

# Merritt Island Utility Company

October 11, 2019

Office of Commission Clerk  
Florida Public Service Commission  
2540 Shumard Oak Blvd.  
Tallahassee, FL 32399-0850

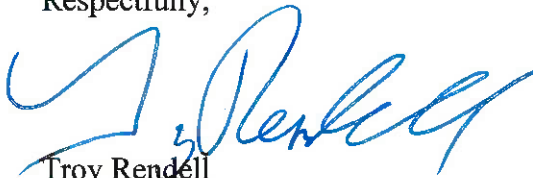
**Re:** Docket No. 20190116 – SU - Application for staff-assisted rate case in Brevard County, and request for interim rate increase by Merritt Island Utility Company – Revised December 2018 DMR

Dear Commission Clerk:

Merritt Island Utility Company (Merritt Island) submits the attached revised DMR for December 2018 for Merritt Island.

If you have any questions, please do not hesitate to contact me at (727) 848-8292, ext. 245.

Respectfully,



Troy Rendell  
Vice President  
Investor Owned Utilities  
*// for Merritt Island Utility Company*

### DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010377-006-DW3P  
 Monitoring Period: From: 12/01/2018 To: 12/31/2018

Facility: Merritt Island Utility Company WWTF

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow (Total flow through plant) MGD	
Code	80082	50060	74055	00600	00665	00530	00400	50050	
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-1	
1								0.0380	
2		1.70					7.50	0.0310	
3		1.70					7.40	0.0340	
4		1.00					7.00	0.0270	
5	<2.0	2.00	<4.0	27	5.7	30.0	7.00	0.0360	
6		2.30					6.90	0.0310	
7		1.90					7.00	0.0380	
8								0.0380	
9		1.80					7.30	0.0240	
10		1.80					7.40	0.0370	
11		1.90					6.70	0.0410	
12		1.80					7.30	0.0430	
13		1.90					7.00	0.0370	
14		2.30					7.10	0.0400	
15								0.0400	
16		1.80					7.50	0.0480	
17		1.80					7.40	0.0450	
18		1.70					7.50	0.0300	
19		1.90					7.10	0.0430	
20		1.70					7.20	0.0270	
21		1.90					7.20	0.0310	
22								0.0310	
23		1.70					7.40	0.0470	
24		1.70					7.30	0.0470	
25		1.80					7.30	0.0420	
26		2.00					7.30	0.0460	
27		1.90					7.30	0.0430	
28		1.90					7.30	0.0280	
29								0.0280	
30		1.80					7.20	0.0370**	
31		1.70					7.40	0.0370**	
Total								1.145	
Mo. Avg.							7.50	0.0370	

**PLANT STAFFING:**

Day Shift Operator      Class:   C        Certificate No:   23475        Name:   Jeffrey Martinez  

Evening Shift Operator      Class:                 Certificate No:                 Name:           

Night Shift Operator      Class:                 Certificate No:                 Name:           

Lead Operator      Class:                 Certificate No:                 Name:           

\*\*MADF used as there was a problem with the lift pumps

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

PERMITTEE NAME: Merritt Island Utility Company Inc ADDRESS: 4939 Cross Bayou Blvd New Port Richey, FL 34652  FACILITY: Merritt Island Utility Company WWTF LOCATION: 6710 Orleans Court Merritt Island, FL 32953  COUNTY: BREVARD	PERMIT NUMBER: FLA010377 LIMIT: FINAL REPORT: Monthly FACILITY TYPE: DW GROUP: Domestic MONITORING GROUP: R-001  DESCRIPTION: Rapid Infiltration Basin, including Influent  MONITORING PERIOD: From: 12/01/2018 To: 12/31/2018
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Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow  PARM Code 50050 Y Mon. Site: FLW-1	Sample Measurement	0.0188			0	5 Days/Week	Elapsed Time Measurement on Pump (Pump Log)
	Permit Requirement	0.07 (Annl Avg)	MGD			(5 Days/Week)	(Elapsed Time Measurement on Pump (Pump Log))
Flow  PARM Code 50050 1 Mon. Site: FLW-1	Sample Measurement	0.0370			0	5 Days/Week	Elapsed Time Measurement on Pump (Pump Log)
	Permit Requirement	Report (Mo Avg)	MGD			(5 Days/Week)	(Elapsed Time Measurement on Pump (Pump Log))
BOD, Carbonaceous 5 day, 20C  PARM Code 80082 Y Mon. Site: EFA-1	Sample Measurement		3.1		0	1 Monthly	Grab
	Permit Requirement		20.0 (Annl Avg)	mg/L		(1 Monthly)	(Grab)
BOD, Carbonaceous 5 day, 20C  PARM Code 80082 A Mon. Site: EFA-1	Sample Measurement		<2.0	<2.0	<2.0	1 Monthly	Grab
	Permit Requirement		60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	(1 Monthly)	(Grab)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 Y Mon. Site: EFA-1	Sample Measurement					20.4			1	1 Monthly	Grab
	Permit Requirement					20.0 (Annl Avg)		mg/L		(1 Monthly)	(Grab)
Solids, Total Suspended PARM Code 00530 A Mon. Site: EFA-1	Sample Measurement				30.0	30.0	30.0		0	1 Monthly	Grab
	Permit Requirement				60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L		(1 Monthly)	(Grab)
Coliform, Fecal PARM Code 74055 Y Mon. Site: EFA-1	Sample Measurement					1805.5			1	1 Monthly	Grab
	Permit Requirement					200.0 (Annl Avg)		#/100mL		(1 Monthly)	(Grab)
Coliform, Fecal PARM Code 74055 A Mon. Site: EFA-1	Sample Measurement					<4.0	<4.0		0	1 Monthly	Grab
	Permit Requirement					200.0 (Mo Geomn)	800.0 (Maximum)	#/100mL		(1 Monthly)	(Grab)
pH PARM Code 00400 A Mon. Site: EFA-1	Sample Measurement				6.70		7.50		0	5 Days/Week	Grab
	Permit Requirement				6.0 (Minimum)		8.5 (Maximum)	s.u.		(5 Days/Week)	(Grab)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Chlorine, Total Residual PARM Code 50060 A Mon. Site: EFA-1	Sample Measurement				1.0				0	5 Days/Week	Grab
	Permit Requirement				0.5 (Minimum)			mg/L		(5 Days/Week)	(Grab)
Nitrogen, Total PARM Code 00600 Y Mon. Site: EFA-1	Sample Measurement				25.08				0	1 Monthly	Grab
	Permit Requirement				Report (Annl Avg)			mg/L		(1 Monthly)	(Grab)
Nitrogen, Total PARM Code 00600 A Mon. Site: EFA-1	Sample Measurement					27.0			0	1 Monthly	Grab
	Permit Requirement					Report (Mo Avg)		mg/L		(1 Monthly)	(Grab)
Phosphorus, Total (as P) PARM Code 00665 Y Mon. Site: EFA-1	Sample Measurement				3.22				0	1 Monthly	Grab
	Permit Requirement				Report (Annl Avg)			mg/L		(1 Monthly)	(Grab)
Phosphorus, Total (as P) PARM Code 00665 A Mon. Site: EFA-1	Sample Measurement					5.7			0	1 Monthly	Grab
	Permit Requirement					Report (Mo Avg)		mg/L		(1 Monthly)	(Grab)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow  PARM Code 50050 P Mon. Site: FLW-1	Sample Measurement		0.0188						0	5 Days/Week	Elapsed Time Measurement on Pump (Pump Log)
	Permit Requirement		0.07 (Annl Avg)	MGD						(5 Days/Week)	(Elapsed Time Measurement on Pump (Pump Log))
Flow  PARM Code 50050 Q Mon. Site: FLW-1	Sample Measurement	0.024	0.0370						0	5 Days/Week	Elapsed Time Measurement on Pump (Pump Log)
	Permit Requirement	Report (Qtr Avg)	Report (Mo Avg)	MGD						(5 Days/Week)	(Elapsed Time Measurement on Pump (Pump Log))
Percent Capacity, (TMADF/Permitted Capacity) x 100  PARM Code 00180 P Mon. Site: CAL-1	Sample Measurement						34		0	1 Monthly	Calculated
	Permit Requirement						Report (Mo Avg)	percent		(1 Monthly)	(Calculated)
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Tonya Luning	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 GATHERED AND EVALUATED 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.						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Electronically Signed		TELEPHONE  (727) 848-8292	SUBMITTED ON  10/09/2019	

Parameter	Monitoring Site	Comments for Monitoring Group - R-001
00530 Y	EFA-1	The plant has had numerous issues in the past year which resulted in the annual average TSS failure. The plant has now been operating in better conditions and the monthly TSS results are with in permitted limits
74055 Y	EFA-1	The fecal annual average failure originated in November 2018. All subsequent months averages have been with in permitted limits.

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Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Biosolids Quantity (Transferred) PARM Code B0007 + Mon. Site: RMP-1	<b>Sample Measurement</b>	0			0	1 Monthly	Calculated	
	<b>Permit Requirement</b>	Report (Mo Total)	dry tons			(1 Monthly)	(Calculated)	
Biosolids Quantity (Landfilled) PARM Code B0008 + Mon. Site: RMP-1	<b>Sample Measurement</b>	0			0	1 Monthly	Calculated	
	<b>Permit Requirement</b>	Report (Mo Total)	dry tons			(1 Monthly)	(Calculated)	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Tonya Luning	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 GATHERED AND EVALUATED 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.				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Electronically Signed		TELEPHONE  (727) 848-8292	SUBMITTED ON  10/09/2019