Wales	State: FL Zip Code: 33967
Type of Water Treated by Plant:	Raw Ground Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	720,000			
Plant Category (per subsection 62-699.310(4), F.A.C.):	5	Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Larry Scott	C	8567	
Other Operators:	Tony Johnson	D	18154	1/Month
	Keith Johnson	C	7451	
	William Goodman	D	17443	
	Ben Carlton	D	24188	11/Month

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

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

  
Signature and Date

Larry Scott  
Printed or Typed Name

8567  
License Number



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

PWS Identification Number: 353-1517 Plant Name: Westgate River Ranch

III. Daily Data for the Month/Year of: September-17

Means of Achieving Four-Log Virus Inactivation/Removal:\*

Type of Disinfectant Residual Maintained in Distribution System Sep-17 Free Chlorine

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculation, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations								UV Dose			
				Peak Flow rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/l	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2			
1	x	24	73000										1.4		
2		24	142350												
3		24	142350												
4		24	142350												
5	x	24	142350										0.6		
6		24	161550												
7	x	24	161550										2.6		
8		24	144057												
9		24	144057												
10		24	144057												
11		24	144057											Hurricane Irma Road flooded - unable to access	
12		24	144057												
13		24	144057												
14	x	24	144057										0.2	Pulled CL2 pumps 1A, 2A	
15		24	68250												
16	x	24	68250										1.8		
17		24	177300												
18	x	24	177300										3.0		
19		24	136950												
20	x	24	136950										2.0	Rotor assembly - 1A, & reinstalled	
21		24	91050												
22	x	24	91050										1.5	Reinstalled 2A	
23		24	128133												
24		24	128133												
25	x	24	128133										3.4		
26		24	110900												
27	x	24	110900										3.2		
28		24	105850												
29	x	24	105850										3.4		
30		24	105850												
Total			3844748												
Average			124024												
Maximum			177300												

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

Tri - Florida Water Treatment, Inc.  
226 East Lake Avenue  
Auburndale, FL 33823  
(863) 965-1439

Month - Yr. 9/17

Page # 01

Operation - Maintenance Log

Facility Name Westgate  
Facility Address 1-169983100  
Ending Prev. Mo. Reading 8/30/2017-2-506291000

PWS No. 653-1517  
Operator Ben Carlton  
Certification # 24188

Date	Meter Reading	H <sub>2</sub> O Used - Gal.	CL <sup>2</sup> Pint	CL <sup>2</sup> Rmt	TIME IN	TIME OUT	Signature	CL Add.	Operation, Maint., Performed, Samples Taken, Etc.
1	170212100		20	1.4	1:37	1:47	BC	Ø	506344000
2									CL2 pumps to 8.5 from 8.25
3									
4									CL2 pumps to 8.25 from 8.5
5	170559500		1.0	0.6	2:39	2:49	BC	Ø	506566000
6									
7	170766600		30	26	3:13	3:23	BC	Ø	506682000
8									CL2 pumps to 8 from 8.25
9									
10									
11									
12									- ROAD FLOODED - UNABLE TO ACCESS BC
13									
14	171658000		04	0.2	2:44	2:54	BC	Ø	506799000
15									Pump CL2 pumps 1A 2A (8.5)
16	171794500		02	1.8	1:06	1:16	BC		506799000
17									CL2 pump to 8.5 from 10
18	172149100		3.8	3.0	3:40	3:50	BC	Ø	506799000
19									
20	172423000		25	2.0	4:35	4:45	BC	Ø	506799000
21									Reboiled 2A
22	172605100		3.0	1.5	0931	0941	29	Ø	506799000
23									Reboiled 2A
24									
25	172989500		38	3.4	3:06	3:16	BC	Ø	506799000
26									CL2 pumps to 8.5
27	173211300		3.8	3.2	3:58	4:08	BC	Ø	506799000
28									CL2 pumps to 7.75
29	173423000		38	3.4	4:52	5:02	BC	Ø	506799000
30									CL2 pumps to 6.25
31									

Beginning Next Month Reading \_\_\_\_\_



River Ranch Water Management LLC

Response to PSC Letter Dated 12/07/2016

10 Monthly totals of metered water sold for test year

Meter Readings previously submitted

Customers are flat rated, not billed by usage

## 11 Summary of Permits

Permit Number	Issuing Authority	Permit Type
3531517	Florida Dept of Health	PWS Annual Fee
007196	State of FI - DEP	Class C Operators Permit for Michael E Harrison





## RECEIPT – PWS ANNUAL FEE

THIS DOCUMENT DOES NOT CERTIFY THAT THIS PWS IS IN COMPLIANCE  
WITH REGULATORY REQUIREMENTS

PWS Number: **3531517**

County: **Polk**

**2017-2018**

Location: **NEW RIVER RANCH & RV RESORT**  
3200 RIVER RANCH ROAD  
RIVER RANCH, FL 33867

Issued To: **WESTGATE RESORTS LTD**  
PO BOX 692229  
ORLANDO, FL 32869

Fee Amount: \$1200.00

Date Paid: 6/30/2017

Issue Date: 7/01/2017

Expires: 6/30/2018

*Ronald L. Stadelbacher*

Florida Department of Health in Polk County  
2090 East Clower Street, Bartow, Florida 33830

ORIGINAL - FACILITY



## RECEIPT – PWS ANNUAL FEE

THIS DOCUMENT DOES NOT CERTIFY THAT THIS PWS IS IN COMPLIANCE  
WITH REGULATORY REQUIREMENTS

PWS Number: **3531517**

County: **Polk**

**2017-2018**

Location: **NEW RIVER RANCH & RV RESORT**  
3200 RIVER RANCH ROAD  
RIVER RANCH, FL 33867

Issued To: **WESTGATE RESORTS LTD**  
PO BOX 692229  
ORLANDO, FL 32869

Fee Amount: \$1200.00

Date Paid: 6/30/2017

Issue Date: 7/01/2017

Expires: 6/30/2018

*Ronald L. Stadelbacher*

Florida Department of Health in Polk County  
2090 East Clower Street, Bartow, Florida 33830

COPY - OWNER

**State of Florida**  
**Department of Environmental Protection**

**ISSUED: 4/3/2017**

**LICENSE NO.: 0007196**

THE CLASS C WASTEWATER TREATMENT PLANT OPERATOR NAMED BELOW IS  
LICENSED UNDER THE PROVISIONS OF CHAPTER 403, FLORIDA STATUTES.

**VALID UNTIL: 4/30/2019**

**MICHAEL E HARRISON**

RICK SCOTT

JONATHAN P. STEVERSON

GOVERNOR

**DISPLAY IS REQUIRED BY LAW**

SECRETARY



**River Ranch Water Management LLC**

**Response to PSC Letter Dated 12/07/2016**

**12 Future Plant Additions**

There have been no repairs done due to a written order

River Ranch Water Management LLC  
Response to PSC Letter Dated 12/07/2016

13 Complaints

River Ranch Water Management LLC has not received any service complaints during the test year or the four years prior.



15 Number of customers billed and meter sizes for the following time periods

Date	Residential 3/4 " Meter	Multi-Family Various Meter See Letter 12.6.17 Item 1e	Commercial - Various Meter See Letter 12.16.17 Item 1e	Commercial Irrigation Base - NOT Metered
Sep-12	48	2	3	2
Jan-16	52	2	3	2
Dec-16	54	2	3	2
Dec-17	54	2	3	2

\*\*\* This does not include the residential customers that we have found to be unbilled and submitted a request for backbilling

DATE: 10-01-12 00:22 AM  
PERIOD: 09-12

COMPANY 14 MONTHLY ACTIVITY REPORT  
RIVER RANCH WATER MANAGEMENT  
CASSELBERRY

(00)

PROGRAM: FUT139 PAGE 1  
CORP ID:

	RESIDENTIAL	COMMERCIAL	MULTI-FAMILY	TRAILER	PUBLIC AUTH.	SPECIAL (F)	TOTALS
EOM - ACCOUNTS DATA: (REGARDLESS OF WATER/SEWER SVC)							
EOM-TOTAL ACTIVES:	48	2	3	0	0	0	53
EOM-TOTAL INACTIVES:	7	0	0	0	0	0	7
EOM-TOTAL ACCOUNTS:	55	2	3	0	0	0	60
BILLING DATA:							
(IB) IRRIGATION BASE	\$ .00	\$ .00	\$649.32	\$ .00	\$ .00	\$ .00	\$649.32
(SB) SEWER BASE FACIL	\$841.33	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,717.47
(WB) WATER BASE FACIL	\$776.65	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,555.36
TOTAL BILLED:	\$1,617.98	\$2,416.63	\$20,887.54	\$ .00	\$ .00	\$ .00	\$24,922.15
PAYMENTS:							
REGULAR PAYMENTS	\$1,516.82	\$2,416.63	\$20,887.54	\$ .00	\$ .00	\$ .00	\$24,820.99
TOTAL PAYMENTS:	\$1,516.82	\$2,416.63	\$20,887.54	\$ .00	\$ .00	\$ .00	\$24,820.99
BILLS PRINTED:							
( ) NORMAL	50	2	3	0	0	0	55
TOTAL BILLS:	50	2	3	0	0	0	55



DATE: 10-01-12 00:22 AM  
 PERIOD: 09-12

MONTHLY ACTIVITY REPORT  
 COMPANY 14 RIVER RANCH WATER MANAGEMENT  
 CASSELBERRY

PROGRAM: FUT139 PAGE 2  
 (00) CORP ID:

	RESIDENTIAL	COMMERCIAL	MULTI-FAMILY	TRAILER	PUBLIC AUTH.	SPECIAL (F)	TOTALS
WATER METER & UNIT CONNECTIONS AT E-O-M (PLUS) USAGE & DOLLARS BILLED DURING MONTH							
RG 0.75 WT METRS-EOM	55	2	3	0	0	0	60
WT ACTIV-EOM	48	2	3	0	0	0	53
WT INACT-EOM	7	0	0	0	0	0	7
WT UNITS-EOM	55	2	678	0	0	0	735
WT USE (ALL)	0	0	0	0	0	0	0
WT USE BIL'D	0	0	0	0	0	0	0
WT USE ADJ'D	0	0	0	0	0	0	0
WT BILLED \$\$	\$776.65	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,555.36
SUBTOT RG METRS-EOM	55	2	3	0	0	0	60
ACTIVE - EOM	48	2	3	0	0	0	53
INACTIVE-EOM	7	0	0	0	0	0	7
UNITS	55	2	678	0	0	0	735
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$776.65	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,555.36
GRANDTOTAL METRS-EOM	55	2	3	0	0	0	60
ACTIVE - EOM	48	2	3	0	0	0	53
INACTIVE-EOM	7	0	0	0	0	0	7
UNITS	55	2	678	0	0	0	735
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$776.65	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,555.36

NOTE: DEDUCTIVE METERS ARE EXCLUDED FROM THIS WATER METER SECTION!

DATE: 10-01-12 00:22 AM  
 PERIOD: 09-12

COMPANY 14 MONTHLY ACTIVITY REPORT  
 RIVER RANCH WATER MANAGEMENT  
 CASSELBERRY

PROGRAM: FUT139 PAGE 3  
 CORP ID:

	RESIDENTIAL	COMMERCIAL	MULTI-FAMILY	TRAILER	PUBLIC AUTH.	SPECIAL (F)	TOTALS
SEWER METER & UNIT CONNECTIONS AT E-O-M (PLUS) USAGE & DOLLARS BILLED DURING MONTH							
RG 0.75 SR METRS-EOM	55	2	3	0	0	0	60
SR ACTIV-EOM	48	2	3	0	0	0	53
SR INACT-EOM	7	0	0	0	0	0	7
SR UNITS-EOM	55	2	678	0	0	0	735
SR USE (ALL)	0	0	0	0	0	0	0
SR USE BIL'D	0	0	0	0	0	0	0
SR USE ADJ'D	0	0	0	0	0	0	0
SR BILLED \$\$	\$841.33	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,717.47
SUBTOT RG METRS-EOM	55	2	3	0	0	0	60
ACTIVE - EOM	48	2	3	0	0	0	53
INACTIVE-EOM	7	0	0	0	0	0	7
UNITS	55	2	678	0	0	0	735
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$841.33	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,717.47
GRANDTOTAL METRS-EOM	55	2	3	0	0	0	60
ACTIVE - EOM	48	2	3	0	0	0	53
INACTIVE-EOM	7	0	0	0	0	0	7
UNITS	55	2	678	0	0	0	735
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$841.33	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,717.47

NOTE: FIRE LINE METERS ARE EXCLUDED FROM THIS SEWER METER SECTION!  
 NOTE: REUSE METERS ARE EXCLUDED FROM THIS SEWER METER SECTION!  
 NOTE: IRRIGATION METERS ARE EXCLUDED FROM THIS SEWER METER SECTION!

AGEING ON 08/31/12 \$424.04-  
 REVENUES FROM MAR (+) \$24,922.15  
 ADJUSTMENTS FROM MAR (+/-) \$ .00  
 REGULAR PAYMENTS FROM MAR (-) \$24,820.99-  
 DEPOSIT PAYMENTS FROM MAR (-) \$ .00  
 AGEING ON 09/30/12 \$322.88-



DATE: 02-01-16 00:20 AM  
PERIOD: 01-16

MONTHLY ACTIVITY REPORT  
COMPANY 14 RIVER RANCH WATER MANAGEMENT (00)  
RIVER RANCH

PROGRAM: FUT139 PAGE 1  
CORP ID:

	RESIDENTIAL	COMMERCIAL	MULTI-FAMILY	TRAILER	PUBLIC AUTH.	SPECIAL(F)	TOTALS
EOM - ACCOUNTS DATA: (REGARDLESS OF WATER/SEWER SVC)							
EOM-TOTAL ACTIVES:	52	2	3	0	0	0	57
EOM-TOTAL INACTIVES:	5	0	0	0	0	0	5
EOM-TOTAL ACCOUNTS:	57	2	3	0	0	0	62
BILLING DATA:							
(IB) IRRIGATION BASE	\$ .00	\$ .00	\$649.32	\$ .00	\$ .00	\$ .00	\$649.32
(SB) SEWER BASE FACIL	\$892.84	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,768.98
(WB) WATER BASE FACIL	\$824.20	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,602.91
TOTAL BILLED:	\$1,717.04	\$2,416.63	\$20,887.54	\$ .00	\$ .00	\$ .00	\$25,021.21
PAYMENTS:							
REGULAR PAYMENTS	\$1,023.62	\$ .00	\$3,665.77	\$ .00	\$ .00	\$ .00	\$4,689.39
TOTAL PAYMENTS:	\$1,023.62	\$ .00	\$3,665.77	\$ .00	\$ .00	\$ .00	\$4,689.39
BILLS PRINTED:							
( ) NORMAL	55	2	3	0	0	0	60
TOTAL BILLS:	55	2	3	0	0	0	60

DATE: 02-01-16 00:20 AM  
 PERIOD: 01-16

MONTHLY ACTIVITY REPORT  
 COMPANY 14 RIVER RANCH WATER MANAGEMENT  
 RIVER RANCH

PROGRAM: FUT139 PAGE 2  
 (00) CORP ID:

	RESIDENTIAL	COMMERCIAL	MULTI-FAMILY	TRAILER	PUBLIC AUTH.	SPECIAL (F)	TOTALS
WATER METER & UNIT CONNECTIONS AT E-O-M (PLUS) USAGE & DOLLARS BILLED DURING MONTH							
RG 0.75 WT METRS-EOM	57	2	3	0	0	0	62
WT ACTIV-EOM	52	2	3	0	0	0	57
WT INACT-EOM	5	0	0	0	0	0	5
WT UNITS-EOM	57	2	678	0	0	0	737
WT USE (ALL)	0	0	0	0	0	0	0
WT USE BIL'D	0	0	0	0	0	0	0
WT USE ADJ'D	0	0	0	0	0	0	0
WT BILLED \$\$	\$824.20	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,602.91
SUBTOT RG METRS-EOM	57	2	3	0	0	0	62
ACTIVE - EOM	52	2	3	0	0	0	57
INACTIVE-EOM	5	0	0	0	0	0	5
UNITS	57	2	678	0	0	0	737
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$824.20	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,602.91
GRANDTOTAL METRS-EOM	57	2	3	0	0	0	62
ACTIVE - EOM	52	2	3	0	0	0	57
INACTIVE-EOM	5	0	0	0	0	0	5
UNITS	57	2	678	0	0	0	737
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$824.20	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,602.91

NOTE: DEDUCTIVE METERS ARE EXCLUDED FROM THIS WATER METER SECTION!



DATE: 02-01-16 00:20 AM  
PERIOD: 01-16

MONTHLY ACTIVITY REPORT  
COMPANY 14 RIVER RANCH WATER MANAGEMENT  
RIVER RANCH

PROGRAM: FUT139 PAGE 3  
(00) CORP ID:

	RESIDENTIAL	COMMERCIAL	MULTI-FAMILY	TRAILER	PUBLIC AUTH.	SPECIAL (F)	TOTALS
SEWER METER & UNIT CONNECTIONS AT E-O-M (PLUS) USAGE & DOLLARS BILLED DURING MONTH							
RG 0.75 SR METRS-EOM	57	2	3	0	0	0	62
SR ACTIV-EOM	52	2	3	0	0	0	57
SR INACT-EOM	5	0	0	0	0	0	5
SR UNITS-EOM	57	2	678	0	0	0	737
SR USE (ALL)	0	0	0	0	0	0	0
SR USE BIL'D	0	0	0	0	0	0	0
SR USE ADJ'D	0	0	0	0	0	0	0
SR BILLED \$\$	\$892.84	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,768.98
SUBTOT RG METRS-EOM	57	2	3	0	0	0	62
ACTIVE - EOM	52	2	3	0	0	0	57
INACTIVE-EOM	5	0	0	0	0	0	5
UNITS	57	2	678	0	0	0	737
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$892.84	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,768.98
GRANDTOTAL METRS-EOM	57	2	3	0	0	0	62
ACTIVE - EOM	52	2	3	0	0	0	57
INACTIVE-EOM	5	0	0	0	0	0	5
UNITS	57	2	678	0	0	0	737
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$892.84	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,768.98

NOTE: FIRE LINE METERS ARE EXCLUDED FROM THIS SEWER METER SECTION!  
NOTE: REUSE METERS ARE EXCLUDED FROM THIS SEWER METER SECTION!  
NOTE: IRRIGATION METERS ARE EXCLUDED FROM THIS SEWER METER SECTION!

AGEING ON 12/31/15	\$365.95
REVENUES FROM MAR (+)	\$25,021.21
ADJUSTMENTS FROM MAR (+/-)	\$ .00
REGULAR PAYMENTS FROM MAR (-)	\$4,689.39-
DEPOSIT PAYMENTS FROM MAR (-)	\$ .00
AGEING ON 01/31/16	\$20,697.77

DATE: 01-01-17 04:51 AM  
PERIOD: 12-16

MONTHLY ACTIVITY REPORT  
COMPANY 14 RIVER RANCH WATER MANAGEMENT (00)  
RIVER RANCH

PROGRAM: FUT139 PAGE 1  
CORP ID:

	RESIDENTIAL	COMMERCIAL	MULTI-FAMILY	TRAILER	PUBLIC AUTH.	SPECIAL (F)	TOTALS
EOM - ACCOUNTS DATA: (REGARDLESS OF WATER/SEWER SVC)							
EOM-TOTAL ACTIVES:	54	2	3	0	0	0	59
EOM-TOTAL INACTIVES:	4	0	0	0	0	0	4
EOM-TOTAL ACCOUNTS:	58	2	3	0	0	0	63
BILLING DATA:							
(IB) IRRIGATION BASE	\$ .00	\$ .00	\$649.32	\$ .00	\$ .00	\$ .00	\$649.32
(SB) SEWER BASE FACIL	\$927.18	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,803.32
(WB) WATER BASE FACIL	\$855.90	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,634.61
TOTAL BILLED:	\$1,783.08	\$2,416.63	\$20,887.54	\$ .00	\$ .00	\$ .00	\$25,087.25
PAYMENTS:							
REGULAR PAYMENTS	\$1,717.05	\$113.58	\$15,156.37	\$ .00	\$ .00	\$ .00	\$16,987.00
TOTAL PAYMENTS:	\$1,717.05	\$113.58	\$15,156.37	\$ .00	\$ .00	\$ .00	\$16,987.00
BILLS PRINTED:							
( ) NORMAL	57	2	3	0	0	0	62
TOTAL BILLS:	57	2	3	0	0	0	62



DATE: 01-01-17 04:51 AM  
 PERIOD: 12-16

MONTHLY ACTIVITY REPORT  
 COMPANY 14 RIVER RANCH WATER MANAGEMENT  
 RIVER RANCH

PROGRAM: FUT139 PAGE 2  
 (00) CORP ID:

	RESIDENTIAL	COMMERCIAL	MULTI-FAMILY	TRAILER	PUBLIC AUTH.	SPECIAL (F)	TOTALS
WATER METER & UNIT CONNECTIONS AT E-O-M (PLUS) USAGE & DOLLARS BILLED DURING MONTH							
RG 0.75 WT METRS-EOM	58	2	3	0	0	0	63
WT ACTIV-EOM	54	2	3	0	0	0	59
WT INACT-EOM	4	0	0	0	0	0	4
WT UNITS-EOM	58	2	678	0	0	0	738
WT USE (ALL)	0	0	0	0	0	0	0
WT USE BIL'D	0	0	0	0	0	0	0
WT USE ADJ'D	0	0	0	0	0	0	0
WT BILLED \$\$	\$855.90	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,634.61
SUBTOT RG METRS-EOM	58	2	3	0	0	0	63
ACTIVE - EOM	54	2	3	0	0	0	59
INACTIVE-EOM	4	0	0	0	0	0	4
UNITS	58	2	678	0	0	0	738
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$855.90	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,634.61
GRANDTOTAL METRS-EOM	58	2	3	0	0	0	63
ACTIVE - EOM	54	2	3	0	0	0	59
INACTIVE-EOM	4	0	0	0	0	0	4
UNITS	58	2	678	0	0	0	738
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$855.90	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,634.61

NOTE: DEDUCTIVE METERS ARE EXCLUDED FROM THIS WATER METER SECTION!

DATE: 01-01-17 04:51 AM  
PERIOD: 12-16

MONTHLY ACTIVITY REPORT  
COMPANY 14 RIVER RANCH WATER MANAGEMENT  
RIVER RANCH

PROGRAM: FUT139 PAGE 3  
CORP ID:

	RESIDENTIAL	COMMERCIAL	MULTI-FAMILY	TRAILER	PUBLIC AUTH.	SPECIAL (F)	TOTALS
SEWER METER & UNIT CONNECTIONS AT E-O-M (PLUS) USAGE & DOLLARS BILLED DURING MONTH							
RG 0.75 SR METRS-EOM	58	2	3	0	0	0	63
SR ACTIV-EOM	54	2	3	0	0	0	59
SR INACT-EOM	4	0	0	0	0	0	4
SR UNITS-EOM	58	2	678	0	0	0	738
SR USE (ALL)	0	0	0	0	0	0	0
SR USE BIL'D	0	0	0	0	0	0	0
SR USE ADJ'D	0	0	0	0	0	0	0
SR BILLED \$\$	\$927.18	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,803.32
SUBTOT RG METRS-EOM	58	2	3	0	0	0	63
ACTIVE - EOM	54	2	3	0	0	0	59
INACTIVE-EOM	4	0	0	0	0	0	4
UNITS	58	2	678	0	0	0	738
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$927.18	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,803.32
GRANDTOTAL METRS-EOM	58	2	3	0	0	0	63
ACTIVE - EOM	54	2	3	0	0	0	59
INACTIVE-EOM	4	0	0	0	0	0	4
UNITS	58	2	678	0	0	0	738
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$927.18	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,803.32

NOTE: FIRE LINE METERS ARE EXCLUDED FROM THIS SEWER METER SECTION!  
NOTE: REUSE METERS ARE EXCLUDED FROM THIS SEWER METER SECTION!  
NOTE: IRRIGATION METERS ARE EXCLUDED FROM THIS SEWER METER SECTION!

AGEING ON 11/30/16 \$5,420.20  
REVENUES FROM MAR (+) \$25,087.25  
ADJUSTMENTS FROM MAR (+/-) \$ .00  
REGULAR PAYMENTS FROM MAR (-) \$16,987.00-  
DEPOSIT PAYMENTS FROM MAR (-) \$ .00  
AGEING ON 12/31/16 \$13,520.45



DATE: 01-01-18 00:28 AM  
PERIOD: 12-17

MONTHLY ACTIVITY REPORT  
COMPANY 14 RIVER RANCH WATER MANAGEMENT  
RIVER RANCH

(00)

PROGRAM: FUT139 PAGE 1  
CORP ID:

	RESIDENTIAL	COMMERCIAL	MULTI-FAMILY	TRAILER	PUBLIC AUTH.	SPECIAL (F)	TOTALS
EOM - ACCOUNTS DATA: (REGARDLESS OF WATER/SEWER SVC)							
EOM-TOTAL ACTIVES:	54	2	3	0	0	0	59
EOM-TOTAL INACTIVES:	4	0	0	0	0	0	4
EOM-TOTAL ACCOUNTS:	58	2	3	0	0	0	63
BILLING DATA:							
(IB) IRRIGATION BASE	\$ .00	\$ .00	\$649.32	\$ .00	\$ .00	\$ .00	\$649.32
(SB) SEWER BASE FACIL	\$927.18	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,803.32
(WB) WATER BASE FACIL	\$855.90	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,634.61
TOTAL BILLED:	\$1,783.08	\$2,416.63	\$20,887.54	\$ .00	\$ .00	\$ .00	\$25,087.25
PAYMENTS:							
REGULAR PAYMENTS	\$1,498.62	\$2,416.63	\$9,396.94	\$ .00	\$ .00	\$ .00	\$13,312.19
TOTAL PAYMENTS:	\$1,498.62	\$2,416.63	\$9,396.94	\$ .00	\$ .00	\$ .00	\$13,312.19
BILLS PRINTED:							
( ) NORMAL	55	2	3	0	0	0	60
TOTAL BILLS:	55	2	3	0	0	0	60

DATE: 01-01-18 00:28 AM  
 PERIOD: 12-17

MONTHLY ACTIVITY REPORT  
 COMPANY 14 RIVER RANCH WATER MANAGEMENT  
 RIVER RANCH

PROGRAM: FUT139 PAGE 2  
 (00) CORP ID:

	RESIDENTIAL	COMMERCIAL	MULTI-FAMILY	TRAILER	PUBLIC AUTH.	SPECIAL (F)	TOTALS
WATER METER & UNIT CONNECTIONS AT E-O-M (PLUS) USAGE & DOLLARS BILLED DURING MONTH							
RG 0.75 WT METRS-EOM	58	2	3	0	0	0	63
WT ACTIV-EOM	54	2	3	0	0	0	59
WT INACT-EOM	4	0	0	0	0	0	4
WT UNITS-EOM	58	2	678	0	0	0	738
WT USE (ALL)	0	0	0	0	0	0	0
WT USE BIL'D	0	0	0	0	0	0	0
WT USE ADJ'D	0	0	0	0	0	0	0
WT BILLED \$\$	\$855.90	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,634.61
SUBTOT RG METRS-EOM	58	2	3	0	0	0	63
ACTIVE - EOM	54	2	3	0	0	0	59
INACTIVE-EOM	4	0	0	0	0	0	4
UNITS	58	2	678	0	0	0	738
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$855.90	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,634.61
GRANDTOTAL METRS-EOM	58	2	3	0	0	0	63
ACTIVE - EOM	54	2	3	0	0	0	59
INACTIVE-EOM	4	0	0	0	0	0	4
UNITS	58	2	678	0	0	0	738
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$855.90	\$1,180.81	\$8,597.90	\$ .00	\$ .00	\$ .00	\$10,634.61

NOTE: DEDUCTIVE METERS ARE EXCLUDED FROM THIS WATER METER SECTION!



DATE: 01-01-18 00:28 AM  
PERIOD: 12-17

MONTHLY ACTIVITY REPORT  
COMPANY 14 RIVER RANCH WATER MANAGEMENT  
RIVER RANCH

PROGRAM: FUT139 PAGE 3  
CORP ID:

	RESIDENTIAL	COMMERCIAL	MULTI-FAMILY	TRAILER	PUBLIC AUTH.	SPECIAL (F)	TOTALS
SEWER METER & UNIT CONNECTIONS AT E-O-M (PLUS) USAGE & DOLLARS BILLED DURING MONTH							
RG 0.75 SR METRS-EOM	58	2	3	0	0	0	63
SR ACTIV-EOM	54	2	3	0	0	0	59
SR INACT-EOM	4	0	0	0	0	0	4
SR UNITS-EOM	58	2	678	0	0	0	738
SR USE (ALL)	0	0	0	0	0	0	0
SR USE BIL'D	0	0	0	0	0	0	0
SR USE ADJ'D	0	0	0	0	0	0	0
SR BILLED \$\$	\$927.18	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,803.32
SUBTOT RG METRS-EOM	58	2	3	0	0	0	63
ACTIVE - EOM	54	2	3	0	0	0	59
INACTIVE-EOM	4	0	0	0	0	0	4
UNITS	58	2	678	0	0	0	738
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$927.18	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,803.32
GRANDTOTAL METRS-EOM	58	2	3	0	0	0	63
ACTIVE - EOM	54	2	3	0	0	0	59
INACTIVE-EOM	4	0	0	0	0	0	4
UNITS	58	2	678	0	0	0	738
USAGE TOTAL	0	0	0	0	0	0	0
USAGE BILLED	0	0	0	0	0	0	0
USAGE ADJ'D	0	0	0	0	0	0	0
BILLED \$\$\$	\$927.18	\$1,235.82	\$11,640.32	\$ .00	\$ .00	\$ .00	\$13,803.32

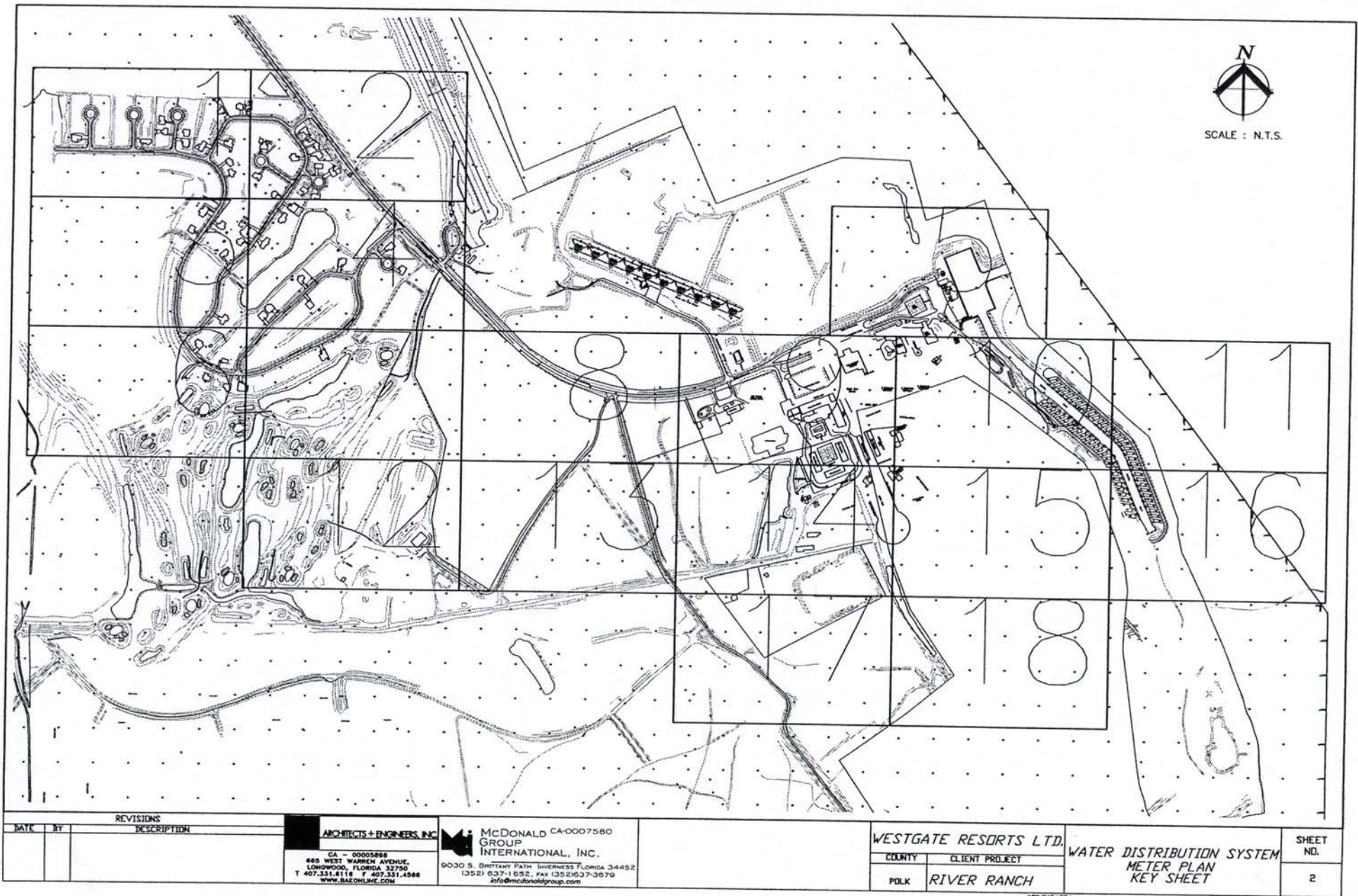
NOTE: FIRE LINE METERS ARE EXCLUDED FROM THIS SEWER METER SECTION!  
NOTE: REUSE METERS ARE EXCLUDED FROM THIS SEWER METER SECTION!  
NOTE: IRRIGATION METERS ARE EXCLUDED FROM THIS SEWER METER SECTION!

AGEING ON 11/30/17	\$316.96
REVENUES FROM MAR (+)	\$25,087.25
ADJUSTMENTS FROM MAR (+/-)	\$ .00
REGULAR PAYMENTS FROM MAR (-)	\$13,312.19-
DEPOSIT PAYMENTS FROM MAR (-)	\$ .00
AGEING ON 12/31/17	\$12,092.02

Whole System - River Ranch.

↳ Water + Wastewater.

# 16

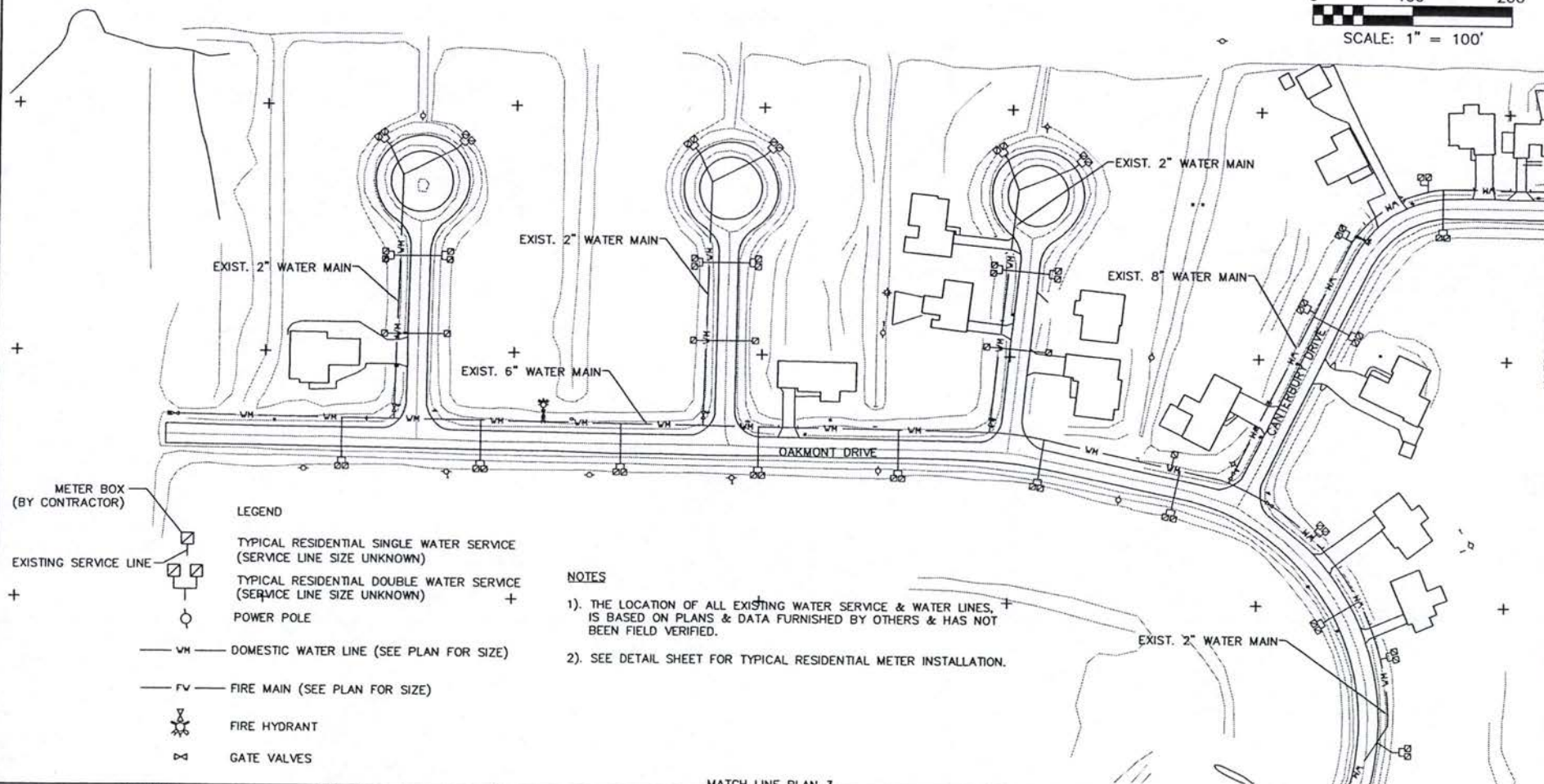


# 16





0' 100' 200'  
SCALE: 1" = 100'



#### LEGEND

- METER BOX (BY CONTRACTOR)
- EXISTING SERVICE LINE
- POWER POLE
- VH — DOMESTIC WATER LINE (SEE PLAN FOR SIZE)
- FV — FIRE MAIN (SEE PLAN FOR SIZE)
- V — FIRE HYDRANT
- G — GATE VALVES
- TYPICAL RESIDENTIAL SINGLE WATER SERVICE (SERVICE LINE SIZE UNKNOWN)
- TYPICAL RESIDENTIAL DOUBLE WATER SERVICE (SERVICE LINE SIZE UNKNOWN)

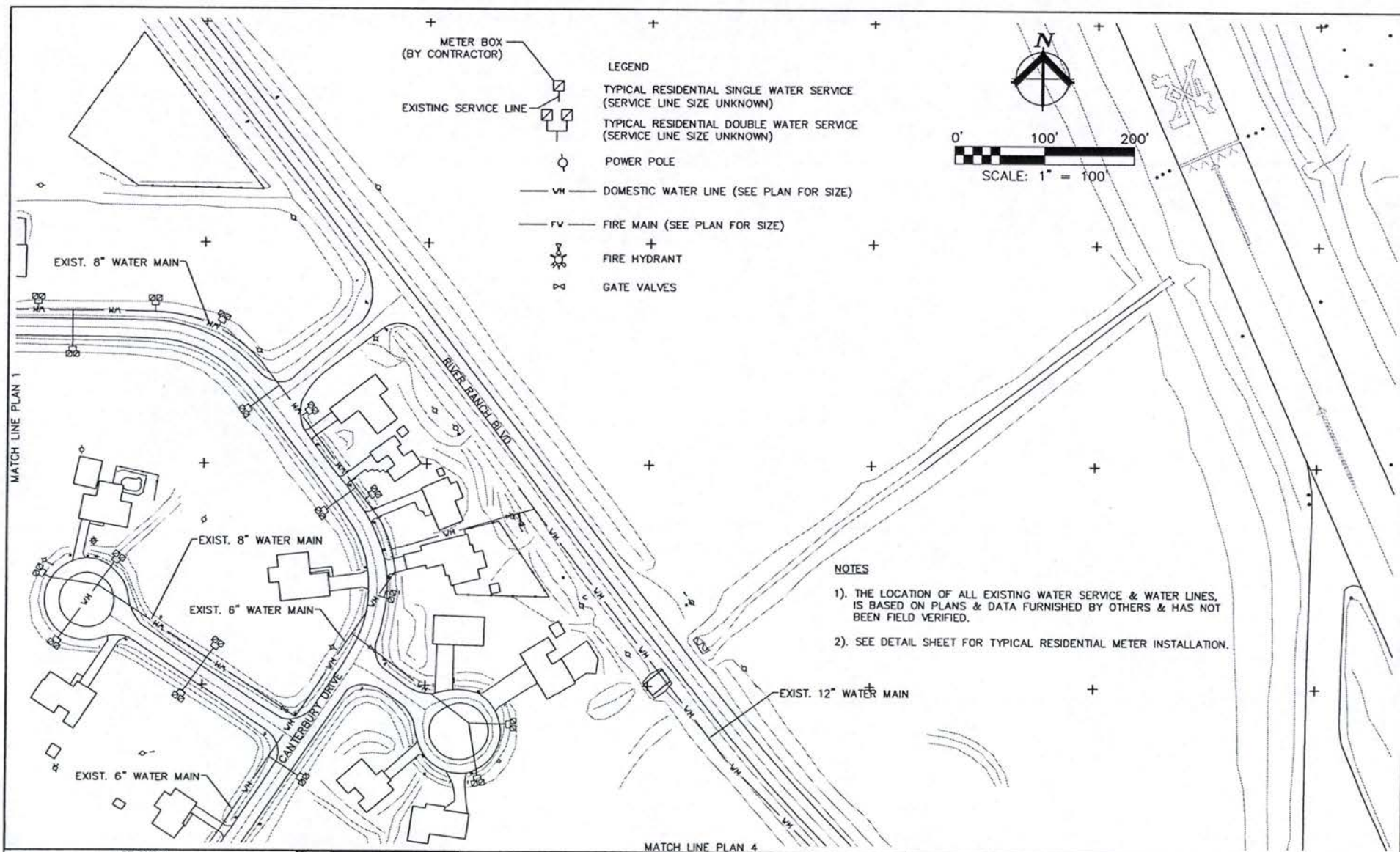
#### NOTES

- 1). THE LOCATION OF ALL EXISTING WATER SERVICE & WATER LINES, IS BASED ON PLANS & DATA FURNISHED BY OTHERS & HAS NOT BEEN FIELD VERIFIED.
- 2). SEE DETAIL SHEET FOR TYPICAL RESIDENTIAL METER INSTALLATION.

MATCH LINE PLAN 3

REVISIONS		ARCHITECTS + ENGINEERS, INC.		McDONALD GROUP INTERNATIONAL, INC.		WESTGATE RESORTS LTD.		WATER DISTRIBUTION SYSTEM METER PLAN	SHEET NO.  PLAN 1
DATE	BY	DESCRIPTION		CA-0007580		COUNTY	CLIENT PROJECT		
				9030 S. BRITTANY PATH, INVERNESS FLORIDA 34452 (352) 637-1652, FAX (352) 637-3679 info@mcdonaldgroup.com		PDLK	RIVER RANCH		

#TIMBERD4



REVISIONS		
DATE	BY	DESCRIPTION

**ARCHITECTS + ENGINEERS, INC.**  
 CA - 00005888  
 685 WEST WARREN AVENUE,  
 LOMBWOOD, FLORIDA 32750  
 T 407.331.6118 F 407.331.4586  
 WWW.BAEONLINE.COM

**McDONALD GROUP INTERNATIONAL, INC.**  
 CA-0007580  
 9030 S. BRITANNY PATH INVERNESS FLORIDA 34452  
 (352) 637-1652, FAX (352) 637-3679  
 info@mcdonaldgroup.com

<b>WESTGATE RESORTS LTD.</b>	
COUNTY	CLIENT PROJECT
POLK	RIVER RANCH

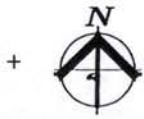
**WATER DISTRIBUTION SYSTEM  
 METER PLAN**

SHEET NO.  
 PLAN 2

BTMEBATES



MATCH LINE PLAN 1



0' 100' 200'  
SCALE: 1" = 100'

METER BOX  
(BY CONTRACTOR)

EXISTING SERVICE LINE

LEGEND

TYPICAL RESIDENTIAL SINGLE WATER SERVICE  
(SERVICE LINE SIZE UNKNOWN)

TYPICAL RESIDENTIAL DOUBLE WATER SERVICE  
(SERVICE LINE SIZE UNKNOWN)

POWER POLE

VM DOMESTIC WATER LINE (SEE PLAN FOR SIZE)

FV FIRE MAIN (SEE PLAN FOR SIZE)

FIRE HYDRANT

GATE VALVES

NOTES

- 1). THE LOCATION OF ALL EXISTING WATER SERVICE & WATER LINES, IS BASED ON PLANS & DATA FURNISHED BY OTHERS & HAS NOT BEEN FIELD VERIFIED.
- 2). SEE DETAIL SHEET FOR TYPICAL RESIDENTIAL METER INSTALLATION.

EXIST. 2" WATER MAIN

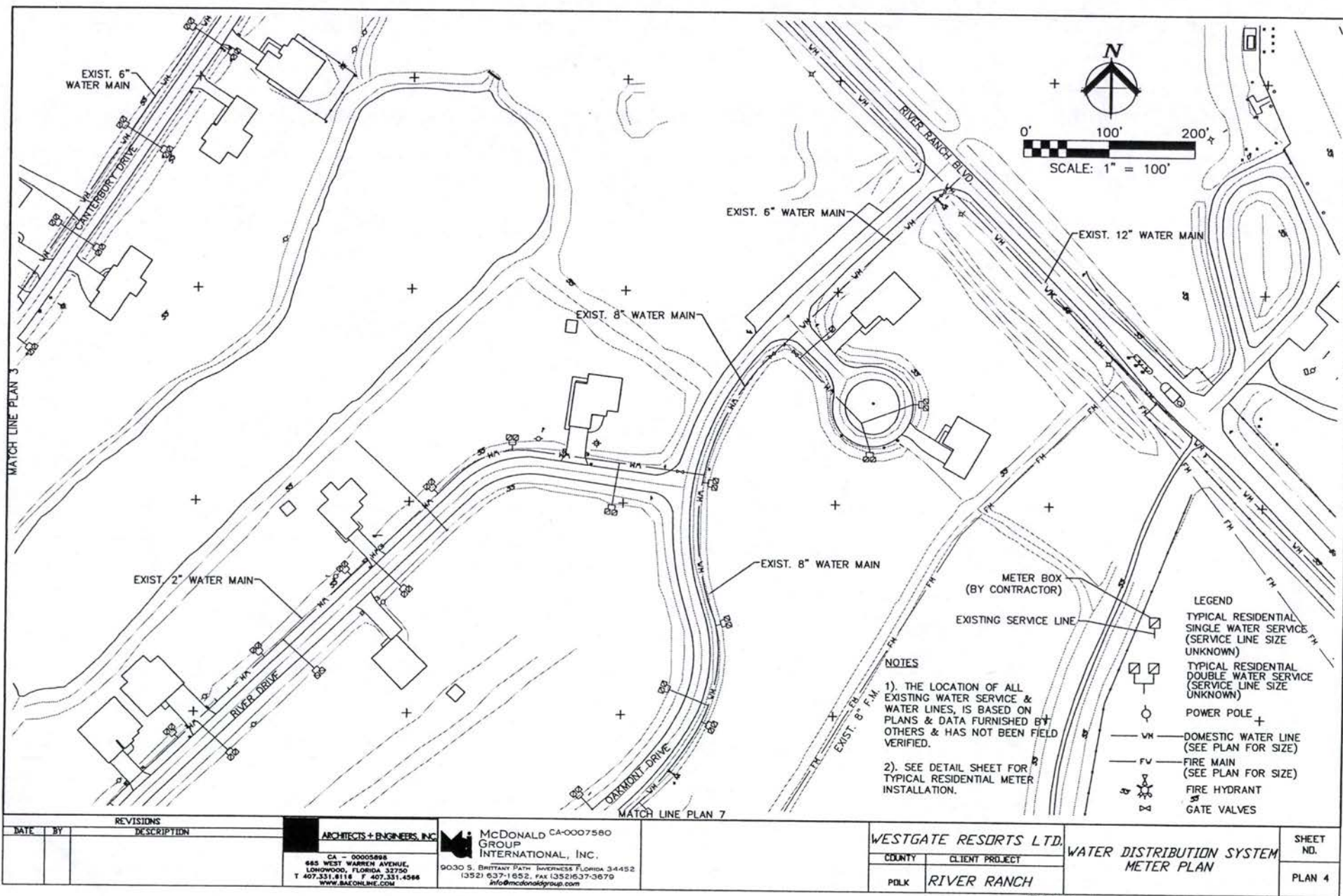
EXIST. 2" WATER MAIN

EXIST. 6" WATER MAIN

MATCH LINE PLAN 4

REVISIONS			ARCHITECTS + ENGINEERS, INC.	McDONALD GROUP INTERNATIONAL, INC.	WESTGATE RESORTS LTD.		WATER DISTRIBUTION SYSTEM METER PLAN	SHEET NO. PLAN 3
DATE	BY	DESCRIPTION			COUNTY	CLIENT PROJECT		
			CA - 00005886 885 WEST WARREN AVENUE, LONGWOOD, FLORIDA 32750 T 407.331.8118 F 407.331.4586 WWW.BAEONLINE.COM	9030 S. BRITTANY PATH INVERNESS FLORIDA 34452 (352) 637-1652, FAX (352) 637-3679 info@mcdonaldgroup.com	POLK	RIVER RANCH		

STIMCDATES



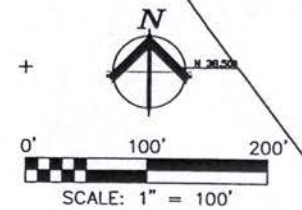


# LEGEND

- + ○ POWER POLE +
- VM — DOMESTIC WATER LINE (SEE PLAN FOR SIZE)
- FM — FIRE MAIN (SEE PLAN FOR SIZE)
- ⊗ FIRE HYDRANT
- ⊗ GATE VALVES

## NOTES

- 1). THE LOCATION OF ALL EXISTING WATER SERVICE & WATER LINES, IS BASED ON PLANS & DATA FURNISHED BY OTHERS & HAS NOT BEEN FIELD VERIFIED.
- 2). SEE DETAIL SHEET FOR TYPICAL METER INSTALLATIONS.



INSTALLER TO VERIFY LINE SIZE.  
USE 1.5" WATER METER AND BACKFLOW  
PREVENTER MINIMUM. NOTIFY ENGINEER  
IF EXISTING SERVICE IS 2" OR GREATER.  
(COMMERCIAL DETAIL)

EXIST. 1.5"  
DOMESTIC  
WATER MAIN

NEW 1.5" WATER METER  
& BACKFLOW PREVENTER  
(SEE COMMERCIAL DETAIL)

RESTAURANT

RV CHECK-IN

EXIST. OFFICE  
BUILDING

RIVER RANCH BLVD.

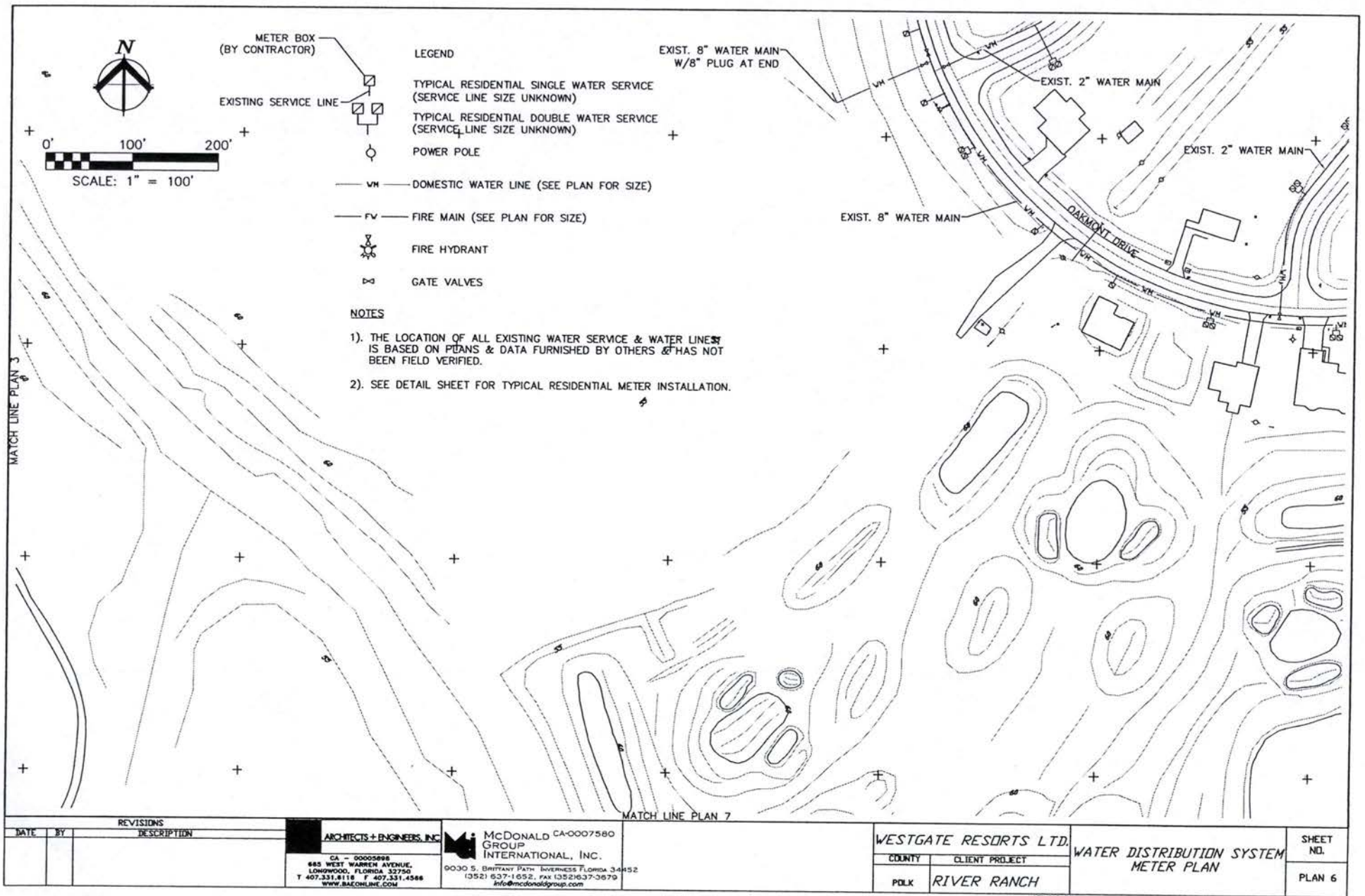
RIVER RANCH BLVD.

MATCH LINE PLAN 9

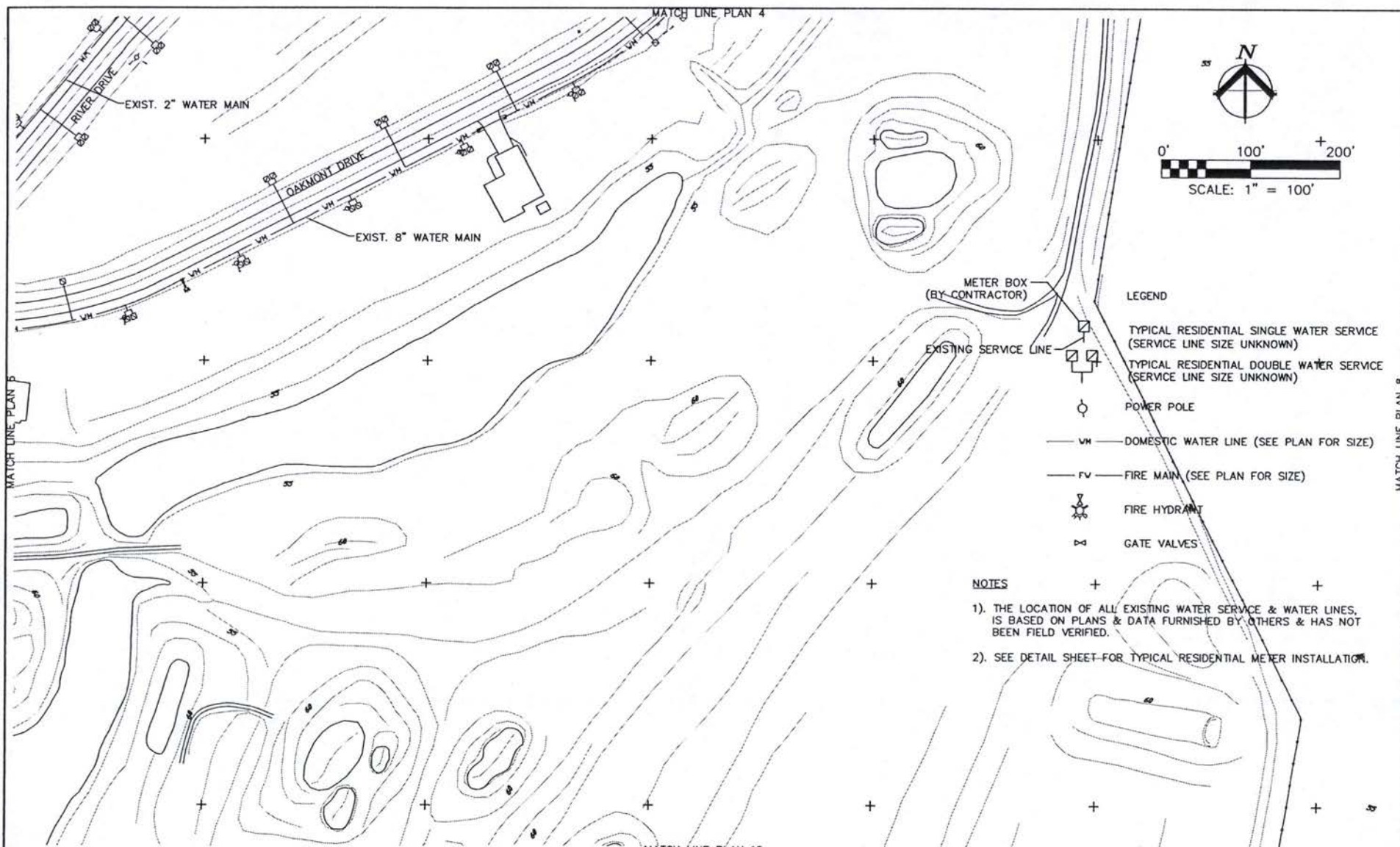
MATCH LINE PLAN 10

DATE	BY	REVISIONS	DESCRIPTION	ARCHITECTS + ENGINEERS, INC.	MCDONALD GROUP INTERNATIONAL, INC.	WESTGATE RESORTS LTD.	COUNTY	CLIENT PROJECT	WATER DISTRIBUTION SYSTEM METER PLAN	SHEET NO.
				CA - 00005888 665 WEST WARREN AVENUE, LONGWOOD, FLORIDA 32750 T 407.331.8118 F 407.331.4586 WWW.BAEONLINE.COM	9030 S. BRITTANY PATH INVERNESS FLORIDA 34452 (352) 637-1652, FAX (352) 637-3679 info@mcdonaldgroup.com					
							POLK	RIVER RANCH		PLAN 5

6/10/2004







REVISIONS		ARCHITECTS + ENGINEERS, INC.	McDONALD GROUP INTERNATIONAL, INC.	WESTGATE RESORTS LTD.		WATER DISTRIBUTION SYSTEM METER PLAN	SHEET NO.
DATE	BY			COUNTY	CLIENT PROJECT		
		CA - 00005988 665 WEST WARREN AVENUE, LONGWOOD, FLORIDA 32750 T 407.331.8114 F 407.331.4584 WWW.BAEONLINE.COM	9030 S. BRITANNY PATH, LIVERNESS, FLORIDA 34462 (352) 637-1652, FAX (352) 637-3679 info@mcdonaldgroup.com	POLK	RIVER RANCH		PLAN 7

STPDES0476



0' 100' 200'  
SCALE: 1" = 100'

LEGEND

— VM — DOMESTIC WATER LINE (SEE PLAN FOR SIZE)

NOTES

- 1). THE LOCATION OF ALL EXISTING WATER SERVICE & WATER LINES, IS BASED ON PLANS & DATA FURNISHED BY OTHERS & HAS NOT BEEN FIELD VERIFIED.

EXIST. 12" WATER MAIN

RIVER RANCH BLVD

MATCH LINE PLAN 13

MATCH LINE PLAN 7

MATCH LINE PLAN 9

REVISIONS

DATE	BY	DESCRIPTION

ARCHITECTS + ENGINEERS, INC.

CA - 00005888  
885 WEST WARREN AVENUE,  
LOWWOOD, FLORIDA 32750  
T 407.331.6118 F 407.331.4588  
WWW.A&EONLINE.COM

MCDONALD GROUP  
INTERNATIONAL, INC.  
CA-0007580  
9030 S. BRITTANY PATH INVERNESS FLORIDA 34452  
(352) 637-1652, FAX (352) 637-3670  
info@mcDonaldgroup.com

WESTGATE RESORTS LTD.

COUNTY CLIENT PROJECT

POLK RIVER RANCH

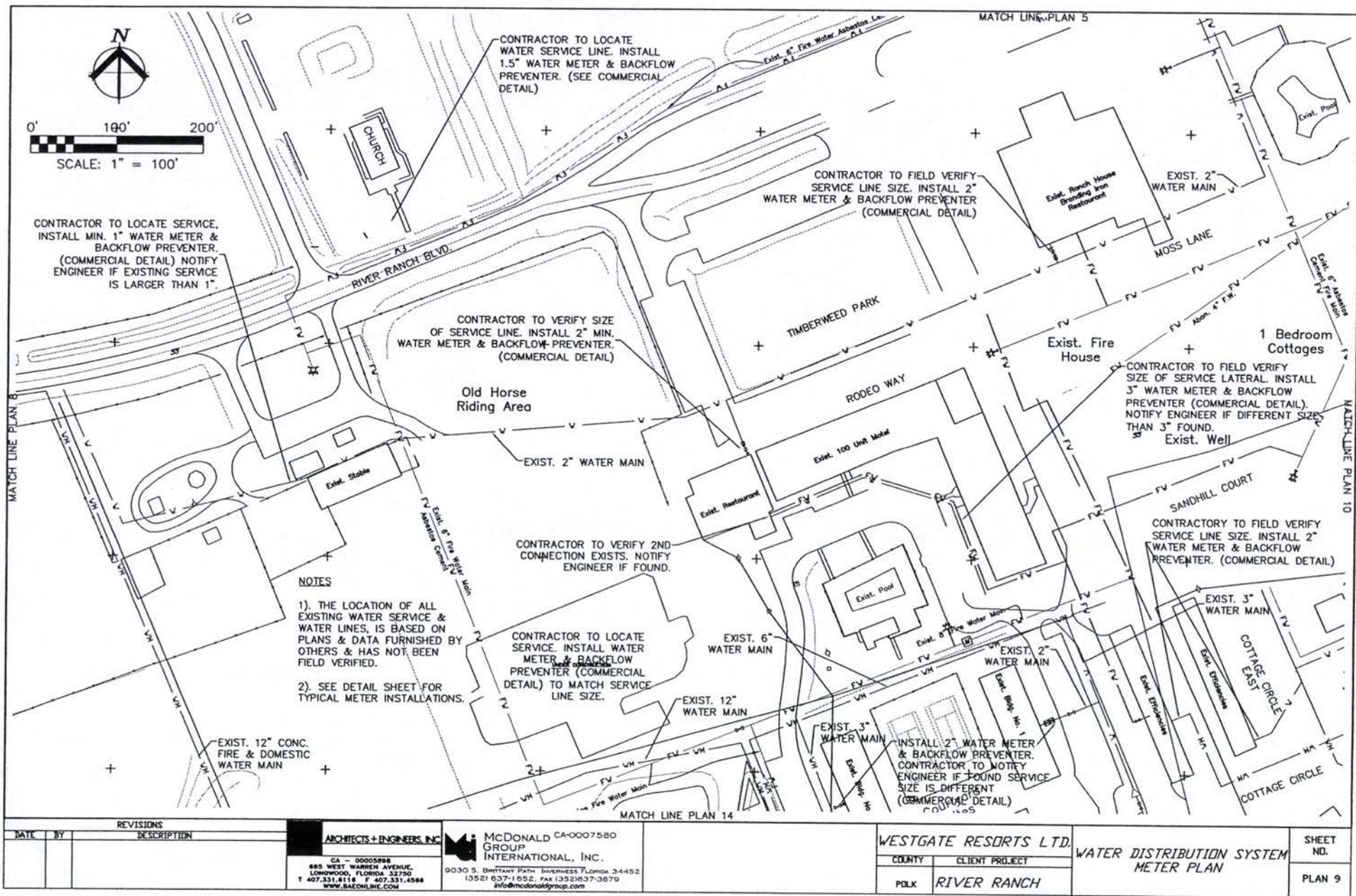
WATER DISTRIBUTION SYSTEM  
METER PLAN

SHEET  
NO.

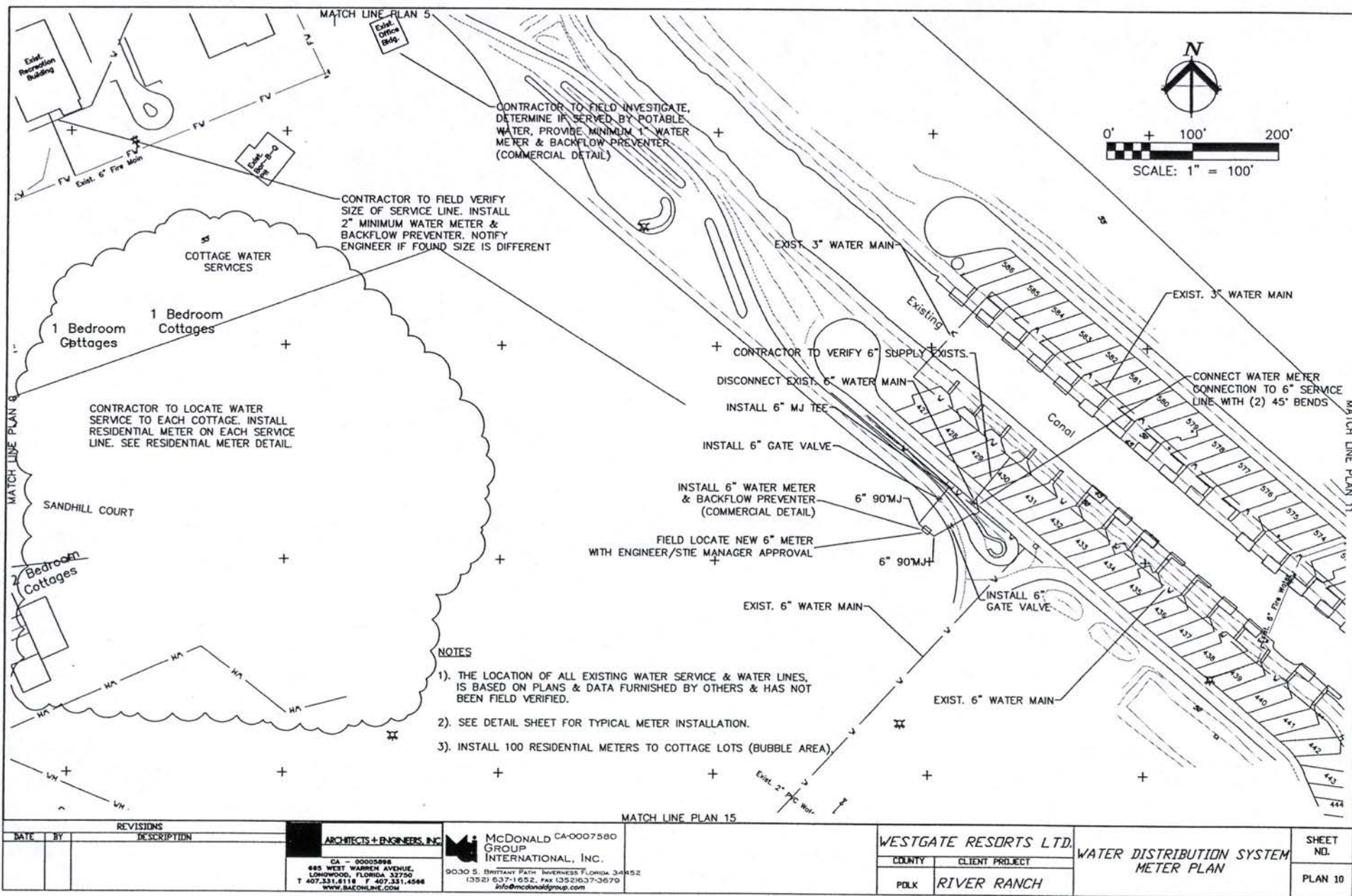
PLAN 8

STIMEDATES

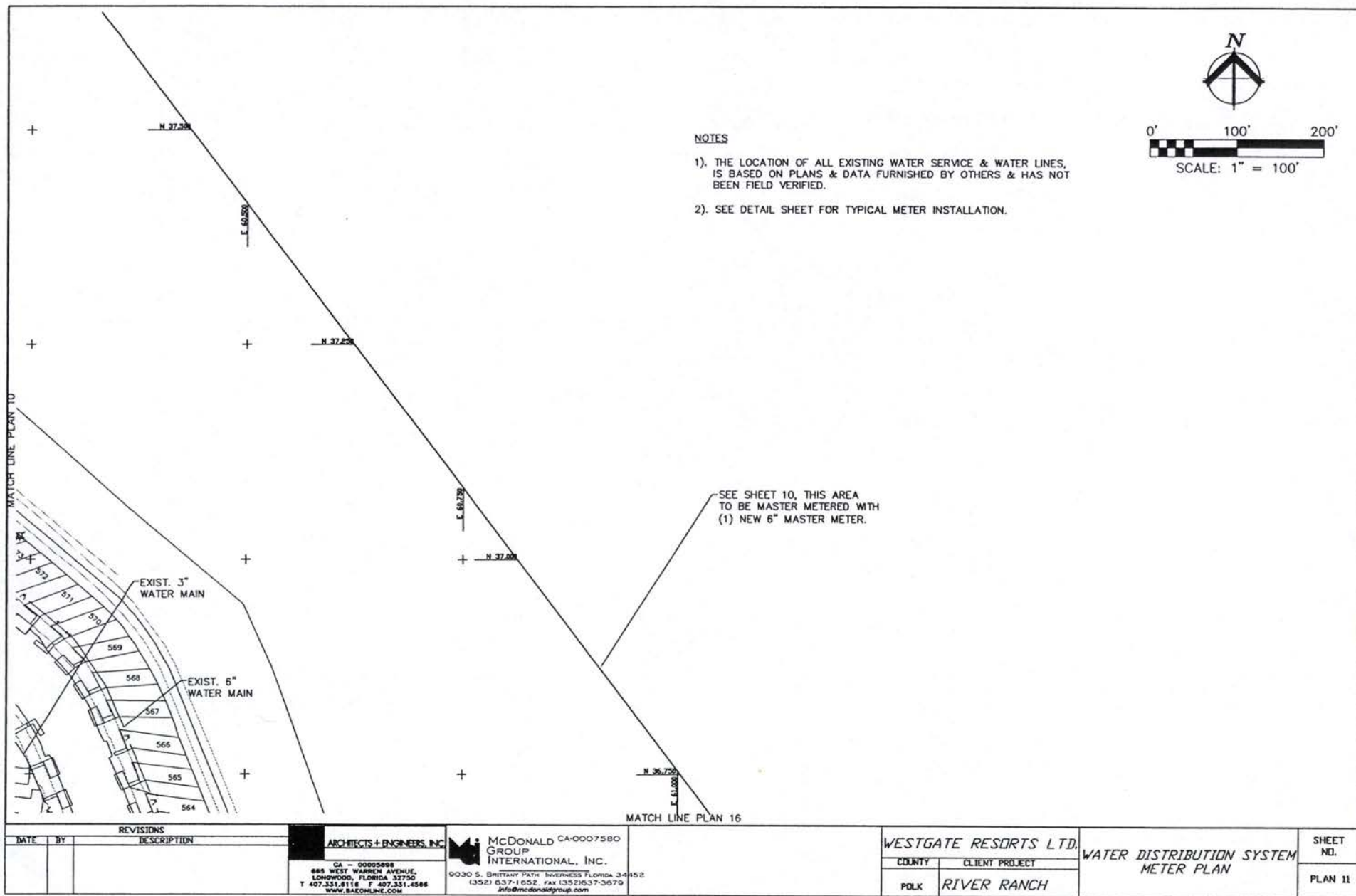






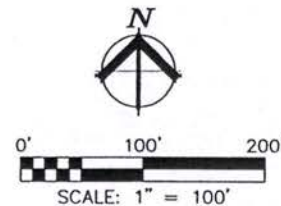







NOTES

- 1). THE LOCATION OF ALL EXISTING WATER SERVICE & WATER LINES, IS BASED ON PLANS & DATA FURNISHED BY OTHERS & HAS NOT BEEN FIELD VERIFIED.
- 2). SEE DETAIL SHEET FOR TYPICAL METER INSTALLATION.



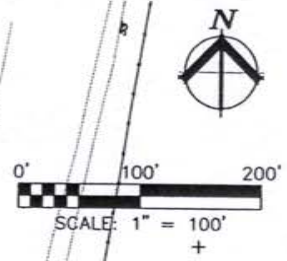
REVISIONS			MATCH LINE PLAN TO			WESTGATE RESORTS LTD.		WATER DISTRIBUTION SYSTEM METER PLAN	SHEET NO.  PLAN 11
DATE	BY	DESCRIPTION		McDonald GROUP INTERNATIONAL, INC.	CA-0007580 9030 S. BRITANNY PATH INVERNESS FLORIDA 34452 (352) 637-1652, FAX (352) 637-3679 info@mcdonaldgroup.com	COUNTY	CLIENT PROJECT		
						POLK	RIVER RANCH		

FT/INCHES

MATCH LINE PLAN 7

**NOTES**

- 1). THE LOCATION OF ALL EXISTING WATER, SERVICE & WATER LINES, IS BASED ON PLANS & DATA FURNISHED BY OTHERS & HAS NOT BEEN FIELD VERIFIED.
- 2). SEE DETAIL SHEET FOR TYPICAL METER INSTALLATION.



CONTRACTOR TO FIELD  
VERIFY IF WATER SERVICE  
PROVIDED TO THIS BUILDING  
& NOTIFY ENGINEER.

MATCH LINE PLAN 13

REVISIONS		
DATE	BY	DESCRIPTION

**ARCHITECTS + ENGINEERS, INC.**  
CA - 00005884  
645 WEST WARREN AVENUE,  
LODIWOOD, FLORIDA 32750  
T 407.331.8116 F 407.331.4586  
WWW.BAEONLINE.COM

**McDONALD GROUP INTERNATIONAL, INC.** CA-0007580  
9030 S. BRITTANY PATH, BURNING WOOD, FLORIDA 34452  
(352) 637-1652, FAX (352) 637-3670  
info@mcdonaldgroup.com

THIS SET IS RELEASED FOR:

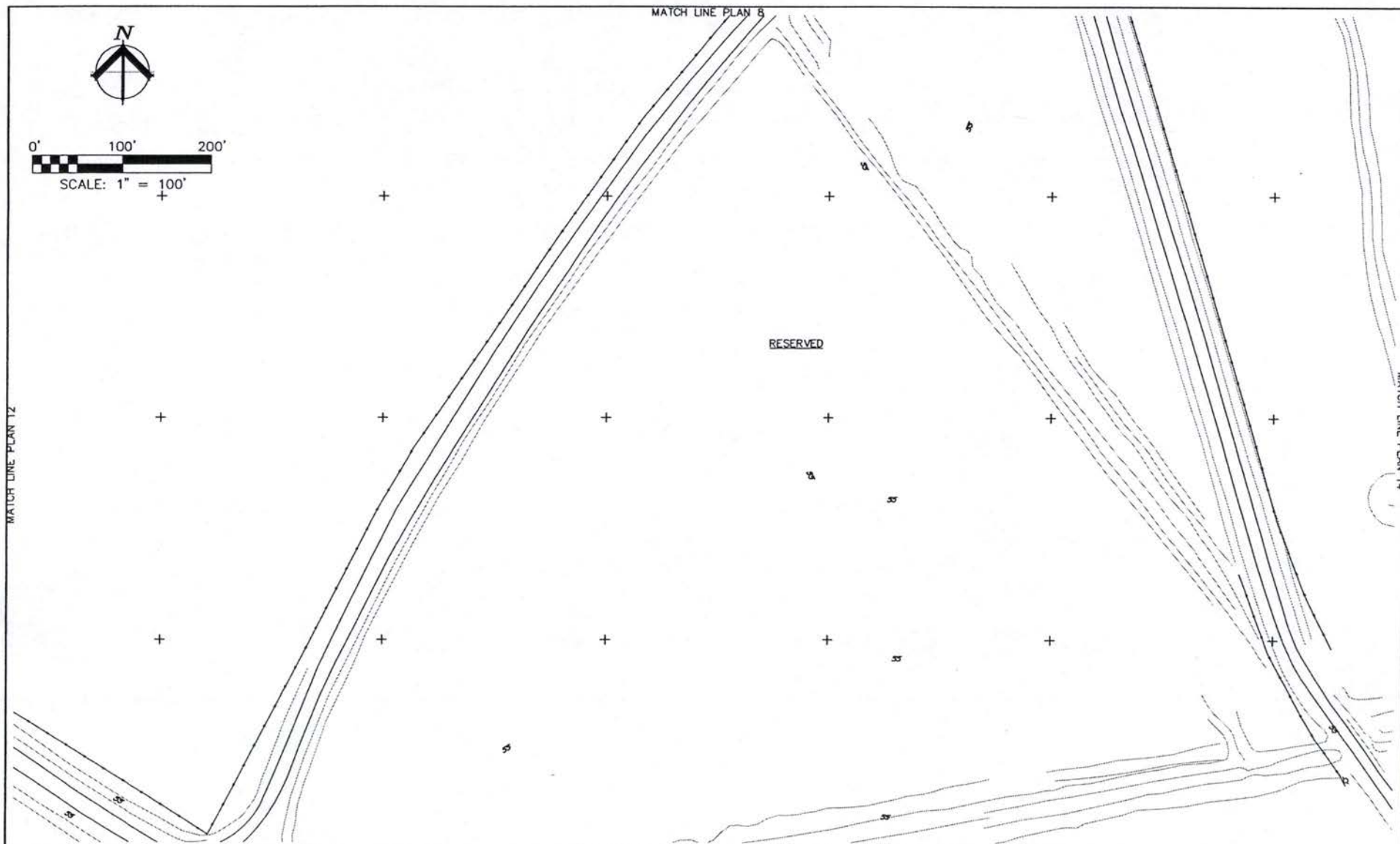
WESTGATE RESORTS LTD.	
COUNTY	CLIENT PROJECT
POLK	RIVER RANCH

WATER DISTRIBUTION SYSTEM  
METER PLAN

SHEET NO.
PLAN 12

8/10/04



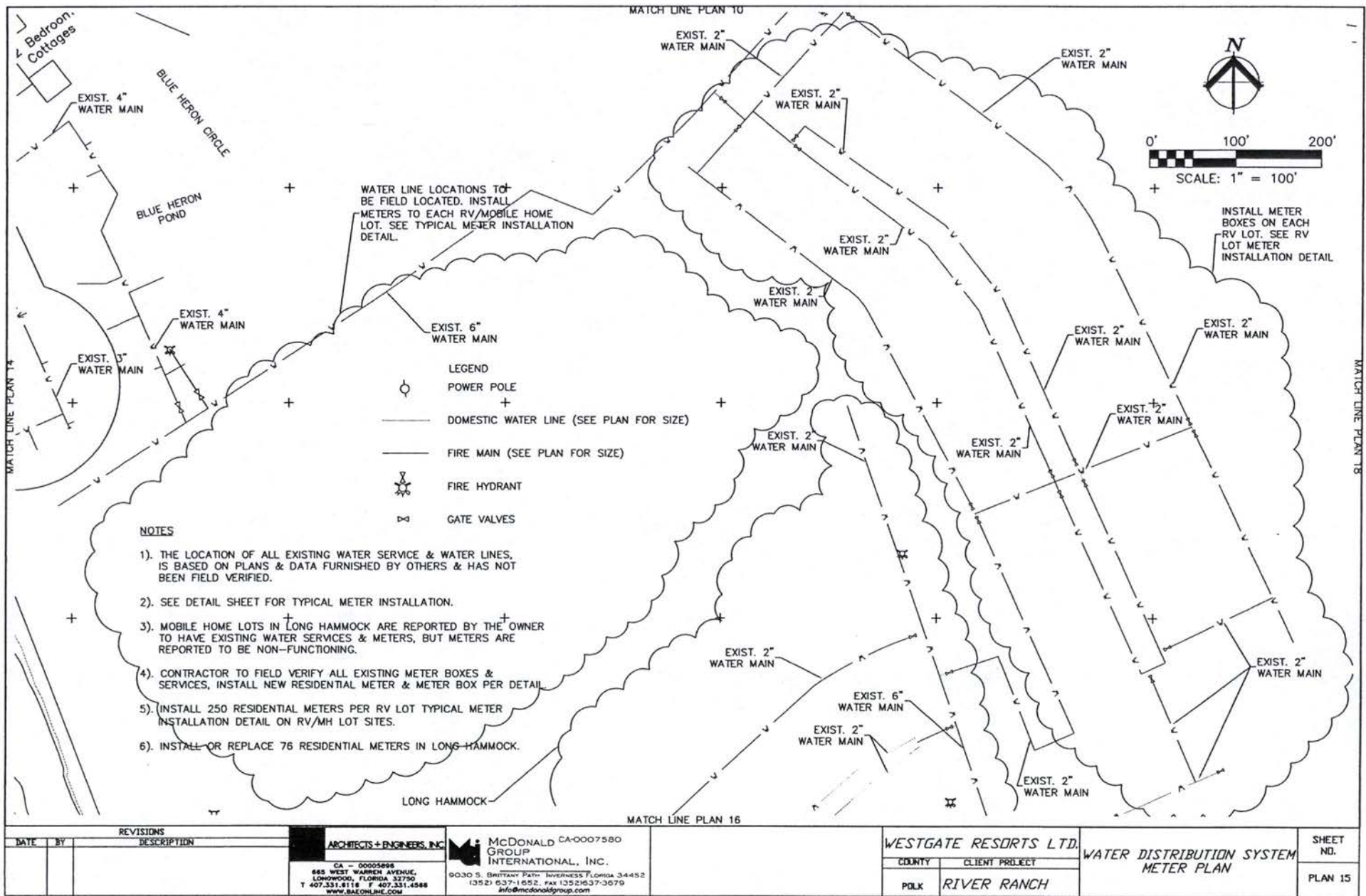


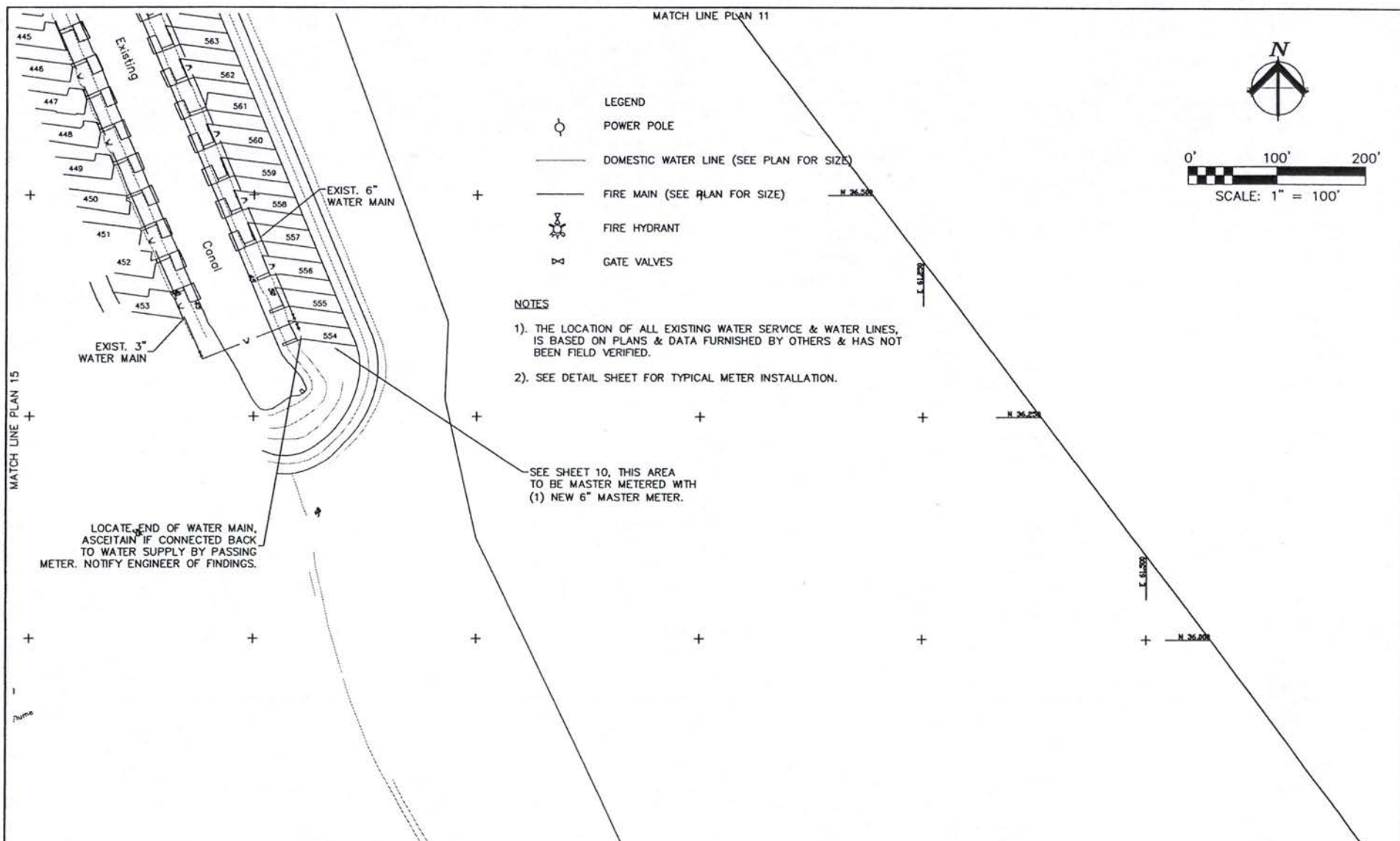
REVISIONS			ARCHITECTS + ENGINEERS, INC.	McDONALD CA-0007580 GROUP INTERNATIONAL, INC.	WESTGATE RESORTS LTD.		WATER DISTRIBUTION SYSTEM METER PLAN	SHEET NO.
DATE	BY	DESCRIPTION			COUNTY	CLIENT PROJECT		
			CA - 00005808 665 WEST WARREN AVENUE, LODIWOOD, FLORIDA 32790 T 407.331.6118 F 407.331.4586 WWW.BAEONLINE.COM	9030 S. BRITTANY PATH INVERNESS FLORIDA 34452 (352) 637-1652, FAX (352) 637-3679 info@mcdonaldgroup.com	POLK	RIVER RANCH		PLAN 13

STDC#DATE#





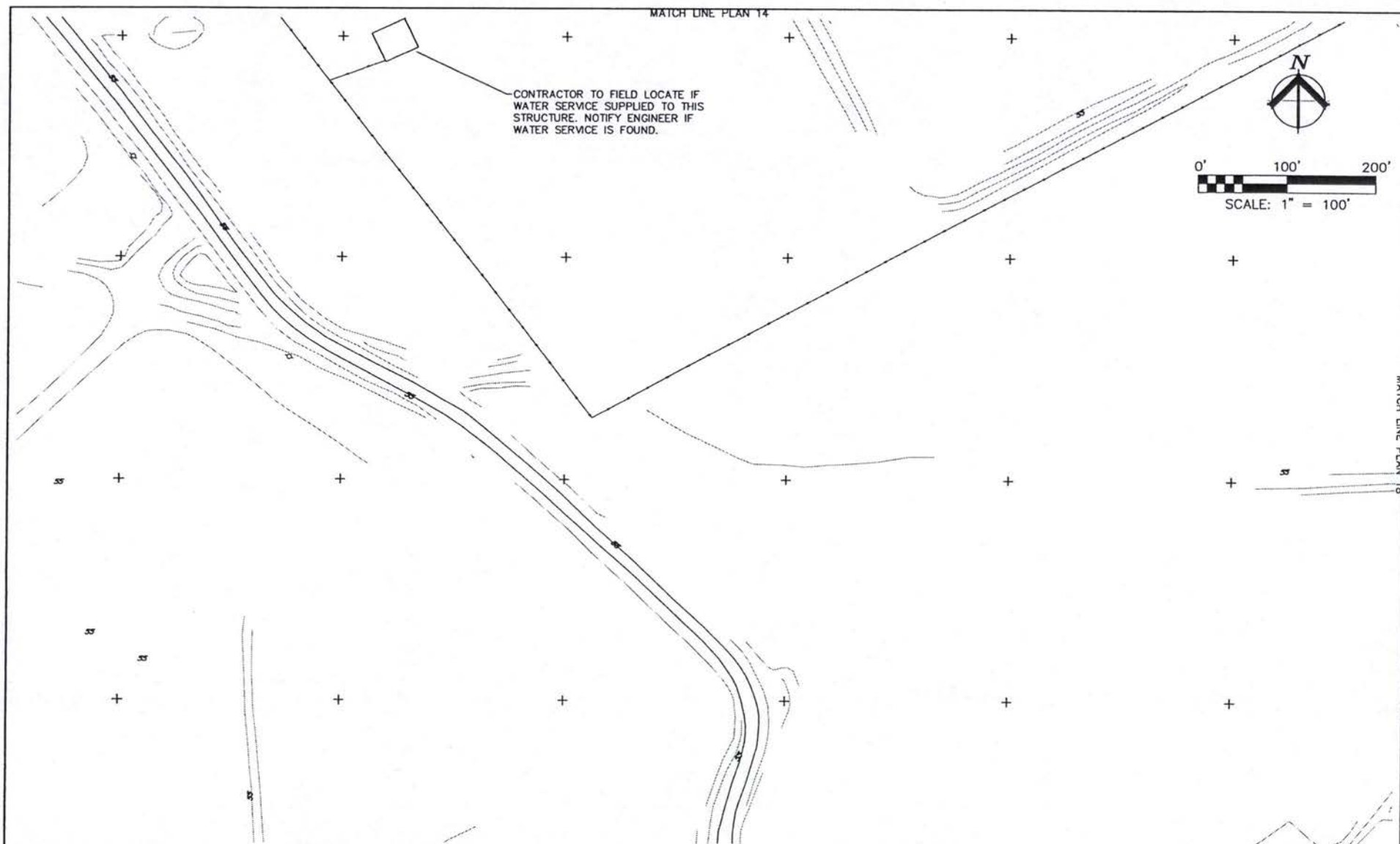





REVISIONS			ARCHITECTS + ENGINEERS, INC.	McDONALD GROUP INTERNATIONAL, INC.	WESTGATE RESORTS LTD.		WATER DISTRIBUTION SYSTEM METER PLAN	SHEET NO.  PLAN 16
DATE	BY	DESCRIPTION			COUNTY	CLIENT PROJECT		
			CA - 00005888 685 WEST WARRIOR AVENUE, LONGWOOD, FLORIDA 32750 T 407.331.8118 F 407.331.4566 WWW.BALCONLINE.COM	CA-0007580 9030 S. BRITANNY PATH BOVENSSESS FLORIDA 34452 (352) 637-1652 FAX (352) 637-3679 info@mcdonaldgroup.com	POLK	RIVER RANCH		

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REVISIONS				McDONALD GROUP INTERNATIONAL, INC. CA-0007580 9030 S. BRITTANY PATH, INVERNESS FLORIDA 34452 (352) 637-1652, FAX (352) 637-3679 info@mcdonaldgroup.com	WESTGATE RESORTS LTD.		WATER DISTRIBUTION SYSTEM METER PLAN	SHEET NO.  PLAN 17
DATE	BY	DESCRIPTION			COUNTY	CLIENT PROJECT		
					POLK	RIVER RANCH		

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