CLASS "C"

WATER AND/OR WASTEWATER UTILITIES

(Gross Revenue of Less Than $200,000 Each)

ANNUAL REPORT

OF

WS907-20-AR
Joe Collins
Silver Lake Utilities, Inc.
106 S.W. County Road 721
Okeechobee, FL 34974-8613

Submitted To The

STATE OF FLORIDA

PUBLIC SERVICE COMMISSION

FOR THE

YEAR ENDED DECEMBER 31, 2020

Form PSC/AFD 006-W (Rev. 12/99)

GENERAL INSTRUCTIONS

1. Prepare this report in conformity with the 1996 National Association of Regulatory Utility Commissioners (NARUC) Uniform System of Accounts for Water and Wastewater Utilities as adopted by Rule 25-30.115 (1), Florida Administrative Code.

2. Interpret all accounting words and phrases in accordance with the Uniform System of Accounts (USOA). Commission Rules and the definitions on next page.

3. Complete each question fully and accurately, even if it has been answered in a previous annual report. Enter the word "None" where it truly and completely states the fact.

4. For any question, section, or page which is not applicable to the respondent enter the words "Not Applicable." Do not omit any pages.

5. Where dates are called for, the month and day should be stated as well as the year.

6. All schedules requiring dollar entries should be rounded to the nearest dollar.

7. Complete this report by means which result in a permanent record. You may use permanent ink or a typewriter. Do not use a pencil.

8. If there is not enough room on any schedule, an additional page or pages may be added provided the format of the added schedule matches the format of the schedule in the report. Additional pages should reference the appropriate schedules, state the name of the utility, and state the year of the report.

9. If it is necessary or desirable to insert additional statements for the purpose of further explanation of schedules, such statements should be made at the bottom of the page or on an additional page. Any additional pages should state the name of the utility and the year of the report, and reference the appropriate schedule.

10. The utility shall file the original and two copies of the report with the Commission at the address below, and keep a copy for itself. Pursuant to Rule 25-30.110 (3), Florida Administrative Code, the utility must submit the report by March 31 for the preceeding year ending December 31.

    Florida Public Service Commission
    Division of Economic Regulation
    2540 Shumard Oak Boulevard
    Tallahassee, Florida 32399-0850

11. Pursuant to Rule 25-30.110 (7) (a), Florida Administrative Code, any utility that fails to file its annual report or extension on or before March 31, or within the time specified by any extension approved in writing by the Division of Accounting and Finance, shall be subject to a penalty. The penalty shall be based on the number of calendar days elapsed from March 31, or from an approved extended filing date, until the date of filing. The date of filing shall be included in the days elapsed.

ADVANCES FOR CONSTRUCTION - This account shall include advances by or in behalf of customers for construction which are to be refunded either wholly or in part. (USOA)

ALLOWANCE FOR FUNDS USED DURING CONSTRUCTION (AFUDC) - This account shall include concurrent credits for allowance for funds used during construction based upon the net cost of funds used for construction purposes and a reasonable rate upon other funds when so used. Appropriate regulatory approval shall be obtained for "a reasonable rate". (USOA)

AMORTIZATION - The gradual extinguishment of an amount in an account by distributing such amount over a fixed period, over the life of the asset or liability to which it applies, or over the period during which it is anticipated the benefit will be realized. (USOA)

CONTRIBUTIONS IN AID OF CONSTRUCTION (CIAC) - Any amount or item of money, services, or property received by a utility, from any person or governmental agency, any portion of which is provided at no cost to the utility, which represents an addition or transfer to the capital of the utility, and which is utilized to offset the acquisition, improvement, or construction costs of the utility's property, facilities, or equipment used to provide utility services to the public. (Section 367.021 (3), Florida Statutes)

CONSTRUCTION WORK IN PROGRESS (CWIP) - This account shall include the cost of water or wastewater plant in process of construction, but not yet ready for services. (USOA)

DEPRECIATION - The loss in service value not restored by current maintenance, incurred in connection with the consumption or prospective retirement of utility plant in the course of service from causes which are known to be in the current operation and against which the utility is not protected by insurance. (Rule 25-30.140 (i), Florida Administrative Code)

EFFLUENT REUSE - The use of wastewater after the treatment process, generally for reuse as irrigation water or for in plant use. (Section 367.021 (6), Florida Statutes)

EQUIVALENT RESIDENTIAL CONNECTION (ERC) - (WATER) - (Rule 25-30.515 (8), Florida Administrative Code.)

(a) 350 gallons per day;
(b) The number of gallons a utility demonstrates in the average daily flow for a single family unit; or
(c) The number of gallons which has been approved by the DEP for a single family residential unit.

EQUIVALENT RESIDENTIAL CONNECTION (ERC) - (WASTEWATER) - Industry standard of 80% of Water ERC or 280 gallons per day for residential use.

GUARANTEED REVENUE CHARGE - A charge designed to cover the utility's costs including, but not limited to the cost of the operation, maintenance, depreciation, and any taxes, and to provide a reasonable return to the utility for facilities, a portion of which may not be used and useful to the utility or its existing customers. (Rule 25-30.515 (9), Florida Administrative Code)

LONG TERM DEBT - All Notes, Conditional Sales Contracts, or other evidences of indebtedness payable more than one year from date of issue. (USOA)

PROPRIETARY CAPITAL (For proprietorships and partnerships only) - The investment of a sole proprietor, or partners, in an unincorporated utility. (USOA)

RETAINED EARNINGS - This account reflects corporate earnings retained in the business. Credits would include net income or accounting adjustments associated with correction of errors attributable to a prior period. Charges to this account would include net losses, accounting adjustments associated with correction of errors attributable to a prior period or dividends. (USOA)

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FINANCIAL SECTION

REPORT OF

Silver Lake Utilities, Inc.
(EXACT NAME OF UTILITY)

106 SW County Road 721 Okeechobee, FL 34974 Mailing Address	106 SW County Road 721 Okeechobee, FL 34974 Street Address	County

Telephone Number (863) 763-3041 Date Utility First Organized 12/3/2007

Fax Number (863)763-3178 E-mail Address Joe.Collins@lykes.com

Sunshine State One-Call of Florida, Inc. Member No. 41004

Check the business entity of the utility as filed with the Internal Revenue Service:

☐ Individual ☐ Sub Chapter S Corporation ☒ 1120 Corporation ☐ Partnership

Name, Address and phone where records are located: 106 SW County Road 721 Okeechobee, FL 34974
(863) 763-3041

Name of subdivisions where services are provided: Lykes Ranch Division, Lykes Citrus Division

CONTACTS:

Name	Title	Principal Business Address	Salary Charged Utility
Person to send correspondence: Joe Collins	President	106 SW County Road 721 Okeechobee, FL 34974	$
Person who prepared this report: Noah Handley	Utility Manager	106 SW County Road 721 Okeecobee, FL 34974	$
Officers and Managers: Johnnie P. James, Jr.	Chief Executive Officier	400 North Tampa Street Ste 1900, Tampa, FL 33602	$ 0
Joe Collins	President	106 SW County Road 721 Okeechobee, FL 34974	$ 0
Carl Bauman	Vice President & CFO	400 North Tampa Street, Ste 1900, Tampa, FL 33602	$ 0
Anita S. Millikin	Secretary	P.O. Box 1690, Tampa, FL 33601	$ 0
			$ 0

Report every corporation or person owning or holding directly or indirectly 5 percent or more of the voting securities of the reporting utility:

Name	Percent Ownership in Utility	Principal Business Address	Salary Charged Utility
Lykes Bros. Inc.	100%	400 North Tampa Street Suite 1900 Tampa, FL 33602	$ 0
			$
			$
			$
			$
			$
			$

UTILITY NAME: SILVER LAKE UTILITIES, INC.

YEAR OF REPORT
DECEMBER 31, 2020

INCOME STATEMENT

Account Name	Ref. Page	Water	Wastewater	Other	Total Company
Gross Revenue:					
Residential		$ 70,586	$ 0	$	$ 70,586
Commercial		113,440	0		113,440
Industrial					
Multiple Family					
Guaranteed Revenues					
Other (Specify)					
Total Gross Revenue		$ 184,026	$ 0	$	$ 184,026
Operation Expense (Must tie to pages W-3 and S-3)	W-3 S-3	$ 162,511	$	$	$ 162,511
Depreciation Expense	F-5	41,794			41,794
CIAC Amortization Expense	F-8				
Taxes Other Than Income	F-7	8,088			8,088
Income Taxes	F-7				
Total Operating Expense		$ 212,393			$ 212,393
Net Operating Income (Loss)		$ -28,367	$	$	$ -28,367
Other Income:					
Nonutility Income		$	$	$	$
Other Deductions:					
Miscellaneous Nonutility Expenses		$	$	$	$
Interest Expense		-28,831			-28,831
Fees and Permits		-1,450			-1,450
Legal		-570			-570
Net Income (Loss)		$ -59,218	$	$	$ -59,218

UTILITY NAME: SILVER LAKE UTILITIES, INC.

YEAR OF REPORT
DECEMBER 31, 2020

COMPARATIVE BALANCE SHEET

ACCOUNT NAME	Reference Page	Current Year	Previous Year
Assets:			
Utility Plant in Service (101-105)	F-5,W-1,S-1	$ 1,172,425	$ 1,161,224
Accumulated Depreciation and Amortization (108)	F-5,W-2,S-2	635,340	593,546
Net Utility Plant		$ 537,085	$ 567,678
Cash		122,568	158,579
Customer Accounts Receivable (141)		20,753	12,676
Other Assets (Specify):			
Prepaid Expenses		0	0
Total Assets		$ 680,407	$ 738,933
Liabilities and Capital:			
Common Stock Issued (201)	F-6	2,315,000	2,315,000
Preferred Stock Issued (204)	F-6		
Other Paid in Capital (211)			
Retained Earnings (215)	F-6	-2,304,606	-2,245,387
Propietary Capital (Proprietary and partnership only) (218)	F-6		
Total Capital		$ 10,394	$ 69,613
Long Term Debt (224)	F-6	$	$
Accounts Payable (231)		11,013	10,320
Notes Payable (232)		659,000	659,000
Customer Deposits (235)			
Accrued Taxes (236)			
Other Liabilities (Specify)			
Advances for Construction			
Contributions in Aid of Construction - Net (271-272)	F-8		
Total Liabilities and Capital		$ 680,407	$ 738,933

UTILITY NAME: SILVER LAKE UTILITIES, INC.

YEAR OF REPORT
DECEMBER 31, 2020

GROSS UTILITY PLANT

Plant Accounts: (101 - 107) inclusive	Water	Wastewater	Plant other Than Reporting Systems	Total
Utility Plant in Service (101)	$ 1,172,425	$	$	$ 1,172,425
Construction Work in Progress (105)				
Other (Specify)				
Total Utility Plant	$ 1,172,425	$	$	$ 1,172,425

ACCUMULATED DEPRECIATION (A/D) AND AMORTIZATION OF UTILITY PLANT

Account 108	Water	Wastewater	Other Than Reporting Systems	Total
Balance First of Year	$ 593,546	$	$	$ 593,546
Add Credits During Year:				
Accruals charged to depreciation account	$ 41,794	$	$	$ 41,794
Salvage				
Other Credits (specify)				
Total Credits	$ 41,794	$	$	$ 41,794
Deduct Debits During Year:				
Book cost of plant retired	$	$	$	$
Cost of removal				
Other debits (specify)				
Total Debits	$ 0	$	$	$ 0
Balance End of Year	$ 635,340	$	$	$ 635,340

UTILITY NAME: SILVER LAKE UTILITIES, INC.

YEAR OF REPORT
DECEMBER 31, 2020

CAPITAL STOCK (201 - 204)

	Common Stock	Preferred Stock
Par or stated value per share	1	
Shares authorized		
Shares issued and outstanding	2,315,000	
Total par value of stock issued	2,315,000	
Dividends declared per share for year	0	

RETAINED EARNINGS (215)

	Appropriated	Un-Appropriated
Balance first of year	$	$ -2,245,387
Changes during the year (Specify):		
Net Income (Loss)		-59,218
Adjustments to prior year balance		
Balance end of year	$	$ -2,304,605

PROPRIETARY CAPITAL (218)

	Proprietor Or Partner	Partner
Balance first of year	$	$ NA
Changes during the year (Specify):		
Balance end of year	$	$

LONG TERM DEBT (224)

Description of Obligation (Including Date of Issue and Date of Maturity):	Interest Rate	Interest # of Pymts	Principal per Balance Sheet Date
			$ NA
Total			$

UTILITY NAME: SILVER LAKE UTILITIES, INC.

YEAR OF REPORT
DECEMBER 31, 2020

TAX EXPENSE

(a)	Water (b)	Wastewater (c)	Other (d)	Total (e)
Income Taxes:				
Federal income tax	$	$	$	$ 0
State income Tax				0
Taxes Other Than Income:				
State ad valorem tax				0
Local property tax				0
Regulatory assessment fee	8,063			8,063
Other (Specify)				0
Permit Fee	25			25
Total Tax Expense	$ 8,088	$ 0	$	$ 8,088

PAYMENTS FOR SERVICES RENDERED BY OTHER THAN EMPLOYEES

Report all information concerning outside rate, management, construction, advertising, labor relations, public relations, or other similiar professional services rendered the respondent for which aggregate payments during the year to any corporation, partnership, individual, or organization of any kind whatever amounting to $500 or more.

Name of Recipient	Water Amount	Wastewater Amount	Description of Service
Lykes Bros. Inc. Citrus & Ranch	$ 120,788	$	Operations and Maintenance
Pugh Utilities Services	$ 26,672	$	Testing and Treatments
	$	$	
	$	$	
	$	$	
	$	$	
	$	$	
	$	$	
	$	$	
	$	$	
	$	$	

UTILITY NAME: SILVER LAKE UTILITIES, INC.

YEAR OF REPORT
DECEMBER 31, 2020

CONTRIBUTIONS IN AID OF CONSTRUCTION (271)

(a)	Water (b)	Wastewater (c)	Total (d)
1) Balance first of year	$ NA	$ NA	$ NA
2) Add credits during year	$	$	$
3) Total			
4) Deduct charges during the year			
5) Balance end of year			
6) Less Accumulated Amortization			
7) Net CIAC	$ 0	$ 0	$ 0

ADDITIONS TO CONTRIBUTIONS IN AID OF CONSTRUCTION DURING YEAR (CREDITS)

Report below all developers or contractors agreements from which cash or property was received during the year.	Indicate "Cash" or "Property"	Water	Wastewater
Sub-total		$	$

Report below all capacity charges, main extension charges and customer connection charges received during the year.

Description of Charge	Number of Connections	Charge per Connection		
		$	$	$
Total Credits During Year (Must agree with line # 2 above.)			$ NA	$ NA

ACCUMULATED AMORTIZATION OF CIAC (272)

	Water	Wastewater	Total
Balance First of Year	$	$	$
Add Debits During Year:			
Deduct Credits During Year:			
Balance End of Year (Must agree with line #6 above.)	$ NA	$	$ NA

** COMPLETION OF SCHEDULE REQUIRED ONLY IF AFUDC WAS CHARGED DURING YEAR **

UTILITY NAME: SILVER LAKE UTILITIES, INC.

YEAR OF REPORT
DECEMBER 31, 2020

SCHEDULE "A"

SCHEDULE OF COST OF CAPITAL USED FOR AFUDC CALCULATION (1)

Class of Capital (a)	Dollar Amount (b)	Percentage of Capital (c)	Actual Cost Rates (d)	Weighted Cost [c x d] (e)
Common Equity	$ NA	%	%	NA %
Preferred Stock		%	%	%
Long Term Debt		%	%	%
Customer Deposits		%	%	%
Tax Credits - Zero Cost		%	0.00 %	%
Tax Credits - Weighted Cost		%	%	%
Deferred Income Taxes		%	%	%
Other (Explain)		%	%	%
Total	$ NA	100.00 %		NA %

(1) Must be calculated using the same methodology used to calculate AFUDC rate approved by the Commission.

APPROVED AFUDC RATE

Current Commission approved AFUDC rate:	NA %
Commission Order Number approving AFUDC rate:	NA

** COMPLETION OF SCHEDULE REQUIRED ONLY IF AFUDC WAS CHARGED DURING YEAR **

UTILITY NAME: SILVER LAKE UTILITIES, INC.

YEAR OF REPORT
DECEMBER 31, 2020

SCHEDULE "B"

SCHEDULE OF CAPITAL STRUCTURE ADJUSTMENTS

Class of Capital (a)	Per Book Balance (b)	Non-utility Adjustments (c)	Non-juris. Adjustments (d)	Other (1) Adjustments (e)	Capital Structure Used for AFUDC Calculation (f)
Common Equity	$ NA	$	$	$	$ NA
Preferred Stock					
Long Term Debt					
Customer Deposits					
Tax Credits-Zero Cost					
Tax Credits-Weighted Cost of Capital					
Deferred Income Taxes					
Other (Explain)					
Total	$ NA	$	$	$	$ NA

(1) Explain below all adjustments made in Column (e):

WATER OPERATING SECTION

UTILITY NAME: SILVER LAKE UTILITIES, INC.

YEAR OF REPORT
DECEMBER 31, 2020

WATER UTILITY PLANT ACCOUNTS

Acct. No. (a)	Account Name (b)	Previous Year (c)	Additions (d)	Retirements (e)	Current Year (f)
301	Organization	$ 190,097	$	$	$ 190,097
302	Franchises				
303	Land and Land Rights				
304	Structures and Improvements	72,180			72,180
305	Collecting and Impounding Reservoirs				
306	Lake, River and Other Intakes				
307	Wells and Springs	228,464			228,464
308	Infiltration Galleries and Tunnels				
309	Supply Mains				
310	Power Generation Equipment	41,336	3,198		44,534
311	Pumping Equipment	174,010	8,003		182,013
320	Water Treatment Equipment	198,750			198,750
330	Distribution Reservoirs and Standpipes	13,462			13,462
331	Transmission and Distribution Lines	228,689			228,689
333	Services				
334	Meters and Meter Installations	13,619			13,619
335	Hydrants				
336	Backflow Prevention Devices				
339	Other Plant and Miscellaneous Equipment				
340	Office Furniture and Equipment				
341	Transportation Equipment				
342	Stores Equipment				
343	Tools, Shop and Garage Equipment				
344	Laboratory Equipment				
345	Power Operated Equipment	617			617
346	Communication Equipment				
347	Miscellaneous Equipment				
348	Other Tangible Plant				
	Total Water Plant	$ 1,161,223	$ 11,202	$ 0	$ 1,172,425

UTILITY NAME: SILVER LAKE UTILITIES, INC.

YEAR OF REPORT
DECEMBER 31, 2020

ANALYSIS OF ACCUMULATED DEPRECIATION BY PRIMARY ACCOUNT - WATER

Acct. No. (a)	Account (b)	Average Service Life in Years (c)	Average Salvage in Percent (d)	Depr. Rate Applied (e)	Accumulated Depreciation Balance Previous Year (f)	Debits (g)	Credits (h)	Accum. Depr. Balance End of Year (f-g+h=i) (i)
304	Structures and Improvements	40	%	2.50 %	$ 63,613	$	$ 4,752	$ 68,365
305	Collecting and Impounding Reservoirs		%	%				
306	Lake, River and Other Intakes	32	%	3.13 %	23,506		2,402	25,908
307	Wells and Springs	30	%	3.33 %	178,310		7,771	186,081
308	Infiltration Galleries & Tunnels		%	%				
309	Supply Mains		%	%				
310	Power Generating Equipment	20	%	5.00 %	21,190		2,312	23,502
311	Pumping Equipment	20	%	5.00 %	45,058		9,071	54,129
320	Water Treatment Equipment	22	%	4.55 %	98,857		8,934	107,791
330	Distribution Reservoirs & Standpipes	37	%	2.70 %	11,670		363	12,033
331	Trans. & Dist. Mains	43	%	2.33 %	142,675		5,377	148,052
333	Services		%	%				
334	Meter & Meter Installations	20	%	5.00 %	8,127		758	8,885
335	Hydrants		%	%				
336	Backflow Prevention Devices		%	%				
339	Other Plant and Miscellaneous Equipment		%	%				
340	Office Furniture and Equipment		%	%				
341	Transportation Equipment		%	%				
342	Stores Equipment		%	%				
343	Tools, Shop and Garage Equipment		%	%				
344	Laboratory Equipment		%	%				
345	Power Operated Equipment	12	%	12.00 %	539		52	591
346	Communication Equipment		%	%				
347	Miscellaneous Equipment		%	%				
348	Other Tangible Plant		%	%				
	Totals				$ 593,545	$ 0	$ 41,794	$ 635,338 *

* This amount should tie to Sheet F-5.

UTILITY NAME: SILVER LAKE UTILITIES, INC.

YEAR OF REPORT
DECEMBER 31, 2020

WATER OPERATION AND MAINTENANCE EXPENSE

Acct. No.	Account Name	Amount
601	Salaries and Wages - Employees	$
603	Salaries and Wages - Officers, Directors, and Majority Stockholders	
604	Employee Pensions and Benefits	
610	Purchased Water	1,475
615	Purchased Power	6,710
616	Fuel for Power Production	
618	Chemicals	658
620	Materials and Supplies	2,697
630	Contractual Services:	
	Billing	
	Professional	44,391
	Testing	12,358
	Other	52,035
640	Rents	41,724
650	Transportation Expense	
655	Insurance Expense	
665	Regulatory Commission Expenses (Amortized Rate Case Expense)	
670	Bad Debt Expense	
675	Miscellaneous Expenses	463
	Total Water Operation And Maintenance Expense	$ 162,511 *

* This amount should tie to Sheet F-3.

WATER CUSTOMERS

Description (a)	Type of Meter ** (b)	Equivalent Factor (c)	Number of Active Customers Start of Year (d)	Number of Active Customers End of Year (e)	Total Number of Meter Equivalents (c x e) (f)
Residential Service					
5/8"	D	1.0	41	41	41
3/4"	D	1.5			
1"	D	2.5			
1 1/2"	D,T	5.0			
General Service					
5/8"	D	1.0	14	14	14
3/4"	D	1.5			
1"	D	2.5	3	3	7.5
1 1/2"	D,T	5.0	1	1	5
2"	D,C,T	8.0	1	1	8
3"	D	15.0	1	1	15
3"	C	16.0			
3"	T	17.5			
Unmetered Customers					
Other (Specify)					
		Total	61	61	90.5

** D = Displacement
C = Compound
T = Turbine

UTILITY NAME: SILVER LAKE UTILITIES, INC.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: ALL SYSTEMS

PUMPING AND PURCHASED WATER STATISTICS

(a)	Water Purchased For Resale (Omit 000's) (b)	Finished Water From Wells (Omit 000's) (c)	Recorded Accounted For Loss Through Line Flushing Etc. (Omit 000's) (d)	Total Water Pumped And Purchased (Omit 000's) [(b)+(c)-(d)] (e)	Water Sold To Customers (Omit 000's) (f)
January		459	714	1,173	459
February		767	298	1,065	767
March		517	196	713	517
April		513	49	562	513
May		527	46	573	527
June		566	17	583	566
July		631	33	664	631
August		339	12	351	339
September		198	37	235	198
October		206	257	463	206
November		170	63	233	170
December		487	247	734	487
Total for Year		5,380	1,969	7,349	5,380

If water is purchased for resale, indicate the following:

Vendor _____

Point of delivery _____

If water is sold to other water utilities for redistribution, list names of such utilities below:

_____

_____

_____

MAINS (FEET)

Kind of Pipe (PVC, Cast Iron, Coated Steel, etc.)	Diameter of Pipe	First of Year	Added	Removed or Abandoned	End of Year
PVC	6"	24,200			24,200
PVC	3"	13,225			13,225
PVC	2"	3,133			3,133
PVC	1 1/2"	1,140			1,140
PVC	1 1/4"	920			920
PVC	1"	4,170			4,170
PVC	3/4"	900			900

UTILITY NAME: Silver Lake Utilities, Inc.

SYSTEM NAME: Basinger Barn 1 WTP

YEAR OF REPORT
DECEMBER 31, 2020

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1994			
Types of Well Construction and Casing				
Casing Diameter and Depth	2" - 90			
Well Screen	20'			
Depth of Wells	90'			
Diameters of Wells	2"			
Pump - GPM	15 GPM			
Motor - HP	1/2 HP			
Motor Type *	Submersible			
Yields of Wells in 12 Hr GPD	10,800			
Auxiliary Power				
* Submersible, centrifugal				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description	Bladder Tank			
Capacity of Tank	35 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
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SYSTEM NAME: Basinger Barn 1 WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day			
Type of Source	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type			
Make			
Permitted Capacity (GPD)			
High service pumping			
Gallons per minute			
Reverse Osmosis			
Lime Treatment			
Unit Rating			
Filtration			
Aerator Tanks.			
Gravity GPD/Sq.Ft.			
Disinfection			
Chlorinator_.42 GPH	Pulsefeeder		
Ozone			
Other			
Auxiliary Power			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Basinger Barn 1 WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 1,050 Gals / 350 Gals per ERC = 3

2. Maximum number of ERC's that can be served. 5

3. Present system connection capacity (in ERCs *) using existing lines. 5

4. Future connection capacity (in ERCs *) upon service area buildout. n/a

5. Estimated annual increase in ERCs *. 0

6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____

7. Attach a description of the fire fighting facilities.

8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.

9. When did the company last file a capacity analysis report with the DEP?
   Permitted by the Highlands County Health Department Limited Use Commercial Permit No. LUC017

10. If the present system does not meet the requirements of DEP rules, submit the following: N/A

    a. Attach a description of the plant upgrade necessary to meet the DEP rules.

    b. Have these plans been approved by DEP? _____

    c. When will construction begin? _____

    d. Attach plans for funding the required upgrading.

    e. Is this system under any Consent Order with DEP? _____

11. Department of Environmental Protection ID No.
    Highlands County Health Department Permit No. LUS ID: 28-57-00198

12. Water Management District Consumptive Use Permit #

    a. Is the system in compliance with the requirements of the CUP?

    b. If not, what are the utility's plans to gain compliance? _____
    _____
    _____

* An ERC is determined based on one of the following methods:

(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Basinger Barn 3 WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1993			
Types of Well Construction and Casing				
Casing Diameter and Depth	2" - 90			
Well Screen	20'			
Depth of Wells	90'			
Diameters of Wells	2"			
Pump - GPM	15 GPM			
Motor - HP	1/2 HP			
Motor Type *	Submersible			
Yields of Wells in 12 Hr GPD	7,200			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder Tank			
Capacity of Tank	35 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Basinger Barn 3 WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day___			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____			
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .42 Gal/Hr	Stenner 85MPH40		
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Basinger Barn 3 WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 1,050 GPD / 350 Gals per ERC = 3
2. Maximum number of ERC's that can be served. 5
3. Present system connection capacity (in ERCs *) using existing lines. 5
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number
    Highlands County Health Department Permit No. LUS ID: 28-57-00199
12. Water Management District Consumptive Use Permit Number
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Basinger Grove Barn 4 WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1985			
Types of Well Construction and Casing	Hammer / Iron			
Casing Diameter and Depth	4" - 320'			
Well Screen				
Depth of Wells	500			
Diameters of Wells	4"			
Pump - GPM	15			
Motor - HP	1			
Motor Type *	Jet Pump			
Yields of Wells in 12 Hr GPD	10,800			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder			
Capacity of Tank	35 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Basinger Grove Barn 4 WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day___	Projected 880 GPD		
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____			
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .5 GPH	Stenner 85MPH40		
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Basinger Grove Barn 4 WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 1,050 GPD / 350 GPD = 3

2. Maximum number of ERC's that can be served. 6

3. Present system connection capacity (in ERCs *) using existing lines. 6

4. Future connection capacity (in ERCs *) upon service area buildout. n/a

5. Estimated annual increase in ERCs *. 0

6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____

7. Attach a description of the fire fighting facilities.

8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.

9. When did the company last file a capacity analysis report with the DEP?N/A
   Highlands County Health Department Permit No. LUS ID: 28-57-00065
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A

    a. Attach a description of the plant upgrade necessary to meet the DEP rules.

    b. Have these plans been approved by DEP? _____

    c. When will construction begin? _____

    d. Attach plans for funding the required upgrading.

    e. Is this system under any Consent Order with DEP? _____

11. Department of Environmental Protection Permit Number
    Highlands County Health Department Permit No. LUS ID: 28-57-00065
12. Water Management District Consumptive Use Permit n/a

    a. Is the system in compliance with the requirements of the CUP?

    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Basinger Grove Office and Shop WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1991			
Types of Well Construction and Casing	Rotary - PVC			
Casing Diameter and Depth	6" 240			
Well Screen	Open Hole			
Depth of Wells	305			
Diameters of Wells	6"			
Pump - GPM	45			
Motor - HP	2			
Motor Type *	Submersible			
Yields of Wells GPD Permitted	8,000			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Steel - 1	Steel - 2		
Capacity of Tank	750 Retention	750 Storage		
Ground or Elevated	Ground	Ground		

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Basinger Grove Office and Shop WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day	5,000 GPD	WC28-186111 FDEP	
Type of Source	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type			
Make			
Permitted Capacity (GPD)			
High service pumping			
Gallons per minute			
Reverse Osmosis			
Lime Treatment			
Unit Rating			
Filtration			
Pressure Sq. Ft.			
Gravity GPD/Sq.Ft.			
Disinfection			
Chlorinator .5 GPH	Stenner 85MPH40		
Ozone			
Other			
Auxiliary Power			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Basinger Grove Office and Shop WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 5,000 GPD / 350 GPD = 14
   Per FDEP Construction Permit WC28-186111 May 6, 1991
2. Maximum number of ERC's that can be served. 28.5 (by SFWMD Permit at 10,000 GPD)
3. Present system connection capacity (in ERCs *) using existing lines. 4
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
   Highlands County Health Department Permit No. LUS ID: 28-57-00221
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? No
11. Department of Environmental Protection Permit Number n/a
    Highlands County Health Department Permit No. LUS ID: 28-57-00221
12. Water Management District Consumptive Use Permit
    SWFWMD No. 28-00317-W at 10,000 GPD Average and 38,760 Maximum GPD
    a. Is the system in compliance with the requirements of the CUP? Yes
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boar Hammock WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	2013			
Types of Well Construction and Casing	Rotary PVC			
Casing Diameter and Depth	4" - 150'			
Well Screen	120-150'	30' - .010 slot		
Depth of Wells	150			
Diameters of Wells	4"			
Pump - GPM	30 GPM			
Motor - HP	1			
Motor Type *	Centrifugal			
Yields of Wells in 12 Hr GPD	21,600			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder Tanks			
Capacity of Tank	50 and 65 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boar Hammock WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____			
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .42 Gal/Hr			
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boar Hammock WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 1,750 / 350 Gals per ERC = 5
2. Maximum number of ERC's that can be served. 5
3. Present system connection capacity (in ERCs *) using existing lines. 3
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number Private System No. Permit
    Glades County Health Department Limited Use Commercial Permit Number 22-57-00002
12. Water Management District Consumptive Use Permit # N/A
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____
    _____
    _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boar Hammock 4500 U.S. 27 WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	unk			
Types of Well Construction and Casing				
Casing Diameter and Depth	2" 150'			
Well Screen				
Depth of Wells	175'			
Diameters of Wells	4"			
Pump - GPM	25 GPM			
Motor - HP	3/4			
Motor Type *	Centrifugal			
Yields of Wells in 12 Hr GPD	18,000			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder			
Capacity of Tank	35 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boar Hammock 4500 U.S. 27 WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____	Aerator 150 Gal		
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .42 GPH	Stenner 85MPH		
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boar Hammock 4500 U.S. 27 WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 700 / 350 Gals per ERC = 2
2. Maximum number of ERC's that can be served. 2
3. Present system connection capacity (in ERCs *) using existing lines. 1
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number
    Private Well System - No Permit Required
12. Water Management District Consumptive Use Permit Number
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____
    _____
    _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boar Hammock 4480 U.S. 27 WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	unk			
Types of Well Construction and Casing				
Casing Diameter and Depth	2" 135'			
Well Screen				
Depth of Wells	182'			
Diameters of Wells	4"			
Pump - GPM	25 GPM			
Motor - HP	3/4			
Motor Type *	Centrifugal			
Yields of Wells in 12 Hr GPD	18,000			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder			
Capacity of Tank	35 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boar Hammock 4480 U.S. 27 WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____	Aerator 250 Gal		
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator			
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boar Hammock 4480 U.S. 27 WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 700 / 350 Gals per ERC = 2
2. Maximum number of ERC's that can be served. 2
3. Present system connection capacity (in ERCs *) using existing lines. 1
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number
    Private Well System - No Permit Required
12. Water Management District Consumptive Use Permit # N/A
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boatramp Nursery WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1993			
Types of Well Construction and Casing	Rotary - Steel			
Casing Diameter and Depth	10" - 172'			
Well Screen	6" - 440'			
Depth of Wells	778'			
Diameters of Wells	6"			
Pump - GPM	33	42159		
Motor - HP	2	42159	Replaced 7.5 hp	
Motor Type *	Submersible			
Yields of Wells GPM by Permit	5,600	Max Flow	FDEP 5284124	
Auxiliary Power	None	0.0056 MGD	WC28-230920	
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Steel			
Capacity of Tank	1500			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boatramp Nursery WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____	5600	WC28-230920	
Type of Source_____	Ground Well No. 1	Construct Permit	

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____			
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .9 GPH	Stenner MPH85		
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boatramp Nursery WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 5,600 GPD / 350 GPD = 16

2. Maximum number of ERC's that can be served. 6

3. Present system connection capacity (in ERCs *) using existing lines. 3

4. Future connection capacity (in ERCs *) upon service area buildout. n/a

5. Estimated annual increase in ERCs *. 0

6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____

7. Attach a description of the fire fighting facilities.

8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system.

9. When did the company last file a capacity analysis report with the DEP? N/
   Highlands County Health Department Permit No. LUS ID: 28-57-00230
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A

    a. Attach a description of the plant upgrade necessary to meet the DEP rules.

    b. Have these plans been approved by DEP? _____

    c. When will construction begin? _____

    d. Attach plans for funding the required upgrading.

    e. Is this system under any Consent Order with DEP? _____

11. Department of Environmental Protection Permit Number n/a
    Highlands County Health Department Permit No. LUS ID: 28-57-00230
12. Water Management District Consumptive Use Permit
    SWFWMD Permit No. 28-00146-W
    a. Is the system in compliance with the requirements of the CUP? Yes

    b. If not, what are the utility's plans to gain compliance? _____
    _____
    _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Brighton Grove Office WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	2007	2007		
Types of Well Construction and Casing	Rotary	Rotary		
Casing Diameter and Depth	6" - 120'	6" - 120"		
Well Screen	20' - 4" x 0.02	20' - 4" x 0.02		
Depth of Wells	120'	120'		
Diameters of Wells	6"	6"		
Pump - GPM	22 GPM	22 GPM		
Motor - HP	1 HP	1 HP		
Motor Type *	Submersible	Submersible		
Yields of Wells in 12 Hr GPD	15,840 GPD	15,840 GPD		
Auxiliary Power				
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	HDPE			
Capacity of Tank	850 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer	Baldor	Baldor		
Type	Electric	Electric		
Rated Horsepower	5 HP	5 HP		
Pumps				
Manufacturer	Goulds	Goulds		
Type	Centrifugal	Centrifugal		
Capacity in GPM	50 GPM	50 GPM		
Average Number of Hours Operated Per Day	4	4		
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Brighton Grove Office WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day	SFWMD .45 MGM	SFWMD .45 MGM	
Type of Source	Ground	Ground	

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type	Carbon Filter 25 GPM	Carbon Filter 25 GPM	2 Aerators
Make	Pentair Model 3150	Pentair Model 3150	
Permitted Capacity (GPD)			
High service pumping			
Gallons per minute	15 GPM	15 GPM	
Reverse Osmosis			
Lime Treatment			
Unit Rating			
Filtration			
Aerator Tanks.	300 Gal Aerator	300 Gal Aerator	
Gravity GPD/Sq.Ft.			
Disinfection			
Chlorinator_.42 GPH	Pulsafeeder	Pulsafeeder	Pulsafeeder
Ozone	CL2 to Aerator No. 1	CL2 to Aerator No. 2	CL2 to Storage Tank
Other			
Auxiliary Power			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Brighton Grove Office WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 2,500 Gals / 350 Gals per ERC = 7

2. Maximum number of ERC's that can be served. 12

3. Present system connection capacity (in ERCs *) using existing lines. 14

4. Future connection capacity (in ERCs *) upon service area buildout. n/a

5. Estimated annual increase in ERCs *. 1

6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____

7. Attach a description of the fire fighting facilities.

8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.

9. When did the company last file a capacity analysis report with the DEP? N/A
   System is permitted by the Glades County Heaalth Department Permit Nos. 22-57-964865 and 22-57-967423
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A

    a. Attach a description of the plant upgrade necessary to meet the DEP rules.

    b. Have these plans been approved by DEP? _____

    c. When will construction begin? _____

    d. Attach plans for funding the required upgrading.

    e. Is this system under any Consent Order with DEP? _____

11. Department of Environmental Protection ID No.
    Glades County Health Department Permit No. 22-57-964485 (South Well) and 22-57-967423 (North Well)
12. Water Management District Consumptive Use Permit
    SFWMD WUP 22-00392-W
    a. Is the system in compliance with the requirements of the CUP? Yes

    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Brighton Ranch Office WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	2007	2007		
Types of Well Construction and Casing	Rotary	Rotary		
Casing Diameter and Depth	6" - 162'	6" - 162"		
Well Screen	20' - 4" x 0.02	20' - 4" x 0.02		
Depth of Wells	180'	180'		
Diameters of Wells	6"	6"		
Pump - GPM	25 GPM	25 GPM		
Motor - HP	2 HP	2 HP	22 GPM	
Motor Type *	Submersible	Submersible	only one well	
Yields of Wells in 12 Hr GPD	15,840 GPD	15,840 GPD	may operate	
Auxiliary Power	22 Kw Diesel	22 Kw Diesel	at any time	
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	HDPE			
Capacity of Tank	5,500 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer	Baldor	Baldor		
Type	Electric	Electric		
Rated Horsepower	5 HP	5 HP		
Pumps				
Manufacturer	Goulds	Goulds		
Type	Centrifugal	Centrifugal		
Capacity in GPM	40 GPM	40 GPM		
Average Number of Hours Operated Per Day	2 Hours	2 Hours		
Auxiliary Power	22 Kw Diesel	22 Kw Diesel		

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Brighton Ranch Office WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day	SFWMD 0.09 MGD	SFWMD 0.09 MGD	
Type of Source	Ground	Ground	

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type	Carbon Filter 57 GPM	Degassifier 25 GPM	Calcite 142 GPM
Make	Pentair Model 3150	DeLoach Industries	Miami TO3648
Permitted Capacity (GPD)	FDEP 10,500 GPD		
High service pumping			
Gallons per minute	40 GPM		
Reverse Osmosis			
Lime Treatment			
Unit Rating			
Filtration			
Pressure Sq. Ft.			
Gravity GPD/Sq.Ft.			
Disinfection			
Chlorinator_.42 GPH	Pulsafeeder	Pulsafeeder	
Ozone			
Other			
Auxiliary Power	22 Kw Diesel	22 Kw Diesel	22 Kw Diesel

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Brighton Ranch Office WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 10,500 Gals Permitted Capacity / 350 Gals per ERC = 30
2. Maximum number of ERC's that can be served. 30 .
3. Present system connection capacity (in ERCs *) using existing lines. 30
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP? December 2008
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection ID
    FDEP ID# 5284153
12. Water Management District Consumptive Use Permit
    SFWMD Permit No. 22-00392-W
    a. Is the system in compliance with the requirements of the CUP? Yes
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Buckhorn Housing WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1990			
Types of Well Construction and Casing	Rotary - PVC			
Casing Diameter and Depth	230			
Well Screen				
Depth of Wells	300			
Diameters of Wells	6"			
Pump - GPM	33			
Motor - HP	3	5 HP to 3 HP		
Motor Type *	Submersible	40457		
Yields of Wells in 12 Hr GPD	23,760	55GS30		
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Steel	Steel		
Capacity of Tank	1500	900		
Ground or Elevated	Ground	Ground		

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Buckhorn Housing WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day	0.033 MGD	0.108 MGD 9/11/90	SFWMD 28-00290-W
Type of Source	Ground Well No. 1	0.333 MGD 8/22/99	Max Month 484,500
			0.10 MGD

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type			
Make			
Permitted Capacity (GPD)			
High service pumping			
Gallons per minute			
Reverse Osmosis	se Device/RO at each home		
Lime Treatment			
Unit Rating			
Filtration			
Pressure Sq. Ft.			
Gravity GPD/Sq.Ft.			
Disinfection			
Chlorinator .42 Gal/Hr	Stenner 85MPH85		
Ozone			
Other			
Auxiliary Power			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Buckhorn Housing WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 33,300 GPD / 350 Gals per ERC = 95.14

2. Maximum number of ERC's that can be served. 94.24 (by FDEP Permit 33,300 GPD)
   Maximum number of ERC's that can be served 28.57 (by SFWMD Permit 10,600 GPD)
3. Present system connection capacity (in ERCs *) using existing lines. 22

4. Future connection capacity (in ERCs *) upon service area buildout. n/a

5. Estimated annual increase in ERCs *. 0

6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____

7. Attach a description of the fire fighting facilities.

8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.

9. When did the company last file a capacity analysis report with the DEP?N/A

10. If the present system does not meet the requirements of DEP rules, submit the following: N/A

    a. Attach a description of the plant upgrade necessary to meet the DEP rules.

    b. Have these plans been approved by DEP? _____

    c. When will construction begin? _____

    d. Attach plans for funding the required upgrading.

    e. Is this system under any Consent Order with DEP? _____

11. Department of Environmental Protection Permit Number
    FDEP ID No. 5284101
12. Water Management District Consumptive Use Permit Number
    SFWMD WUP 22-00290-W at 0.01 MGD, 3,875,000 Gals/Year
    a. Is the system in compliance with the requirements of the CUP? Yes

    b. If not, what are the utility's plans to gain compliance? _____
    _____
    _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Farabee Road WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1960			
Types of Well Construction and Casing	Cable Tool			
Casing Diameter and Depth	4"			
Well Screen	4" - 60'			
Depth of Wells				
Diameters of Wells	120'			
Pump - GPM	4"			
Motor - HP	15 GPM			
Motor Type *	1/2			
Yields of Wells in 12 Hr GPD	Centrifugal			
Auxiliary Power	10,800			
	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	amtrol WX203			
Capacity of Tank	32 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day_____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____	Sediment Filter	Aerator	
Make_____		150 Gal	
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .42 Gal/Hr			
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Farabee Road WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 700 / 350 Gals per ERC = 2
2. Maximum number of ERC's that can be served. 2
3. Present system connection capacity (in ERCs *) using existing lines. 1
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number Private System No. Permit
    Private Well System - No Permit Required
12. Water Management District Consumptive Use Permit Number
    N/A
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Iron Pens WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1995			
Types of Well Construction and Casing				
Casing Diameter and Depth	2" - unk			
Well Screen	unk			
Depth of Wells	185			
Diameters of Wells	2"			
Pump - GPM	22			
Motor - HP	0.5			
Motor Type *	Centrifugal			
Yields of Wells in 12 Hr GPD	15,840			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder Tanks			
Capacity of Tank	35 and 35 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Iron Pens WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____			
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .42 Gal/Hr			
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Iron Pens WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 700 / 350 Gals per ERC = 2
2. Maximum number of ERC's that can be served. 3
3. Present system connection capacity (in ERCs *) using existing lines. 3
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number Private System No. Permit
    Highlands County Health Department Permit No. LUS ID: 28-57-000582
12. Water Management District Consumptive Use Permit
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Lake Placid WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1991			
Types of Well Construction and Casing	Rotary - PVC			
Casing Diameter and Depth	8"- 630'			
Well Screen				
Depth of Wells	775'			
Diameters of Wells	8"			
Pump - GPM	100 GPM			
Motor - HP	5	45 GPM		
Motor Type *	Submersible			
Yields of Wells in 12 Hr GPD	32,400			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Steel	Steel		
Capacity of Tank	1,000 Gal	1,500 Gal		
Ground or Elevated	Ground	Ground/Cl2		

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Lake Placid WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____	15,900 GPD	SWFWMD Permit No.	
Type of Source_____	Ground Well No. 1	20013367	

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____			
Make_____			
Permitted Capacity (GPD)__	10,600 GPD	FDEP Permit No.	
High service pumping		5284113	
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .42 GPH	Stenner 85MPH40		
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Lake Placid WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 30 by FDEP Permit of 10,600 GPD
2. Maximum number of ERC's that can be served. 30 (by FDEP Permit No. 5284113 at 10,600 GPD)
3. Present system connection capacity (in ERCs *) using existing lines. 30 by current FDEP permit
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number
    FDEP ID No. 5284113
12. Water Management District Consumptive Use Permit Number
    SWFWMD No. 20013367 at 15,900 GPD Average 41,000 GPD Peak Month
    a. Is the system in compliance with the requirements of the CUP? Yes
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Lake Placid Dinner Lake Road WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1985			
Types of Well Construction and Casing	Rotary - Steel			
Casing Diameter and Depth	4"- unk			
Well Screen				
Depth of Wells	150'			
Diameters of Wells	4"			
Pump - GPM	20 GPM			
Motor - HP	2			
Motor Type *				
Yields of Wells in 12 Hr GPD	14,400			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder Tank			
Capacity of Tank	35 Gals			
Ground or Elevated				

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Lake Placid Dinner Lake Road WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day	1200		
Type of Source	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type			
Make			
Permitted Capacity (GPD)			
High service pumping			
Gallons per minute			
Reverse Osmosis			
Lime Treatment			
Unit Rating			
Filtration			
Pressure Sq. Ft.			
Gravity GPD/Sq.Ft.			
Disinfection			
Chlorinator .42 GPH	Stenner 84MPH		
Ozone			
Other			
Auxiliary Power			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Lake Placid Dinner Lake Road WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 1,400 GPD / 350 GPD = 4
2. Maximum number of ERC's that can be served. 4
3. Present system connection capacity (in ERCs *) using existing lines. 3
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP? N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number
    Highlands County Health Department Permit No. LUS ID: 28-57-1510263
12. Water Management District Consumptive Use Permit Number
    SWFWMD No. 20013367 at 1,200 GPD Average 1,800 GPD Peak Month
    a. Is the system in compliance with the requirements of the CUP? Yes
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Lakeport Road 2400 WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1975			
Types of Well Construction and Casing	Cable Tool			
	2			
Casing Diameter and Depth	2" -60'			
Well Screen				
Depth of Wells	120'			
Diameters of Wells	2"			
Pump - GPM	15 GPM			
Motor - HP	1/2			
Motor Type *	Centrifugal			
Yields of Wells in 12 Hr GPD	10,800			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder Tank			
Capacity of Tank	35 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

SYSTEM NAME: Lakeport Road 2400 WTP

YEAR OF REPORT
DECEMBER 31, 2020

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____			
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .42 Gal/Hr	Stenner Pump 85MPH		
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Lakeport Road 2400 WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 700 / 350 Gals per ERC = 2
2. Maximum number of ERC's that can be served. 2
3. Present system connection capacity (in ERCs *) using existing lines. 1
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number Private System No. Permit
    Private Well System - No Permit Required
12. Water Management District Consumptive Use Permit
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Lakeport Road 2872 WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1975			
Types of Well Construction and Casing	Cable Tool			
Casing Diameter and Depth	2			
Well Screen	2" -60'			
Depth of Wells				
Diameters of Wells	120'			
Pump - GPM	2"			
Motor - HP	15 GPM			
Motor Type *	1/2			
Yields of Wells in 12 Hr GPD	Centrifugal			
Auxiliary Power	10,800			
	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder Tank			
Capacity of Tank	35 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

SYSTEM NAME: Lakeport Road 2872 WTP

YEAR OF REPORT
DECEMBER 31, 2020

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____			
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .42 Gal/Hr			
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Lakeport Road 2872 WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 700 / 350 Gals per ERC = 2
2. Maximum number of ERC's that can be served. 2
3. Present system connection capacity (in ERCs *) using existing lines. 1
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number Private System No. Permit
    Private Well System - No Permit Required
12. Water Management District Consumptive Use Permit # N/A
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: South Moore Haven Cane Farm House 2015 WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	2002			
Types of Well Construction and Casing	Cable Tool			
Casing Diameter and Depth	2			
Well Screen	2" - 25'			
Depth of Wells				
Diameters of Wells	50			
Pump - GPM	2"			
Motor - HP	15 GPM			
Motor Type *	1/2			
Yields of Wells in 12 Hr GPD	Centrifugal			
Auxiliary Power	10,800			
	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder Tank			
Capacity of Tank	35 Gal			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: South Moore Haven Cane Farm House 2015 WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____	Sediment Filter		
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____	Carbon Filter/Softener		
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .			
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: South Moore Haven Cane Farm House 2015 WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 700 / 350 Gals per ERC = 2
2. Maximum number of ERC's that can be served. 2
3. Present system connection capacity (in ERCs *) using existing lines. 1
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number Private System No. Permit
    Private Well System - No Permit Required
12. Water Management District Consumptive Use Permit\
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____
    _____
    _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Moore Haven Cane Farm House No. 2 WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	2002			
Types of Well Construction and Casing	Cable Tool			
Casing Diameter and Depth	2			
Well Screen	2" - 25'			
Depth of Wells				
Diameters of Wells	50			
Pump - GPM	2"			
Motor - HP	15 GPM			
Motor Type *	1/2			
Yields of Wells in 12 Hr GPD	Centrifugal			
Auxiliary Power	10,800			
	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)				
Capacity of Tank				
Ground or Elevated				

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
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SYSTEM NAME: Moore Haven Cane Farm House No. 2 WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____			
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____	Iron Filter		
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .42 Gal/Hr			
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Moore Haven Cane Farm House No. 2 WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 700 / 350 Gals per ERC = 2
2. Maximum number of ERC's that can be served. 2
3. Present system connection capacity (in ERCs *) using existing lines. 1
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number Private System No. Permit
    Private Well System - No Permit Required
12. Water Management District Consumptive Use Permit
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Muse 21530 County Road 721 WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1955			
Types of Well Construction and Casing	Cable Tool / Steel			
Casing Diameter and Depth	2" - unk			
Well Screen				
Depth of Wells	unk			
Diameters of Wells	2"			
Pump - GPM	15 GPM			
Motor - HP	1/2			
Motor Type *	Centrifugal			
Yields of Wells in 12 Hr GPD	10,800			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)				
Capacity of Tank				
Ground or Elevated				

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Muse 21530 County Road 721 WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_ _ _ _ _ _ _ _	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_ _ _ _ _ _ _ _ _ _ _ _ _	Aerator Tank		
Make_ _ _ _ _ _ _ _ _ _ _ _ _			
Permitted Capacity (GPD)_ _			
High service pumping			
Gallons per minute_ _ _ _			
Reverse Osmosis _ _ _ _ _ _			
Lime Treatment			
Unit Rating_ _ _ _ _ _ _ _			
Filtration			
Pressure Sq. Ft._ _ _ _ _ _			
Gravity GPD/Sq.Ft._ _ _ _	Softenor		
Disinfection			
Chlorinator			
Ozone_ _ _ _ _ _ _ _ _ _ _			
Other_ _ _ _ _ _ _ _ _ _ _ _			
Auxiliary Power_ _ _ _ _ _ _ _			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Muse 21530 County Road 721 WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 700 / 350 Gals per ERC = 2
2. Maximum number of ERC's that can be served. 2
3. Present system connection capacity (in ERCs *) using existing lines. 1
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number Private System No. Permit
    Private Well System - No Permit Required
12. Water Management District Consumptive Use Permit # N/A
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: North Island WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	unk			
Types of Well Construction and Casing				
Casing Diameter and Depth	2" - unk			
Well Screen	unk			
Depth of Wells	240'			
Diameters of Wells	2"			
Pump - GPM	20 GPM			
Motor - HP	3/4 HP			
Motor Type *	Centrifugal			
Yields of Wells in 12 Hr GPD	14,400			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder Tank			
Capacity of Tank	40 Gal			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: North Island WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____			
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .42 Gal/Hr			
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: North Island WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 1,050 / 350 Gals per ERC = 3
2. Maximum number of ERC's that can be served. 3 5
3. Present system connection capacity (in ERCs *) using existing lines. 5
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number Private System
    Glades County Health Department Limited Use Commercial Permit Number 22-57-00003
12. Water Management District Consumptive Use Permit
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____
    _____
    _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Silver Lake Lodge WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	unk			
Types of Well Construction and Casing	Cable Tool			
	2" Steel			
Casing Diameter and Depth	2" - unk			
Well Screen				
Depth of Wells	unk			
Diameters of Wells	2"			
Pump - GPM	15 GPM			
Motor - HP	1/2			
Motor Type *	Centrifugal			
Yields of Wells in 12 Hr GPD	10,800			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder Tanks			
Capacity of Tank	35 Gallons			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Silver Lake Lodge WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____			
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration	Aeration Tank		
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .42 Gal/Hr	Stenner 85MPH		
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Silver Lake Lodge WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 1050 / 350 Gals per ERC = 3
2. Maximum number of ERC's that can be served. 4
3. Present system connection capacity (in ERCs *) using existing lines. 3
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number Private System No. Permit
    Private Well System - No Permit Required
12. Water Management District Consumptive Use Permit
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____
    _____
    _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Todd 8772 Hwy 98 WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1985			
Types of Well Construction and Casing	rotary PVC			
Casing Diameter and Depth	4" - 100'			
Well Screen				
Depth of Wells	180'			
Diameters of Wells	4"			
Pump - GPM	20 GPM			
Motor - HP	0.75			
Motor Type *	Centrifugal			
Yields of Wells in 12 Hr GPD	14,400			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder Tank			
Capacity of Tank	35 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Todd 8772 Hwy 98 WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____			
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator .42 Gal/Hr	Stenner 85MPH		
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Todd 8772 Hwy 98 WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 700 / 350 Gals per ERC = 2
2. Maximum number of ERC's that can be served. 2
3. Present system connection capacity (in ERCs *) using existing lines. 1
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number Private System No. Permit
    Private Well System - No Permit Required
12. Water Management District Consumptive Use Permit Number
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Wild Island WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1975			
Types of Well Construction and Casing				
Casing Diameter and Depth	2" - unk			
Well Screen	unk			
Depth of Wells	unk			
Diameters of Wells	2"			
Pump - GPM	15 GPM			
Motor - HP	3/4 HP			
Motor Type *	Centrifugal			
Yields of Wells in 12 Hr GPD	10,800			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Steel	Steel		
Capacity of Tank	50 Gal	50 Gal		
Ground or Elevated	Ground	Ground		

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Wild Island WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_ _ _ _ _ _ _ _	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_ _ _ _ _ _ _ _ _ _ _ _ _			
Make_ _ _ _ _ _ _ _ _ _ _ _ _			
Permitted Capacity (GPD)_ _			
High service pumping			
Gallons per minute_ _ _ _			
Reverse Osmosis _ _ _ _ _ _			
Lime Treatment			
Unit Rating_ _ _ _ _ _ _ _			
Filtration			
Pressure Sq. Ft._ _ _ _ _ _			
Gravity GPD/Sq.Ft._ _ _ _			
Disinfection			
Chlorinator .42 Gal/Hr			
Ozone_ _ _ _ _ _ _ _ _ _			
Other_ _ _ _ _ _ _ _ _ _ _			
Auxiliary Power_ _ _ _ _ _ _ _			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Wild Island WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 700 / 350 Gals per ERC = 2
2. Maximum number of ERC's that can be served. 3
3. Present system connection capacity (in ERCs *) using existing lines. 2
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number Private System No. Permit
    Permitted by the Highlands County Health Department Permit No. LUC020
12. Water Management District Consumptive Use Permit
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____
    _____
    _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Wild Island 6663 CR 621 WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1975			
Types of Well Construction and Casing	Cable Tool			
	2			
Casing Diameter and Depth	2" - 25'			
Well Screen				
Depth of Wells	50'			
Diameters of Wells	2"			
Pump - GPM	20 GPM			
Motor - HP	0.75			
Motor Type *	Centrifugal			
Yields of Wells in 12 Hr GPD	14,400			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder Tanks			
Capacity of Tank	35 and 35 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer	Baldor			
Type	Centrifigul			
Rated Horsepower	1 HP			
Pumps				
Manufacturer	Goulds			
Type				
Capacity in GPM	20 GPM			
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Wild Island 6663 CR 621 WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____	Aerator		
Make_____			
Permitted Capacity (GPD)__	350		
High service pumping	20		
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator			
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Wild Island 6663 CR 621 WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 700 / 350 Gals per ERC = 2
2. Maximum number of ERC's that can be served. 2
3. Present system connection capacity (in ERCs *) using existing lines. 1
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number Private System No. Permit
    Private Well System - No Permit Required
12. Water Management District Consumptive Use Permit # N/A
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____
    _____
    _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boar Hammock 5475 U.S. 27 WTP

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
Year Constructed	1991			
Types of Well Construction and Casing	Rotary PVC			
Casing Diameter and Depth	2" -135'			
Well Screen				
Depth of Wells	182'			
Diameters of Wells	2"			
Pump - GPM	25 GPM			
Motor - HP	3/4			
Motor Type *	Centrifugal			
Yields of Wells in 12 Hr GPD	18,000			
Auxiliary Power	None			
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	Bladder			
Capacity of Tank	35 Gals			
Ground or Elevated	Ground			

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer				
Type				
Rated Horsepower				
Pumps				
Manufacturer				
Type				
Capacity in GPM				
Average Number of Hours Operated Per Day				
Auxiliary Power				

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boar Hammock 5475 U.S. 27 WTP

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day____			
Type of Source_____	Ground Well No. 1		

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_____			
Make_____			
Permitted Capacity (GPD)__			
High service pumping			
Gallons per minute____			
Reverse Osmosis _____			
Lime Treatment			
Unit Rating_____			
Filtration			
Pressure Sq. Ft._____			
Gravity GPD/Sq.Ft.____			
Disinfection			
Chlorinator			
Ozone_____			
Other_____			
Auxiliary Power_____			

UTILITY NAME: Silver Lake Utilities, Inc.

YEAR OF REPORT
DECEMBER 31, 2020

SYSTEM NAME: Boar Hammock 5475 U.S. 27 WTP

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 700 / 350 Gals per ERC = 2
2. Maximum number of ERC's that can be served. 2
3. Present system connection capacity (in ERCs *) using existing lines. 1
4. Future connection capacity (in ERCs *) upon service area buildout. n/a
5. Estimated annual increase in ERCs *. 0
6. Is the utility required to have fire flow capacity? No
   If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities.
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
   There are no plans or requirements to increase system capacity or modify the system at this time.
9. When did the company last file a capacity analysis report with the DEP?N/A
10. If the present system does not meet the requirements of DEP rules, submit the following: N/A
    a. Attach a description of the plant upgrade necessary to meet the DEP rules.
    b. Have these plans been approved by DEP? _____
    c. When will construction begin? _____
    d. Attach plans for funding the required upgrading.
    e. Is this system under any Consent Order with DEP? _____
11. Department of Environmental Protection Permit Number
    Private Well System - No Permit Required
12. Water Management District Consumptive Use Permit # N/A
    a. Is the system in compliance with the requirements of the CUP?
    b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the proceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

WASTEWATER OPERATING SECTION

Note: Silver Lake Utilities, Inc. currently only provides water service; therefore, Pages S-1 through S-6 have been omitted from this report as all values would be $0 or N/A.

UTILITY NAME: SILVER LAKE UTILITIES, INC.

YEAR OF REPORT
DECEMBER 31, 2020

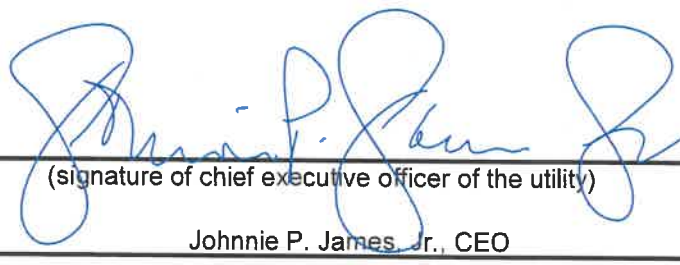
CERTIFICATION OF ANNUAL REPORT

I HEREBY CERTIFY, to the best of my knowledge and belief:

YES	NO		
X		1.	The utility is in substantial compliance with the Uniform System of Accounts prescribed by the Florida Public Service Commission in Rule 25-30.115 (1), Florida Administrative Code.
X		2.	The utility is in substantial compliance with all applicable rules and orders of the Florida Public Service Commission.
X		3.	There have been no communications from regulatory agencies concerning noncompliance with, or deficiencies in, financial reporting practices that could have a material effect on the financial statement of the utility.
X		4.	The annual report fairly represents the financial condition and results of operations of the respondent for the period presented and other information and statements presented in the report as to the business affairs of the respondent are true, correct, and complete for the period for which it represents.

Items Certified

1. [ ] 2. [ ] 3. [ ] 4. [ ]



* (signature of chief executive officer of the utility)

Date: Johnnie P. James, Jr., CEO

1. [ ] 2. [ ] 3. [ ] 4. [ ]

* (signature of chief financial officer of the utility)

Date: Carl Bauman, V.P. & CFO

* Each of the four items must be certified YES or NO. Each item need not be certified by both officers. The items being certified by the officer should be indicated in the appropriate area to the left of the signature.

Notice: Section 837.06, Florida Statutes, provides that any person who knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his duty shall be guilty of a misdemeanor of the second degree.