

FLORIDA UTILITY SERVICES 1, LLC  
5911 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL. 34652  
863-904-5574

October 20, 2020

Commission Clerk  
Florida Public Service Commission  
2540 Shumard Oak Blvd.  
Tallahassee, FL. 32399

COMMISSION  
CLERK

2020 OCT 27 PM 12:38

RECEIVED-FPSC

RE: Application for a staff assisted rate case for Lake Yale  
Utilities, LLC Docket # 20200169

Dear Commission Clerk:

Enclosed please find the company's response to staff's second  
data request.

On behalf of the company,



Mike Smallridge.



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

See page 4 for instructions.

**I. General Information for the Month/Year of:** Feb / 2019

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

PWS Name: Sandpiper		PWS Identification Number: 3351115	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 150		Total Population Served at End of Month: 270	
PWS Owner: Lake Yale Utility Company, 11643 Martel Court, Leesburg, FL 34788			
Contact Person: T. Felton		Contact Person's Title: Operator	
Contact Person's Mailing Address: P.O. Box 491221		City: Leesburg	State: Florida Zip Code: 34749-1221
Contact Person's Telephone Number: 352-787-2493		Contact Person's Fax Number: 352-326-8756	
Contact Person's E-Mail Address: generalutilities@AOL.com			

**B. Water Treatment Plant Information**

Plant Name: Sandpiper		Plant Telephone Number: 352-589-9212		
Plant Address: C R 452		City: Leesburg	State: Florida Zip Code: 34788	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 162,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): D		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	T. Felton	C	0002241	Varies
Other Operators:	D. Harris	A	0014540	Varies
	K. Ramsod	C	0015224	Varies
	T. Levi	C	0012911	Varies
	D. Longfellow	C	0017972	Varies
	T. Hill	C	0024143	Varies

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

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

Signature and Date	<u>3/1/19</u> Printed or Typed Name	0002241 License Number
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II. Daily Data for the Month/Year of: **FEB / 2019**

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	✓	24	15 000											0.7	
2		24	9 000											0.7	
3	✓	24	9 000											0.7	
4	✓	24	23 000											0.7	
5	✓	24	26 000											0.6	
6	✓	24	21 000											0.7	
7	✓	24	14 000											0.7	
8	✓	24	2 000											0.7	
9	✓	24	6 000											0.7	
10	✓	24	21 000											0.6	
11	✓	24	32 000											0.7	
12	✓	24	34 000											0.7	
13	✓	24	9 000											0.7	
14	✓	24	8 000											0.7	
15	✓	24	9 000											0.7	
16		24	7 000											0.8	
17	✓	24	7 000											0.8	DAC
18	✓	24	45 000											0.7	
19	✓	24	21 000											0.7	
20	✓	24	14 000											0.7	
21	✓	24	19 000											0.6	
22	✓	24	8 000											0.7	
23		24	21 000											0.7	
24	✓	24	21 000											0.7	
25	✓	24	11 000											0.7	
26	✓	24	19 000											0.6	
27	✓	24	16 000											0.7	
28	✓	24	17 000											0.7	
			000												
			000												
			000												
Total			464 000												
Average			17 000												
Maximum			45 000												



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

See page 4 for instructions.

**I. General Information for the Month/Year of:** FEB / 2019

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

PWS Name: Lake Yale		PWS Identification Number: 3354688	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 58		Total Population Served at End of Month: 101	
PWS Owner: Lake Yale Utility Company, 11643 Martel Court, Leesburg, FL 34788			
Contact Person: T. Felton		Contact Person's Title: Operator	
Contact Person's Mailing Address: P.O. Box 491221		City: Leesburg	State: Florida Zip Code: 34749-1221
Contact Person's Telephone Number: 352-787-2493		Contact Person's Fax Number: 352-326-8756	
Contact Person's E-Mail Address: generalutilities@AOL.com			

**B. Water Treatment Plant Information**

Plant Name: Lake Yale		Plant Telephone Number: 352-589-9212	
Plant Address: 11643 Martel Court		City: Leesburg	State: Florida Zip Code: 34788
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 468,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): D	
Licensed Operators	Name	License Class	License Number Day(s)/Shift(s) Worked
Lead/Chief Operator:	T. Felton	C	0002241 Varies
Other Operators:	D. Harris	A	0014540 Varies
	K. Ramsood	C	0015224 Varies
	T. Levi	C	0012911 Varies
	D. Longfellow	C	0017972 Varies
	T. Hill	C	0024143 Varies

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

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

Signature and Date: 3/1/19 Thomas M. Felton  
 Printed or Typed Name: Thomas M. Felton  
 License Number: 0002241

III. Daily Data for the Month/Year of FEB / 2019

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

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

Day of the Month	Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>				
1	✓	24	7 000												0.4	
2		24	18 000													
3	✓	24	19 000												0.4	
4	✓	24	39 000												0.5	
5	✓	24	47 000												0.5	
6	✓	24	31 000												0.5	
7	✓	24	14 000												0.5	
8	✓	24	11 000												0.5	
9	✓	24	7 000												0.7	
10	✓	24	37 000												0.7	
11	✓	24	35 000												0.7	
12	✓	24	38 000												0.6	
13	✓	24	7 000												0.7	
14	✓	24	25 000												0.7	
15	✓	24	21 000												0.6	
16		24	14 000													
17	✓	24	15 000												0.6	BACT
18	✓	24	61 000												0.7	
19	✓	24	23 000												0.7	
20	✓	24	18 000												0.7	
21	✓	24	34 000												0.7	
22	✓	24	13 000												0.7	
23		24	29 000													
24	✓	24	29 000												0.7	
25	✓	24	16 000												0.7	
26	✓	24	29 000												0.7	
27	✓	24	23 000												0.7	
28	✓	24	16 000												0.7	
			000													
			000													
			000													
Total			677 000													
Average			24 000													
Maximum			61 000													

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

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

PERMITTEE NAME: Lake Yale Utilities LLC ADDRESS: 18700 W 10 Mile Rd Southfield, MI 48075  FACILITY: Lake Yale Estates WWTF LOCATION: 37802 County Road 452 Lccsburg, FL 34788  COUNTY: LAKE	PERMIT NUMBER: FLA010547 LIMIT: FINAL REPORT: Monthly FACILITY TYPE: DW GROUP: Domestic MONITORING GROUP: R-001  DESCRIPTION: Rapid Infiltration Basin, including Influent  MONITORING PERIOD: From: 02/01/2019 To: 02/28/2019
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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		0.007						0	5 Days/Week	Recording Flow Meter with Totalizer
	Permit Requirement		0.055 (Annl Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 1 Mon. Site: FLW-1	Sample Measurement		0.014						0	5 Days/Week	Recording Flow Meter with Totalizer
	Permit Requirement		Report (Mo Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
BOD, Carbonaceous 5 day, 20C  PARM Code 80082 Y Mon. Site: EFA-1	Sample Measurement				8.8				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				9.0	9.0	9.0		0	1 Monthly	Grab
	Permit Requirement				60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L		(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					2.6			0	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				3.0	3.0	3.0		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					4			0	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					12	12		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				7.3		7.4		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				1.6				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					17.1			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					18.6			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					3.5			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					6.1			0	1 Monthly	Grab
	Permit Requirement					Report (Mo Avg)		mg/L		(1 Monthly)	(Grab)



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

PERMITTEE NAME: Lake Yale Utilities LLC ADDRESS: 18700 W 10 Mile Rd Southfield, MI 48075  FACILITY: Lake Yale Estates WWTF LOCATION: 37802 County Road 452 Lccsburg, FL 34788  COUNTY: LAKE	PERMIT NUMBER: FLA010547 LIMIT: FINAL REPORT: Monthly FACILITY TYPE: DW GROUP: Domestic MONITORING GROUP: RMP-Q  DESCRIPTION: Biosolids Quantity  MONITORING PERIOD: From: 02/01/2019 To: 02/28/2019
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Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Transferred)	<b>Sample Measurement</b>	0				0	1 Monthly	Calculated
PARM Code B0007 + Mon. Site: RMP-1	<b>Permit Requirement</b>	Report (Mo Total)	dry tons				(1 Monthly)	(Calculated)
Biosolids Quantity (Landfilled)	<b>Sample Measurement</b>	0				0	1 Monthly	Calculated
PARM Code B0008 + Mon. Site: RMP-1	<b>Permit Requirement</b>	Report (Mo Total)	dry tons				(1 Monthly)	(Calculated)
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Thomas M. Felton	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  (352) 787-2493	SUBMITTED ON  03/07/2019

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		0.007						0	5 Days/Week	Recording Flow Meter with Totalizer
	Permit Requirement		0.055 (Annl Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 Q Mon. Site: FLW-1	Sample Measurement	0.011	0.014						0	5 Days/Week	Recording Flow Meter with Totalizer
	Permit Requirement	Report (Qtr Avg)	Report (Mo Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
Percent Capacity, (TMADF/Permitted Capacity) x 100  PARM Code 00180 1 Mon. Site: FLW-1	Sample Measurement						21		0	1 Monthly	Calculated
	Permit Requirement						Report (Mo Avg)	percent		(1 Monthly)	(Calculated)
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Thomas M. Felton	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  (352) 787-2493	SUBMITTED ON  03/07/2019	

## DAILY SAMPLE RESULTS - PART B

 Permit Number:  
Monitoring Period

FLA010547-004-DW3P

 From: 1 FEB 2019 through: 28 FEB 2019

Facility: Lake Yale Estates WWTF

Permit Exp. 29-May-2027

	BOD, Carbonaceous 5 day, 20C monthly max: 60 mg/L	Solids, Total Suspended monthly max: 60 mg/L	Coliform, Fecal #/100mL monthly max: 200 #/100mL	Chlorine, Total Residual mg/L 5 days/wk min: 0.5	pH s.u. 5 days/wk range: (6.0-8.5)	Flow (Flow thru plant) X 1000 permitted: 55,000 gal	Nitrogen, Total mg/L monthly	Phosphorus, Total (as P) mg/L monthly	Nitrate (as N) annually max: 12 mg/L	BOD, Carbonaceous 5 day, 20C mg/L annually	Solids, Total Suspended mg/L annually
	80082	00530	74055	50060	00400	50050	00600	00665	JAN 00620	JAN 80082	JAN 05530
Code	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1
1				2.0	7.4	9					
2						11					
3				2.1	7.4	11					
4				2.2	7.3	23					
5				2.2	7.3	26					
6				2.2	7.3	8					
7				2.2	7.3	19	18.6	6.1			
8				2.2	7.3	8					
9				2.2	7.3	4					
10				2.2	7.3	23					
11				2.2	7.3	26					
12				2.2	7.3	25					
13	9.0	3.0	12	2.2	7.3	11					
14				2.2	7.3	18					
15				2.2	7.3	12					
16				2.2	7.3	20					
17				2.2	7.3	20					
18				2.2	7.3	21					
19				1.4	7.4	16					
20				1.8	7.4	14					
21				1.8	7.4	26					
22				2.0	7.4	9					
23						9					
24				1.9	7.4	9					
25				2.2	7.4	5					
26				2.2	7.4	5					
27				2.2	7.4	6					
28				2.2	7.4	3					
29											
30											
31											
Total						397					
Mo. Avg.	9.0	3.0	12			14	18.6	6.1			

**PLANT STAFFING:**

Day Shift Operator	Class: <u>A</u>	Certificate No: <u>0014107</u>	Name: <u>D. Harris</u>
Evening Shift Operator	Class: <u>C</u>	Certificate No: <u>0012637</u>	Name: <u>T. Levi</u>
Night Shift Operator	Class: <u>C</u>	Certificate No: <u>0023328</u>	Name: <u>T. Hill</u>
Lead Operator	Class: <u>C</u>	Certificate No: <u>0002817</u>	Name: <u>T. Felton</u>

General Utilities Corp.  
7261 Frog Log Ln  
Leesburg, Florida 34748  
Attention: Mr T. Felton

PROJECT NAME  
Lake Yale

Final Report

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	TECH:
02/13/19	19-02-301-1	02/13/19 1150	CBOD	SM 5210B	9.0	mg/L	*	DB
			TSS	SM2540D	3.0	mg/L	02/16/19 0900	DB
			Effluent					
02/13/19	19-02-301-2	02/13/19 1150	Fecal Coliform	SM 9222D	12	Cfu's/100mls	02/13/19 1640	DB
			Effluent					

\*CBOD Date & Time Setup: 02/13/19 1745  
Date & Time Read :02/18/19 1600

U - Material was analyzed for but not detected;  
The value reported is the minimum detection limit.

0.16 grams of TCMP was added for CBOD analysis as nitrification inhibitor.

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable. This report shall not be reproduced except in full without the written approval from the laboratory.

Reviewed By : *Tamara Lal*  
Title : Quality Control Director  
Date Reviewed: Feb 20, 2019

### ANALYTICAL RESULTS

Project: Lake Yale  
Pace Project No.: 35446229

Sample: WW Effluent-LY Lab ID: 35446229001 Collected: 02/06/19 09:21 Received: 02/06/19 16:15 Matrix: Water

Parameters	Results	Units	PQL	MDL	DF	Prepared	Analyzed	CAS No.	Qual
<b>Total Nitrogen Calculation</b>	Analytical Method: TKN+NOx Calculation								
Total Nitrogen	18.6	mg/L	0.50	0.086	1		02/11/19 17:39		
<b>351.2 Total Kjeldahl Nitrogen</b>	Analytical Method: EPA 351.2 Preparation Method: EPA 351.2								
Nitrogen, Kjeldahl, Total	0.086 U	mg/L	0.50	0.086	1	02/07/19 08:40	02/08/19 13:29	7727-37-9	J(M1)
<b>353.2 Nitrogen, NO2/NO3 pres.</b>	Analytical Method: EPA 353.2								
Nitrogen, NO2 plus NO3	18.6	mg/L	0.25	0.12	5		02/07/19 16:53		
<b>365.4 Phosphorus, Total</b>	Analytical Method: EPA 365.4 Preparation Method: EPA 365.4								
Phosphorus, Total (as P)	6.1	mg/L	0.10	0.050	1	02/07/19 08:40	02/08/19 13:29	7723-14-0	

### REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,  
without the written consent of Pace Analytical Services, LLC.



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

See page 4 for instructions.

**I. General Information for the Month/Year of:** SEPT / 2019

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


PWS Name: Lake Yale		PWS Identification Number: 3354688	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 58		Total Population Served at End of Month: 101	
PWS Owner: Lake Yale Utility Company, 11643 Martel Court, Leesburg, FL 34788			
Contact Person: T. Felton		Contact Person's Title: Operator	
Contact Person's Mailing Address: P.O. Box 491221		City: Leesburg	State: Florida Zip Code: 34749-1221
Contact Person's Telephone Number: 352-787-2493		Contact Person's Fax Number: 352-326-8756	
Contact Person's E-Mail Address: generalutilities@AOL.com			

**B. Water Treatment Plant Information**

Plant Name: Lake Yale		Plant Telephone Number: 352-589-9212		
Plant Address: 11643 Martel Court		City: Leesburg	State: Florida Zip Code: 34788	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 468,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): D		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	T. Felton	C	0002241	Varies
Other Operators:	D. Harris	A	0014540	Varies
	K. Ramsdod	C	0015224	Varies
	T. Levi	C	0012911	Varies
	T. Hill	C	0024143	Varies
	D. Longfellow	C	0017972	Varies
	T. Haught	C	0025043	Varies

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

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

Signature and Date:  10/1/19 Thomas M. Felton  
 Printed or Typed Name: \_\_\_\_\_ License Number: 0002241

III. Daily Data for the Month/Year of SEPT / 2019

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>		
1		24	18 000										
2	✓	24	19 000									0.4	
3	✓	24	24 000									0.4	
4	✓	24	21 000									0.3	
5	✓	24	17 000									0.2	
6	✓	24	16 000									0.4	
7		24	18 000										
8	✓	24	18 000									0.5	
9	✓	24	45 000									0.4	
10	✓	24	14 000									0.2	
11	✓	24	40 000									0.2	
12	✓	24	45 000									0.2	
13	✓	24	21 000									0.3	BT
14		24	23 000									0.4	
15	✓	24	23 000									0.5	
16	✓	24	37 000									0.4	
17	✓	24	39 000									0.5	
18	✓	24	31 000									0.2	
19	✓	24	24 000									0.3	
20	✓	24	28 000									0.2	
21		24	13 000									0.2	
22	✓	24	13 000									0.2	
23	✓	24	14 000									0.2	
24	✓	24	9 000									0.2	
25	✓	24	13 000									0.5	
26	✓	24	16 000									0.4	
27	✓	24	16 000									1.0	
28		24	21 000										
29	✓	24	21 000									1.0	
30	✓	24	12 000									1.0	
Total			669 000										
Average			22 000										
Maximum			45 000										

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



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

See page 4 for instructions.

**I. General Information for the Month/Year of:** SEPT / 2019

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

PWS Name: Sandpiper		PWS Identification Number: 3351115	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 150		Total Population Served at End of Month: 270	
PWS Owner: Lake Yale Utility Company, 11643 Martel Court, Leesburg, FL 34788			
Contact Person: T. Felton		Contact Person's Title: Operator	
Contact Person's Mailing Address: P.O. Box 491221		City: Leesburg	State: Florida Zip Code: 34749-1221
Contact Person's Telephone Number: 352-787-2493		Contact Person's Fax Number: 352-326-8756	
Contact Person's E-Mail Address: generalutilities@AOL.com			

**B. Water Treatment Plant Information**

Plant Name: Sandpiper		Plant Telephone Number: 352-589-9212		
Plant Address: C R 452		City: Leesburg	State: Florida Zip Code: 34788	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 162,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): D		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	T. Felton	C	0002241	Varies
Other Operators	D. Harris	A	0014540	Varies
	K. Ramsdod	C	0015224	Varies
	T. Levi	C	0012911	Varies
	T. Hill	C	0024143	Varies
	D. Longfellow	C	0017972	Varies
	T. Haught	C	0025043	Varies

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

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

Signature and Date: *[Signature]* 10/1/19 Thomas M. Felton  
 Printed or Typed Name: \_\_\_\_\_ License Number: 0002241



PWS Identification Number: 3351115

Plant Name: SANDPIPER

H. Daily Data for the Month/Year of: SEPT / 2019

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	✓	24	000											0.4	-
2	✓	24	000											0.3	
3	✓	24	000											0.4	
4	✓	24	000											0.5	
5	✓	24	000											0.4	
6	✓	24	000											0.5	
7		24	000												
8	✓	24	000											0.8	
9	✓	24	000											0.7	
10	✓	24	000											0.7	
11	✓	24	000											0.2	
12	✓	24	000											0.5	
13	✓	24	000											0.5	BACT
14		24	000											0.6	
15	✓	24	000												
16	✓	24	000											0.7	
17	✓	24	000											0.7	
18	✓	24	000											0.5	
19	✓	24	000											0.2	
20	✓	24	000											0.2	
21		24	000											0.2	
22	✓	24	000												
23	✓	24	000											0.4	
24	✓	24	000											0.5	
25	✓	24	000											0.5	
26	✓	24	000											0.4	
27	✓	24	000											0.6	
28		24	000											0.5	
29	✓	24	000												
30	✓	24	000											0.4	
			000											0.5	
Total			000												
Average			000												
Maximum			000												

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

<b>PERMITTEE NAME:</b> Lake Yale Utilities LLC <b>ADDRESS:</b> 18700 W 10 Mile Rd Southfield, MI 48075  <b>FACILITY:</b> Lake Yale Estates WWTF <b>LOCATION:</b> 37802 County Road 452 Leesburg, FL 34788  <b>COUNTY:</b> LAKE	<b>PERMIT NUMBER:</b> FLA010547 <b>LIMIT:</b> FINAL <b>REPORT:</b> Monthly <b>FACILITY TYPE:</b> DW <b>GROUP:</b> Domestic <b>MONITORING GROUP:</b> R-001  <b>DESCRIPTION:</b> Rapid Infiltration Basin, including Influent  <b>MONITORING PERIOD:</b> From: 09/01/2019 To: 09/30/2019
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Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.006			0	5 Days/Week	Recording Flow Meter with Totalizer
PARM Code 50050 Y Mon. Site: FLW-1	Permit Requirement	0.055 (Annl Avg)	MGD			(5 Days/Week)	(Recording Flow Meter with Totalizer)
Flow	Sample Measurement	0.003			0	5 Days/Week	Recording Flow Meter with Totalizer
PARM Code 50050 1 Mon. Site: FLW-1	Permit Requirement	Report (Mo Avg)	MGD			(5 Days/Week)	(Recording Flow Meter with Totalizer)
BOD, Carbonaceous 5 day, 20C	Sample Measurement			8.6	0	1 Monthly	Grab
PARM Code 80082 Y Mon. Site: EFA-1	Permit Requirement			20.0 (Annl Avg)	mg/L	(1 Monthly)	(Grab)
BOD, Carbonaceous 5 day, 20C	Sample Measurement		8.0	8.0	0	1 Monthly	Grab
PARM Code 80082 A Mon. Site: EFA-1	Permit Requirement			60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L (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					2.6			0	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				2.0	2.0	2.0		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					5			0	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					9	9		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				7.3		7.4		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					13.0			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					1.7			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					2.7			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					0.4			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		0.006						0	5 Days/Week	Recording Flow Meter with Totalizer
	Permit Requirement		0.055 (Annl Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 Q Mon. Site: FLW-1	Sample Measurement	0.004	0.003						0	5 Days/Week	Recording Flow Meter with Totalizer
	Permit Requirement	Report (Qtr Avg)	Report (Mo Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
Percent Capacity, (TMADF/Permitted Capacity) x 100  PARM Code 00180 1 Mon. Site: FLW-1	Sample Measurement					7			0	1 Monthly	Calculated
	Permit Requirement					Report (Mo Avg)	percent			(1 Monthly)	(Calculated)
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Thomas M. Felton	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  (352) 787-2493	SUBMITTED ON  10/03/2019	

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

<b>PERMITTEE NAME:</b> Lake Yale Utilities LLC <b>ADDRESS:</b> 18700 W 10 Mile Rd Southfield, MI 48075  <b>FACILITY:</b> Lake Yale Estates WWTF <b>LOCATION:</b> 37802 County Road 452 Leesburg, FL 34788  <b>COUNTY:</b> LAKE	<b>PERMIT NUMBER:</b> FLA010547 <b>LIMIT:</b> FINAL REPORT: Monthly <b>FACILITY TYPE:</b> DW GROUP: Domestic <b>MONITORING GROUP:</b> RMP-Q  <b>DESCRIPTION:</b> Biosolids Quantity  <b>MONITORING PERIOD:</b> From: 09/01/2019 To: 09/30/2019
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Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Transferred)	Sample Measurement	0.89				0	1 Monthly	Calculated
PARM Code B0007 + Mon. Site: RMP-1	Permit Requirement	Report (Mo Total)	dry tons				(1 Monthly)	(Calculated)
Biosolids Quantity (Landfilled)	Sample Measurement	0				0	1 Monthly	Calculated
PARM Code B0008 + Mon. Site: RMP-1	Permit Requirement	Report (Mo Total)	dry tons				(1 Monthly)	(Calculated)
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Thomas M. Felton	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  (352) 787-2493	SUBMITTED ON  10/03/2019

## DAILY SAMPLE RESULTS - PART B

 Permit Number:  
 Monitoring Period

 FLA010547-004-DW3P  
 From: 1 SEPT 2019

 through: 30 SEPT 2019

Facility: Lake Yale Estates WWTF

Permit Exp. 29-May-2027

	BOD, Carbonaceous 5 day, 20C monthly max: 60 mg/L	Solids, Total Suspended monthly max: 60 mg/L	Coliform, Fecal #/100mL monthly max: 200 #/100mL	Chlorine, Total Residual mg/L 5 days/wk min: 0.5	pH s.u. 5 days/wk range: (6.0-8.5)	Flow (Flow thru plant) X 1000 permitted: 55,000 gal	Nitrogen, Total mg/L monthly	Phosphorus, Total (as P) mg/L monthly	Nitrate (as N) annually max: 12 mg/L	BOD, Carbonaceous 5 day, 20C mg/L annually	Solids, Total Suspended mg/L annually	
Code	80082	00530	74055	50060	00400	50050	00600	00665	00620	JAN	JAN	JAN
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1	INF-1
1				1.8	7.4	5						
2				1.8	7.4	5						
3				1.6	7.4	5						
4				1.7	7.3	5	1.7	0.41				
5				1.8	7.4	4						
6				1.7	7.4	6						
7						5						
8				1.8	7.4	6						
9				1.8	7.4	2						
10				1.7	7.4	2						
11				2.2	7.4	7						
12	8.0	2.0	9	2.0	7.4	3						
13				1.8	7.4	1						
14						1						
15				1.9	7.3	2						
16				1.0	7.4	4						
17				1.0	7.4	5						
18				2.2	7.4	1						
19				2.2	7.4	1						
20				2.2	7.4	1						
21						2						
22				2.2	7.4	3						
23				2.2	7.4	5						
24				2.2	7.4	1						
25				2.2	7.4	1						
26				2.2	7.4	2						
27				2.2	7.4	1						
28						2						
29				2.0	7.4	2						
30				2.0	7.4	3						
31						—						
Total						93						
Mo. Avg.	8.0	2.0	9			3	1.7	0.41				

\* 18th Dry Tons 0.89

**PLANT STAFFING:**

Day Shift Operator	Class: <u>A</u>	Certificate No: <u>0014107</u>	Name: <u>D. Harris</u>
Evening Shift Operator	Class: <u>C</u>	Certificate No: <u>0012637</u>	Name: <u>T. Levi</u>
Night Shift Operator	Class: <u>C</u>	Certificate No: <u>0023328</u>	Name: <u>T. Hill</u>
Lead Operator	Class: <u>C</u>	Certificate No: <u>0002817</u>	Name: <u>T. Felton</u>

General Utilities Corp.  
7261 Frog Log Ln  
Leesburg, Florida 34748  
Attention: Mr T. Felton

PROJECT NAME  
Lake Yale

Final Report

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	TECH:
09/12/19	19-09-246-1	09/12/19 1028	CBOD TSS Effluent	SM 5210B SM2540D	8.0 2.0	mg/L mg/L	* 09/18/19 0930	DB DB
09/12/19	19-09-246-2	09/12/19 1028	Fecal Coliform Effluent	SM 9222D	9	cfu's/100mls	09/12/19 1600	DB

\*CBOD Date & Time Setup: 09/13/19 1000  
Date & Time Read :09/18/19 0830

U - Material was analyzed for but not detected;  
The value reported is the minimum detection limit.

0.16 grams of TCMP was added for CBOD analysis as nitrification inhibitor.

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable. This report shall not be reproduced except in full without the written approval from the laboratory.

Reviewed By : *Tamara Lal*  
Title : Quality Control Director  
Date Reviewed: Sept 25, 2019



### ANALYTICAL RESULTS

Project: Lake Yale  
Pace Project No.: 35494693

Sample: WW Effluent-LY      Lab ID: 35494693001      Collected: 09/04/19 07:10      Received: 09/04/19 16:00      Matrix: Water

Parameters	Results	Units	PQL	MDL	DF	Prepared	Analyzed	CAS No.	Qual
<b>Total Nitrogen Calculation</b>	Analytical Method: TKN+NOx Calculation								
Total Nitrogen	1.7	mg/L	0.50	0.086	1		09/10/19 08:43		
<b>351.2 Total Kjeldahl Nitrogen</b>	Analytical Method: EPA 351.2 Preparation Method: EPA 351.2								
Nitrogen, Kjeldahl, Total	0.086 U	mg/L	0.50	0.086	1	09/06/19 12:08	09/09/19 15:28	7727-37-9	
<b>353.2 Nitrogen, NO2/NO3 pres.</b>	Analytical Method: EPA 353.2								
Nitrogen, NO2 plus NO3	1.7	mg/L	0.050	0.025	1		09/05/19 12:01		
<b>365.4 Phosphorus, Total</b>	Analytical Method: EPA 365.4 Preparation Method: EPA 365.4								
Phosphorus, Total (as P)	0.41	mg/L	0.10	0.050	1	09/06/19 12:08	09/09/19 15:28	7723-14-0	

### REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,  
without the written consent of Pace Analytical Services, LLC.



4545 W Brown Deer Road Milwaukee WI 53223  
PO Box 245036 Milwaukee WI 53224-9536  
Phone: 800-876-3837 Fax: 888-371-5982

Created Date 10-19-2020

Customer ID 00025883

To Mike Smallridge  
FLORIDA UTILITY SERVICES 1  
5911 TROUBLE CREEK  
NEW PORT RICHEY  
Florida 34652

Effective Dates 10-19-2020 - 12-31-2021

Salesperson	Proposal Subject	Shipping Terms / INCO Terms	Payment Terms
007464 BRAD LOWE	3" E-Series Meter - Lake Yale	PREPAY/ADD TO INVOICE FCA FACTORY	NET 30 DAYS

Line #	Description	Qty	Unit Net Price USD	Line Totals USD
1	<b>BMI Part No.: 101-1410</b> <b>Description:</b> EB - E-Series Ultrasonic Lead Free Brz Alloy (NSF-61-372), EFA - 3" ROUND (3 X 12) Potable, XX - None, X - NONE Encoder, CA - FOR CONNECTIVITY TO ORION, 1 - Standard, 9 Dial - 0.1 Gal, E - 1,000 E3 - BADGER STD (TS-461) Y2 - YR MFG 9D & PBB None, TF - TWIST TIGHT - 5 FT (MTR, ASSY) B0A - BADGER METER STANDARD (ID=B0A) <b>Cat String:</b> EB-EFA-PXXX-E5-CA-19BE-E3Y2-XXTF-XX-B0A	1	2,065.00	2,065.00

<b>Subtotal - USD</b>	2,065.00
<b>Total Price - USD</b>	2,065.00

**Notes and Assumptions**

If applicable, sales tax and freight, if included on the proposal, is an estimate and will be recalculated based on rates and tax status in effect at the time of invoicing.

Actual lead time to be provided at time of order.

To aid in processing your order, please include the Quote number on the PO that is submitted for this proposal.

Badger Meter provides certification files to help manage meter and endpoint inventory and to maintain meter accuracy data. The standard method of delivery for this format is via electronic mail. Any deviations from our standard format, or any custom file formats, will be considered on a time and material basis.

Due to continuous improvements and redesign of Badger Meter products and technology solutions, Badger Meter reserves the right to provide our newest product solutions as an alternative to the proposed products provided they are in conformance with the requirements of the specifications and do not exceed the prices quoted.

If you would like to place an order, please contact us at [Utilityorders2@badgermeter.com](mailto:Utilityorders2@badgermeter.com) or by calling 1-800-876-3837.

**Thank you for your business!**

This quotation is an offer made subject to the terms & conditions found on our website: [www.badgermeter.com/Company/Legal/Sales-Terms.aspx](http://www.badgermeter.com/Company/Legal/Sales-Terms.aspx)  
Quoted prices are firm for acceptance, via an order, within the effective dates provided, shipping within 60 calendar days past the expiration of this quotation.

Sandpiper water and Sewer accounts – 190

Sandpiper Irrigation accounts - 22

Sandpiper Vacant accounts – 10

Lake Yale water and Sewer accounts -108

Lake Yale Irrigation accounts – 65

Lake Yale General account Clubhouse – 1

Lake Yale Vacant accounts - 11

**Lake Yale Utilities LLC**  
Staff's Second Data Request  
October 26, 2020

**Invoices**

14. Please refer to the invoices from Florida Utility Services dated October 31, 2019, in the amounts of \$32.05, \$98.20, and \$51.25. Please identify and explain what they were for and how they relate to materials and supply O&M expenses.

See attached Direct Expense Report and copies of receipts for expenses paid by Florida Utility Services and billed to Lake Yale Utilities on 10/31/2020.

10/19/2019 – Harbor Freight Tools, \$32.05, lithium grease, gloves and tarp

10/21/2019 – Ferguson Waterworks, \$98.20, pvc pipe

10/23/2019 – Home Depot, \$51.25, meter box, pvc parts

11:05 AM  
10/20/20  
Accrual Basis

Florida Utility Services 1, LLC  
Direct Expense Report  
October 2019

Date	Name	Memo	Amount
<b>401 - Direct</b>			
<b>401.03 - LYU Expense</b>			
10/21/2019	Harbor Freight	card 1773, LYU 620, lithium grease, gloves, tarp	32.05
10/22/2019	Ferguson Enterprises	card 1773, LYU 620, 8" pvc caps	98.20
10/23/2019	Home Depot	card 7561, LYU 620, meter box, pvc parts	51.25
10/29/2019	Capital City Loan 6383	Loan 6383, Invoice 10/29/19	90.93
Total 401.03 - LYU Expense			<u>272.43</u>
Total 401 - Direct			<u>272.43</u>
<b>TOTAL</b>			<u><u>272.43</u></u>



BARTOW FL #00718  
200 E VAN FLEET DR  
BARTOW, FL 33830  
Telephone: (863) 519-0080

SALE

Customer Name: 6 Love  
Customer Number: 999005096764

69201 TARP SILVER H/D 8'4 X 11'	\$9.99
68511 9 MIL NITRILE GLOVES 50PC	\$10.99
40711 14OZ LITHIUM GREASE	\$4.49
40711 14OZ LITHIUM GREASE	\$4.49
<b>Subtotal</b>	<b>\$29.96</b>
Sales Tax 7.000%	\$2.09
<b>Total</b>	<b>\$32.05</b>

Debit \$32.05  
 Card No. XXXXXXXXXXXX1773  
 Auth. No. 571410  
 US DEBIT  
 Chip Read  
 Verified By PIN  
 Mode: Issuer  
 AID: A0000000980840  
 TVR: 808004 0  
 IAD: 06010 3600000  
 TSI: 6800  
 ARC: 00

Please Retain for Your Records

Store: 00718 Reg: 02 Tran: 181646  
Date: 10/19/2019 3:14:58 PM Assoc: XXXXXX  
Ticket: 02181646

Item(s) Sold: 4  
Item(s) Returned: 0

BRITTNEY served you today.  
for shipping at

### RECEIPT RECORD

Receipt Date 10-19-19

Amount \$ 32.05

Utility Name Lake Yale

Description Lithium Grease  
Gloves + Tarp

Rate Case? \_\_\_\_\_ NARUC \_\_\_\_\_ QB \_\_\_\_\_

Initials JR



FEI WINTER HAVEN, FL WATERWORKS

#1588  
2439 7TH ST SW

WINTER HAVEN, FL 33880-1948

PH: 863-401-2764 FAX: 863-291-4240

ORDER NO. REQUIRED DATE SHIP WHS. SELL WHS.

CASH SALES ORDER

\*\*\* C O D \*\*\*

ACCEPT E/O = N  
SHOWROOM = N  
SOURCE = SOE  
LE FRT = N 0.0  
OR SHP = N 0.0  
21 OCT 2019 07:43:01

WRITER SALESMAN  
CEP WEN  
TAG PO. NO.

CW070240 10/21/19 1588 1588

CUSTOMER NO. CUSTOMER ALPHA CONTRACT NO. BID NO. ORDER DATE ORDERED BY INSTRUCTIONS

31944 CODW 10/21/19  
S  
C O U N T E R P I C K U P  
C O D A C C O U N T - W I N T E R H A V E N  
C O D S A L E S  
W I N T E R H A V E N , F L 3 3 8 8 1  
T O  
C O U N T E R P I C K U P  
# 1 5 8 8  
2 4 3 9 7 T H S T S W  
W I N T E R H A V E N , F L 3 3 8 8 0 - 1 9 4 8

OML CONTACT  
Carlos Pacheco  
VENDOR

VENDOR P.O. NO.

CUST PH: CUSTOMER P.O. NO. JOB NAME ATTN: SHIP VIA

ROUTE NO. RUN NO. DEPART

PCS BAGS BOXES CRATES LENGTHS BUNDLES

ROUTE DESC.

SHIP WT. SHIP DATE DELIVERED BY PACKED BY CHECKED BY

LINE	ORDER QTY	SHIP QTY	ITEM CODE	DESCRIPTION	UNIT PRICE	U/M	TOTAL	P.O. NO.	AISLE LOC
1	2	2	P40SCAPX	8 PVC S40 50C CAP	45.890	EA	91.78		WS72
PAID 98.20 BY Visa CC# XXXXXXXXXXXXX1773 ON 10/21/19									
								4.1 1B	

NO RETURNS ALLOWED WITHOUT PROPER AUTHORIZATION. RETURNED MATERIALS SUBJECT TO HANDLING CHARGES.  
SEE REVERSE SIDE FOR IMPORTANT TERMS AND CONDITIONS OF SALE AND LIMITATIONS OF WARRANTY.

SUBTOTAL	INBOUND FREIGHT	OUTBOUND SHIPPING	TAX	LESS DEPOSIT	TOTAL DUE
91.78	0.00	0.00	6.42	0.00	98.20

CUSTOMER'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_ CUSTOMER COPY

TERMS: CASH ON DEMAND

\*CONTINUED\*

RECEIPT RECORD

Attach Receipt



More saving.  
More doing.<sup>SM</sup>

10825 U.S. HWY 441  
LEESBURG, FL 34788 (352)742-1252

0278 00009 86638 10/23/19 11:41 AM  
CASHIER JOYCE

052063171135 VALVE BOX <A>	24.00
12" X 17" STD VALVE BOX BLK/GRN NDS	
032888071346 PVC BALL VLV <A>	3.35
3/4" PVC BALL VALVE FPT SCH40	
032888076341 PVC BALL VLV <A>	
3/4" PVC BALL VALVE SLIP SCH40	
2@2.98	5.96
046878377837 3/4" PVC-LOC <A>	4.11
3/4" PVC-LOCK SLIDE REPAIR FITTING	
697285018730 3/4PVCXMAL <A>	10.47
3/4" SHARKBITE PVC X MALE ADAPT	

SUBTOTAL	47.89
SALES TAX	3.36
TOTAL	\$51.25

XXXXXXXXXXXX7561 DEBIT	USD\$ 51.25
AUTH CODE 681714	US DEBIT
AID A0000000980840	



0278 09 86638 10/23/2019 6714

RETURN POLICY DEFINITIONS		
POLICY ID	DAYS	POLICY EXPIRES ON
A 1	90	01/21/2020

\*\*\*\*\*  
**DID WE NAIL IT?**

Take a short survey for a chance TO WIN  
A \$5,000 HOME DEPOT GIFT CARD

Opine en español

[www.homedepot.com/survey](http://www.homedepot.com/survey)

User ID: HLL 173843 173574  
PASSWORD: 19523 173565

Entries must be completed within 14 days  
of purchase. Entrants must be 18 or  
older to enter. See complete rules on  
website. No purchase necessary.

Receipt Date 10-23-19

Amount \$ 51.25

Utility Name L. Y. U

Description Meter box  
and p.v.c. parts.

Rate Case? NARUC QB

Initials \_\_\_\_\_



PAID 1-29-19

036

General Utilities  
P. O. Box 491221  
Leesburg, FL 34749-1221

# Invoice

DATE	INVOICE #
1/3/2019	330974
Tele: 352-787-2493	

<b>BILL TO</b>
accounting@fus1llc LAKE YALE UTILITIES, LLC 3336 Grand Blvd, Suite 102 Holiday, FL 34690

P.O. NO.	TERMS	Tele: 352-787-2493
DEC 2018	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2018) Sewer and Water Plant Inspection,	755.00	755.00
1	Set (2018) Bacteriological Analyses	140.00	140.00
1	Set (2018) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2018) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2018) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2018) Total Phosphorus Analyses - SEWER	90.00	90.00
	Florida Sales Tax	7.00%	0.00

\*\*\*\*\*THANK YOU\*\*\*\*\*

Please include INVOICE NUMBER on payment

**Total**

\$1,150.00

PAID 2-27-19

636

**General Utilities**  
P. O. Box 491221  
Leesburg, FL 34749-1221

# Invoice

DATE	INVOICE #
2/3/2019	331149
Tele: 352-787-2493	

<b>BILL TO</b>
accounting@fusllc LAKE YALE UTILITIES, LLC 3336 Grand Blvd, Suite 102 Holiday, FL 34690

P.O. NO.	TERMS	Tele: 352-787-2493
JAN 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
1	Each, (Year 2019) ANNUAL - Nitrate Analysis - Sewer Effluent - 19 Jan 2019	60.00	60.00
1	Set (Year 2019) ANNUAL -- CBOD/TSS Analysis - Sewer INFLUENT - 9 Jan 2019	45.00	45.00
	Florida Sales Tax	7.00%	0.00

*****THANK YOU***** Please include INVOICE NUMBER on payment	<b>Total</b>	\$1,270.00
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PAID 3-25-19

636

**General Utilities**  
 P. O. Box 491221  
 Leesburg, FL 34749-1221

# Invoice

DATE	INVOICE #
3/3/2019	331293
Tele: 352-787-2493	

<b>BILL TO</b>
accounting@fusllc LAKE YALE UTILITIES, LLC 3336 Grand Blvd, Suite 102 Holiday, FL 34690

P.O. NO.	TERMS	Tele: 352-787-2493
FEB 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
1	Each, Air Compressor, Pancake, with check valve and fittings, Jan 2019	150.00	150.00T
	Florida Sales Tax	7.00%	10.50

\*\*\*\*\*THANK YOU\*\*\*\*\*

Please include INVOICE NUMBER on payment

**Total** \$1,325.50

**General Utilities**  
 P. O. Box 491221  
 Leesburg, FL 34749-1221

# Invoice

DATE	INVOICE #
4/3/2019	331441
Tele: 352-787-2493	

<b>BILL TO</b>
accounting@fusllc LAKE YALE UTILITIES, LLC 3336 Grand Blvd, Suite 102 Holiday, FL 34690

P.O. NO.	TERMS	Tele: 352-787-2493
MAR 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
8	Ft., 3/8 Chlorine Tubing, High Pressure, Installed, 22 Mar 2019 - WATER Lake Yale	2.215	17.72T
1	Each, Chlorine Injection Point Service, Dismantle, Clean and Place Back in Service, 22 Mar 2019 - WATER Lake Yale	36.00	36.00
1	Each (Year 2018) ANNUAL EPA Drinking Water Quality Report - WATER - Mar 2019	260.00	260.00
5	Each (1st Half 2019) Copper and Lead Analyses and Reporting - WATER - Jan & Feb 2019 - SANDPIPER	70.00	350.00
	Florida Sales Tax	7.00%	1.24

\*\*\*\*\*THANK YOU\*\*\*\*\*  
 Please include INVOICE NUMBER on payment

**Total** \$1,829.96

**General Utilities**  
 P. O. Box 491221  
 Leesburg, FL 34749-1221

# Invoice

DATE	INVOICE #
5/3/2019	331600
Tele: 352-787-2493	

<b>BILL TO</b>
accounting@fusllc LAKE YALE UTILITIES, LLC 3336 Grand Blvd, Suite 102 Holiday, FL 34690

P.O. NO.	TERMS	Tele: 352-787-2493
APR 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
5	Each (1st Half 2019) Copper and Lead Analyses and Reporting - WATER - 29 & 30 Apr 2019	70.00	350.00
4	Each, (2019) ANNUAL Reduced Pressure Zone Backflow Preventer Test and Certification, 19 Apr 2019	35.00	140.00
	Florida Sales Tax	7.00%	0.00

*****THANK YOU***** Please include INVOICE NUMBER on payment	<b>Total</b> \$1,655.00
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PAID 6-25-19

636

**General Utilities**  
 P. O. Box 491221  
 Leesburg, FL 34749-1221

# Invoice

DATE	INVOICE #
6/3/2019	331746
Tele: 352-787-2493	

<b>BILL TO</b>
accounting@fusllc LAKE YALE UTILITIES 5911 Trouble Creek Road New Port Richey, FL 34652

P.O. NO.	TERMS	Tele: 352-787-2493
MAY 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
	Florida Sales Tax	7.00%	0.00

*****THANK YOU***** Please include INVOICE NUMBER on payment	<b>Total</b>	\$1,165.00
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PAID 7-26-19

636

**General Utilities**  
P. O. Box 491221  
Leesburg, FL 34749-1221

# Invoice

DATE	INVOICE #
7/3/2019	331893
Tele: 352-787-2493	

<b>BILL TO</b>
accounting@fusllc LAKE YALE UTILITIES, LLC 5911 Trouble Creek Road New Port Richey, FL 34652

P.O. NO.	TERMS	Tele: 352-787-2493
JUN 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
2	Set, (Year 2019) ANNUAL - Nitrate and Nitrite, Collection, Transportation, Analyses and DEP Reporting - Drinking Water - 27 Jun 2019 - Lake Yale & Sandpiper	95.00	190.00
	Florida Sales Tax	7.00%	0.00

\*\*\*\*\*THANK YOU\*\*\*\*\*

Please include INVOICE NUMBER on payment

**Total** \$1,355.00

PAID 8-28-19

636

**General Utilities**  
 P. O. Box 491221  
 Leesburg, FL 34749-1221

# Invoice

DATE	INVOICE #
8/3/2019	332052
Tele: 352-787-2493	

<b>BILL TO</b>
accounting@fus1llc LAKE YALE UTILITIES, LLC 5911 Trouble Creek Road New Port Richey, FL 34652

P.O. NO.	TERMS	Tele: 352-787-2493
JUL 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
1	50lb pail Chlorine Stix, 12 Jul 2019 - SEWER	148.84	148.84T
2	Each, Stoddard Replacement Filter, #108, 12 Jul 2019 - SEWER Blowers	47.21	94.42T
1	Each, B50 Belt, Installed, 12 Jul 2019 - SEWER Blower	49.55	49.55T
1	Each, Repair Broken Diffuser Air Line by Capping with Sch 40 Cap	45.00	45.00T
1	Each, Chlorine Injection Point Service, Dismantle, Clean and Place Back in Service, 12 Jul 2019 - WATER Sandpiper	36.00	36.00
	Florida Sales Tax	7.00%	23.65

\*\*\*\*\*THANK YOU\*\*\*\*\*

Please include INVOICE NUMBER on payment

**Total** \$1,562.46



PAID 9-30-19

636

**General Utilities**  
 P. O. Box 491221  
 Leesburg, FL 34749-1221

# Invoice

DATE	INVOICE #
9/3/2019	332213
Tele: 352-787-2493	

<b>BILL TO</b>
accounting@fusllc LAKE YALE UTILITIES, LLC 5911 Trouble Creek Road New Port Richey, FL 34652

P.O. NO.	TERMS	Tele: 352-787-2493
AUG 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
10	Each, Chlorine Stix, 6 Aug 2019 - SEWER	2.99	29.90
	Florida Sales Tax	7.00%	0.00

\*\*\*\*\*THANK YOU\*\*\*\*\*

Please include INVOICE NUMBER on payment

**Total** \$1,194.90

**General Utilities**  
 P. O. Box 491221  
 Leesburg, FL 34749-1221

# Invoice

<b>DATE</b>	<b>INVOICE #</b>
10/3/2019	332367
Tele: 352-787-2493	

<b>BILL TO</b>
accounting@fusllc LAKE YALE UTILITIES, LLC 5911 Trouble Creek Road New Port Richey, FL 34652

<b>P.O. NO.</b>	<b>TERMS</b>	Tele: 352-787-2493
SEP 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
1	Each, (2019) ANNUAL Reduced Pressure Zone Backflow Preventer Test and Certification, 4 Oct 2019 - SEWER	60.00	60.00
1	Each, Pulsafeeder A Plus Electronic Chlorine Metering Pump, SN-986162, 30 GPD, WATER Lake Yale	497.87	497.87T
	Florida Sales Tax	7.00%	34.85

\*\*\*\*\*THANK YOU\*\*\*\*\*

Please include INVOICE NUMBER on payment

**Total**

\$1,757.72

PAID 11-27-19

636

**General Utilities**  
 P. O. Box 491221  
 Leesburg, FL 34749-1221

# Invoice

DATE	INVOICE #
11/3/2019	332526
Tele: 352-787-2493	

<b>BILL TO</b>
accounting@fusllc LAKE YALE UTILITIES, LLC 5911 Trouble Creek Road New Port Richey, FL 34652

P.O. NO.	TERMS	Tele: 352-787-2493
OCT 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
	Florida Sales Tax	7.00%	0.00

\*\*\*\*\*THANK YOU\*\*\*\*\*

Please include INVOICE NUMBER on payment

**Total** \$1,165.00

PAID 12-23-19

636

**General Utilities**  
P. O. Box 491221  
Leesburg, FL 34749-1221

# Invoice

DATE	INVOICE #
12/3/2019	332681
Tele: 352-787-2493	

<b>BILL TO</b>
accounting@fus1llc LAKE YALE UTILITIES, LLC 5911 Trouble Creek Road New Port Richey, FL 34652

P.O. NO.	TERMS	Tele: 352-787-2493
NOV 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
20	Ft., 3/8" Chlorine Suction Tubing, Installed, 22 Nov 2019 - SEWER	2.86	57.20T
1	Each, Chlorine Foot Valve, 22 Nov 2019 - SEWER	67.50	67.50T
	Florida Sales Tax	7.00%	8.73

\*\*\*\*\*THANK YOU\*\*\*\*\*  
Please include INVOICE NUMBER on payment

**Total** \$1,298.43

**Lake Yale Utilities LLC**  
Staff's Second Data Request  
October 26, 2020

### **Bad Debt Expense**

23. Provide support showing actual bad debt expense from January 2017 through September 2020. In addition, provide the estimated bad debt expense through the end of 2020. This includes, but it is not limited to billing registers, descriptions, and calculations, showing how bad debt is determined and calculated.

See attached Account Aging reports that are used to determine the bad debt expense.

At year-end, the bad debt expense is determined by totaling the unpaid balances of all closed accounts which received their last payment at least 90 days prior to year-end. For example, the 2020 bad debt expense will total the unpaid balances of accounts with a last payment that occurs between October 1, 2019 and September 30, 2020.

The total bad debt expense determined by this method is split 50/50 between Water 670 and Wastewater 770.

2017 – Water \$230.08, Wastewater \$230.08

To bring the bad debt expense current in 2017, the total of all closed account balances in the billing system report (\$263.41) was added to the amount of bad debt reported by the previous owner of the utility when it was purchased in 2017.

2018 – Water \$70.42, Wastewater \$70.42

For the 2018 Annual Report, 8 closed accounts had an unpaid balance and last payment in the 12-month period that determines bad debt. One additional account with a balance of 40 cents was added to the total.

2019 – Water \$195.74, Wastewater \$195.75

For the 2019 Annual Report, 6 closed accounts had a balance and last payment in the 12-month period that determines bad debt.

Jan-Sep 2020 – \$28.78

As of today, 1 closed account with a last payment date between 10/1/2019 and 9/30/20 has an unpaid balance of \$28.78

2020 Estimate – \$28.78

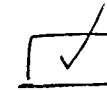
Because it is already past the last payment cutoff date of September 30, 2020, we estimate that the total bad debt expensed in 2020 will be \$28.78 unless the account is paid in full before year-end.

2020 Jan - Sep. + 90 days

10/1/2020 12:37:50 PM

# Lake Yale Utilities, LLC

Last payment  
10-1-19 to 6-30-20



## Account Aging

Customer	Read Seq	Account Number	Service Adr	Last Payment Date	< 30	30 - 60	> 60	Current Balance
Richard Hastings	396	907MBD	37907 Maywood Bay Dr	10/10/2010	0.00	0.00	25.59	25.59
Sharon Morgulec	142	202LSD	202 N. Lake Shore Dr.	9/28/2017	0.00	0.00	61.78	61.78
zAnthony Deprisco	397	913MBD	37913 Maywood Bay Dr	12/5/2017	-6.65	0.00	0.00	-6.65
zBrenda Webb	155	317MD	317 Magnolia Dr.	10/10/2010	0.00	0.00	79.05	79.05
zBnan Meyer	400	916MBD-I	37916 Maywood Bay Dr	10/7/2019	0.00	0.00	28.78	28.78
zCherie English	343	810SHW	11810 Sussex Hill Way	5/29/2018	0.00	0.00	1.75	1.75
zDeborah K. Sutton	117	1303OC-2	1303 Oak Ct.	9/27/2019	0.00	0.00	26.58	26.58
zGary Trump	152	214LSD	214 N. Lake Shore Dr.	10/10/2010	0.00	0.00	84.12	84.12
zJames & Cheryl Smith	157	319MD	319 Magnolia Dr.	12/31/2018	0.00	0.00	142.63	142.63
zJoan Seath	117	1303OC	1303 Oak Ct.	10/4/2018	0.00	0.00	119.43	119.43
zMargery Miller	97	511CD	511 Cardinal Dr.	10/10/2010	0.00	0.00	14.04	14.04
zMark Kimbel	232	436LLP	38436 Langlois Pl.	3/5/2019	0.00	0.00	21.55	21.55
zMichael & Terrence Smith	137	401OD	401 Oak Dr.	10/10/2010	0.00	0.00	22.80	22.80
zMichael Prather	59	709FD	709 Flamingo Dr.	10/27/2017	0.00	0.00	46.47	46.47
zMike Miller	431	001MBD	38001 Maywood Bay Dr	6/4/2018	0.00	0.00	24.75	24.75
zNadine Monroe	59	709FD-1	709 Flamingo Dr.	2/12/2019	0.00	0.00	35.71	35.71
zNancy Herman	479	920MS-I	37920 Monticello St. -I	4/1/2020	-0.82	0.00	0.00	-0.82
zPaul Kawczk	196	103LSC-I	103 Lake Shore Cir. -I	9/5/2017	-4.27	0.00	0.00	-4.27
zPaul Kawczk	195	103LSC	103 Lake Shore Cir.	9/5/2017	-4.26	0.00	0.00	-4.26
zRaymond Babcock	122	417OD	417 Oak Dr.	2/15/2018	-4.00	0.00	0.00	-4.00
zRichard Pearson	202	310LLP	38310 Langlois Pl.	8/21/2020	25.21	0.00	0.00	25.21
zRobert Molinary	319	618MC	11618 Martell Ct.	7/9/2018	0.00	0.00	35.62	35.62
zRobert Molinary	320	618MC-I	11618 Martell Ct. -I	7/9/2018	0.00	0.00	0.53	0.53
zSandra Nielsen & Ralph Ni	41	817PD	817 Pine Dr.	11/9/2018	-1.00	0.00	0.00	-1.00
zWilliam L. Miller	64	624SPD	624 Sandpiper Dr.	12/23/2018	-4.00	0.00	0.00	-4.00
Report Totals					0.21	0.00	771.18	771.39

+90 day - Bad Debt Total  
Jan - Sep 2020

28.78

Lake Yale Utilities, LLC

2011  
 BAD DEBT EXPENSE REPORT  
 LAST PAYMENT IN 2017

2017 AR

3/22/2018 6:38:24 PM

Account Aging

196.75 Lake Yale Treatment (seller)  
 + 263.41 - LYU

Customer	Read Seq	Account Number	Service Adr	Last Payment Date	< 81	( 81 - 446 )	> 446	Current Balance
Anthony Deprisco	397	913MBD	37913 Maywood Bay Dr	12/5/2017	-6.65	0.00	0.00	-6.65
Bernice Hatton	414	915SW-I	11915 Salina Way -I	10/10/2010	0.00	11.02	0.00	11.02
Billy Greene	165	230LSD	230 N. Lake Shore Dr.	11/13/2017	0.00	20.39	0.00	20.39
Letha Luke	352	842SHW	11842 Sussex Hill Way	12/20/2017	45.30	0.00	0.00	45.30
Margery Miller	97	511CD	511 Cardinal Dr.	10/10/2010	0.00	14.04	0.00	14.04
Richard Hastings	396	907MBD	37907 Maywood Bay Dr	10/10/2010	0.00	25.59	0.00	25.59
Sharon Morgulec	142	202LSD	202 N. Lake Shore Dr.	9/28/2017	0.00	61.78	0.00	61.78
zEdward Luke	173	1408AD	1408 Azalea Dr.	1/11/2018	-4.00	0.00	0.00	-4.00
ZGary Trump	152	214LSD	214 N. Lake Shore Dr.	10/10/2010	0.00	84.12	0.00	84.12
zMichael Prather	59	709FD	709 Flamingo Dr.	10/27/2017	0.00	46.47	0.00	46.47
zPaul Kawczk	196	103LSC-I	103 Lake Shore Cir. -I	9/5/2017	-4.27	0.00	0.00	-4.27
zPaul Kawczk	195	103LSC	103 Lake Shore Cir.	9/5/2017	-4.26	0.00	0.00	-4.26
zRaymond Babcock	122	417OD	417 Oak Dr.	2/15/2018	-4.00	0.00	0.00	-4.00
Report Totals					22.12	263.41	0.00	285.53

		<u>W</u>	<u>S</u>
\$196.75	Lake Yale Treatment Assoc	98.37	98.38
\$263.41	Lake Yale Utilities	131.71	131.70
		<u>230.08</u>	<u>230.08</u>

2018 AR

2/1/2019 12:53:33 PM

Lake Yale Utilities, LLC

Last Payment  
10-1-17 to 9-30-18



Account Aging

Customer	Read Seq	Account Number	Service Adr	Last Payment Date	< 30	30 - 60	> 60	Current Balance
Brenda Webb	155	317MD	317 Magnolia Dr.	10/10/2010	0.00	0.00	79.05	79.05
Richard Hastings	396	907MBD	37907 Maywood Bay Dr	10/10/2010	0.00	0.00	25.59	25.59
Sharon Morgulec	142	202LSD	202 N. Lake Shore Dr.	9/28/2017	0.00	0.00	61.78	61.78
zAnthony Deprisco	397	913MBD	37913 Maywood Bay Dr	12/5/2017	-6.65	0.00	0.00	-6.65
zCherie English	343	810SHW	11810 Sussex Hill Way	5/29/2018	0.00	0.00	1.75	1.75
zGary Trump	152	214LSD	214 N. Lake Shore Dr.	10/10/2010	0.00	0.00	84.12	84.12
zMargery Miller	97	511CD	511 Cardinal Dr.	10/10/2010	0.00	0.00	14.04	14.04
zMichael & Terrence Smith	137	401OD	401 Oak Dr.	10/10/2010	0.00	0.00	22.80	22.80
zMichael Prather	59	709FD	709 Flamingo Dr.	10/27/2017	0.00	0.00	46.47	46.47
zMike Miller	431	001MBD	38001 Maywood Bay Dr	6/4/2018	0.00	0.00	24.75	24.75
zPatsy Adams	102	416OD-I2	416 Oak Dr. -I	12/14/2018 *	0.00	0.00	0.40 *	0.40
zPaul Kawczk	196	103LSC-I	103 Lake Shore Cir. -I	9/5/2017	-4.27	0.00	0.00	-4.27
zPaul Kawczk	195	103LSC	103 Lake Shore Cir.	9/5/2017	-4.26	0.00	0.00	-4.26
zRaymond Babcock	122	417OD	417 Oak Dr.	2/15/2018	-4.00	0.00	0.00	-4.00
zRobert Eastes	321	622MC	11622 Martell Ct.	3/1/2018	0.00	0.00	77.79	77.79
zRobert Molinary	319	618MC	11618 Martell Ct.	7/9/2018	0.00	0.00	35.62	35.62
zRobert Molinary	320	618MC-I	11618 Martell Ct. -I	7/9/2018	0.00	0.00	0.53	0.53
zSandra Nielsen & Ralph Ni	41	817PD	817 Pine Dr.	11/9/2018	-1.00	0.00	0.00	-1.00
zWilliam L. Miller	64	624SPD	624 Sandpiper Dr.	12/23/2018	-4.00	0.00	0.00	-4.00
<b>Report Totals</b>					<b>-24.18</b>	<b>0.00</b>	<b>474.69</b>	<b>450.51</b>

+90 days

Total  
Bad Debt

140,84



2019 AR

12/31/2019 10:54:38 AM

# Lake Yale Utilities, LLC

Last payment  
10-1-18 to 9-30-19



## Account Aging

Customer	Read Seq	Account Number	Service Adr	Last Payment Date	< 30	30 - 60	> 60	Current Balance
Brenda Webb	155	317MD	317 Magnolia Dr.	10/10/2010	0.00	0.00	79.05	79.05
Richard Hastings	386	907MBD	37907 Maywood Bay Dr	10/10/2010	0.00	0.00	25.59	25.59
Sharon Morgulec	142	202LSD	202 N. Lake Shore Dr.	9/28/2017	0.00	0.00	61.78	61.78
zAnthony Deprisco	397	913MBD	37913 Maywood Bay Dr	12/5/2017	-6.65	0.00	0.00	-6.65
zBrian Meyer	400	916MBD-I	37916 Maywood Bay Dr	10/7/2019	0.00	0.00	28.78	28.78
zCherie English	343	810SHW	11810 Sussex Hill Way	5/29/2018	0.00	0.00	1.75	1.75
zDeborah K. Sutton	117	1303OC-2	1303 Oak Ct.	9/27/2019	0.00	0.00	26.58	26.58
zGary Trump	152	214LSD	214 N. Lake Shore Dr.	10/10/2010	0.00	0.00	84.12	84.12
zJames & Cheryl Smith	157	319MD	319 Magnolia Dr.	12/31/2018	0.00	0.00	142.63	142.63
zJoan Seath	117	1303OC	1303 Oak Ct.	10/4/2018	0.00	0.00	119.43	119.43
zMargery Miller	97	511CD	511 Cardinal Dr.	10/10/2010	0.00	0.00	14.04	14.04
zMark Kimbel	232	436LLP	38436 Langlois Pl.	3/5/2019	0.00	0.00	21.55	21.55
zMichael & Terrence Smith	137	401OD	401 Oak Dr.	10/10/2010	0.00	0.00	22.80	22.80
zMichael Prather	59	709FD	709 Flamingo Dr.	10/27/2017	0.00	0.00	46.47	46.47
zMike Miller	431	001MBD	38001 Maywood Bay Dr	6/4/2018	0.00	0.00	24.75	24.75
zMike Morgan	127	312MD	312 Magnolia Dr.	1/22/2019	0.00	0.00	45.59	45.59
zNadine Monroe	59	709FD-1	709 Flamingo Dr.	2/12/2019	0.00	0.00	35.71	35.71
zPatsy Adams	102	416QD-I2	416 Oak Dr. -I	12/14/2018	0.00	0.00	0.40	0.40
zPaul Kawczk	196	103LSC-I	103 Lake Shore Cir. -I	9/5/2017	-4.27	0.00	0.00	-4.27
zPaul Kawczk	195	103LSC	103 Lake Shore Cir.	9/5/2017	-4.26	0.00	0.00	-4.26
zRaymond Babcock	122	417OD	417 Oak Dr.	2/15/2018	-4.00	0.00	0.00	-4.00
zRobert Eastes	321	622MC	11622 Martell Ct.	3/1/2018	0.00	0.00	77.79	77.79
zRobert Molinary	319	618MC	11618 Martell Ct.	7/9/2018	0.00	0.00	35.62	35.62
zRobert Molinary	320	618MC-I	11618 Martell Ct. -I	7/9/2018	0.00	0.00	0.53	0.53
zSandra Nielsen & Ralph Ni	41	817PD	817 Pine Dr.	11/9/2018	-1.00	0.00	0.00	-1.00
zWilliam L. Miller	64	624SPD	624 Sandpiper Dr.	12/23/2018	-4.00	0.00	0.00	-4.00

### Account Aging

Customer	Read Seq	Account Number	Service Adr	Last Payment Date	< 30	30 - 60	> 60	Current Balance
Report Totals					-24.18	0.00	894.96	870.78

+90 days

Total \$391.49  
Bud Debt