CITRUS WATERWORKS, INC.

FILED 6/27/2025 DOCUMENT NO. 05283-2025 **FPSC - COMMISSION CLERK**

June 26, 2025

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

> Re: Docket 20250075 - WU - Application for Staff Assisted Rate Case (SARC) in Citrus County by Citrus Waterworks, Inc. – Response to Staff First Data Request

Dear Commission Clerk.

IDM

CLK

Citrus Waterworks, Inc. (Citrus) hereby submits its response to Staff First Data Request.

1. Purchased Water: All utility related bills from the beginning of the test year to present, which include meter number and location, gallons used, dollars paid, and the utility's account numbers.

Response: Not applicable. There is no purchased water.

2. Purchased Power: All utility related electricity bills from the beginning of the test year to present, which include meter number and location, kilowatts used, dollars paid, and the electric company's account numbers.

Response: This was previously to the PSC in response to Audit Request No. 9. However, attached are the requested invoices.

3. Chemicals: A list of all chemicals used in the treatment of water, amounts purchased, quantity purchased, unit prices paid and dosage rates utilized.

Response: This was previously to the PSC in response to Audit Request No. 9. However, attached are the requested invoices.

4. Contractual Services - Testing: A list of tests, along with costs paid to outside laboratories, for testing the water during the test year.

Response: This was previously to the PSC in response to Audit Request No. 9. However, attached are the requested invoices. These were for FDEP required clearance samples after-

main repairs. COM 2 Large Maps APA ECO ENG GCL __

4939 Cross Bayou Boulevard ~ New Port Richey, FL 34652 Tel: (866) 753-8292 Fax: (727) 848-7701

5. <u>Contractual Services - Other:</u> The costs of operation and maintenance work not performed by utility employees, with an explanation of the type of work performed. These costs include the operator's fee, mowing and grounds keeping, and contracted repair for the water system.

Response: This was previously to the PSC in response to Audit Request No. 9. However, attached are the requested invoices. These services are provided through the U.S. Water Services operation and maintenance contract. These include operations, maintenance, meter reading, repairs, etc.

6. <u>Transportation Expenses:</u> A schedule of all vehicles by serial number and description, owned or leased by the utility, original cost or lease documents, whom the vehicles are assigned to, and an explanation of how they are allocated to the utility, or a copy of the log book showing miles on personal vehicles associated with utility business.

Response: Not applicable. Citrus does not own any vehicles.

7. Copies of the most recent Primary and Secondary Water Quality test results.

Response: See attached.

8. Copies of monthly operation reports for water from January 1, 2024, to December 31, 2024, (test year) in Microsoft Excel format, if available, which includes:

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

Response: See attached.

9. Copy of monthly totals of metered water sold for each month of the test year.

Response: See attached.

10. A written summary, by permit number, of all Department of Environmental Protection, Water Management District, and/or County Health Department permits.

Response: See attached.

11. If any plant addition has been made or will be required due to a written order from a governmental agency, please provide a copy of that order.

Response: Not applicable.

12. A list of all complaints received during the test year and four years prior to the test year. Please include an explanation of how each complaint was resolved.

Response: See attached. The majority of the calls were from Hurricane Helene and main break repairs.

Citrus Waterworks, Inc. First Data Request Response

13. A listing of all water assets owned by the utility, including distribution piping, pumping stations, fire hydrants, etc.

Response: This information is contained in the Annual Reports filed with the Florida Public Service Commission.

- 14. Number of customers classified as to meter size and class (commercial or residential) for the following points in time:
 - a) Each of the 4 years prior to the beginning of the test year.
 - b) Test year.
 - c) Present.

Response: This utility was purchased on December 28, 2020.

All meters are 5/8 x 34"

| | <u>2020</u> | <u>2021</u> | <u>2022</u> | <u>2023</u> | <u>2024</u> |
|-------------|-------------|-------------|-------------|-------------|-------------|
| Residential | 151 | 153 | 149 | 162 | 157 |
| Commercial | 1 | 1 | 1 | 1 | 1 |

15. Please provide a copy of the utility's engineering maps for water showing location and size of water mains throughout the service area and customer location and classification. On each map, please identify vacant customer lots, customer meter sizes, flush points, fire hydrants, and pumping stations.

Response: This was previously provided in Docket No. 20240111-WU – the Grandfather application. See Document No. 09300-2024. However, the requested maps are attached.

16. Please fill out the spreadsheet attached concerning any pro forma items the utility is requesting. Please include any bid proposals or estimates for the pro forma items. If less than three bid proposals were requested for each pro forma item, please explain why.

Response: The only request was for meter replacements. See Document No. 04245-2025 filed in the docket.

Respectfully Submitted,

Troy Rendell

Vice President

Investor Owned Utilities

//For Citrus Waterworks, Inc.

WITHLACOOCHEE RIVER ELECTRIC COOPERATIVE, INC.

Your Touchstone Energy Cooperative P.O. Box 278 • Dade City, Fforfda 33526-0278 Account Number 2151511 Meter Number

93047332

From Date

11/04

Customer Number 20089703

Reading

64080

Customer Name CITRUS WATER WORKS INC

Bill Date Amount Due 12/06/202 47.C

Current Charges Due 12/31/202

District Office Serving You Crystal River

Service Address

11927 N ELLSWORTH TER Service Classification General Service Non-Demand

Comparative Usage Information

| | | Average kWh | |
|-------------|-------------------------|-------------|---------|
| Ps | riod | <u>Days</u> | Per Day |
| Dec | 2024 | 29 | 4 |
| | 2024 | 32 | 12 |
| Dec | 2023 | 32 | 5 |
| The same of | Property and the second | | |

BILLS ARE DUE WHEN RENDERED A 1.5 percent, but not less than \$5, late charge will apply to unpaid balances as of 5:00 p.m. on the due date shown on this bill,



You have 24-hour access to manage your account on-line through Smarthub at www.wrec.net. If you would like to make a payment using your credit card, please call 855-938-3431. This number is WREC's Secure Pay-By-Phone system.

See Reverse Side For More Information

Date

12/03

Cycle 05

ELECTRIC SERVICE Reading <u>Multiplier</u> Dem. Reading KW Demand <u>kWh Used</u> 64194 114

Previous Balance 80.68 Payment 80.68CR Balance Forward 0.00

Customer Charge 39.16 Energy Charge 114 KWH @ 0.05017 5.72 Fuel Adjustment 114 KWH @ 0.03800 4.33 FL Gross Receipts Tax 1.26 State Tax 3.51 CC Retirement Credit 6.01CR

Total Current Charges 47.97 Total Due E.F.T. 47.97

> Entered: COA Code Curs Approved: UP FET 12303" 151301511

DO NOT PAY Total amount will be electronically transferred on or after 12/20/2024

WITHLACOOCHEE RIVER ELECTRIC COOPERATIVE, INC.

Your Touchstone Energy Cooperative P.O. Box 278 • Dade City, Florida 33526-0278 Please Detach and Return This Portion With Your Payment To Ensure Accurate Posting.

See Reverse Side For Mailing Instructions

Use above space for address change ONLY.

District: CR05



ඉසි 2151511

CITRUS WATER WORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

յույնիլ կուսանի հանդարարույլ ին հայարարույլ և բարարարի և հ

Electronic Funds Transfer on or after 12/20/2024

Bill Date: 12/06/2024

TOTAL CHARGES DUE

47.97

DO NOT PAY

Your Energy Bill

Page 1 of 3

Service address
CITRUS WATERWORKS INC
5265 W BANDY LN
COMM

Bill date Dec 23, 2024 For service Nov 21 - Dec 19 29 days

25 449

Account number 9100 8516 7134

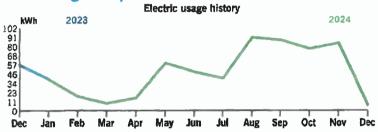
Billing summary

| Previous Amount Due | \$32.94 |
|--------------------------|---------|
| Payment Received Dec 13 | -32.94 |
| Current Electric Charges | 30.00 |
| Taxes | 2.94 |
| Total Amount Due Jan 13 | \$32.94 |



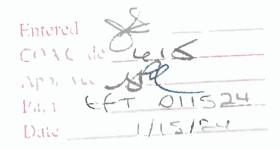
Thank you for your payment.

Your usage snapshot



Average temperature in degrees

| 60 | 90 97 | 17 (9)1 | B A (A | 12 6 37 |
|------------------|----------------------|--------------|----------------|-------------------|
| | Current Month | Dec 2023 | 12-Month Usage | Avg Monthly Usage |
| Electric (kWh) | 7 | 57 | 576 | 48 |
| Avg. Daily (kWh) | 0 | 2 | 2 | |
| 12-month usage | based on most re | cent history | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



Account number 9100 8516 7134

Your payment is scheduled to be made by monthly automatic draft on Jan 13

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

\$32.94

by Jan 13

Amount enclosed

033249 000000187 գլիլիկիիիիիիիիներինիիիիիներիներիների

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CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

<u> Արթագորիոլ (Սգենքուր (ՍԱԾ գորարիի</u>

Duke Energy Payment Processing PO Box 1094 Chartotte, NC 28201-1094





| Current electric usag | e for meter number 10307 | 40 |
|------------------------|--------------------------|---------|
| Actual reading on Dec | 19 | 46616 |
| Previous reading on No | ov 21 | - 46609 |
| Energy Used | | 7 kWh |
| Billed kWh | 7.000 kWh | |

Billing details - Electric

| Minimum Bill Adjustment | 12.99 | |
|---|---------|--|
| 7.000 kWh @ 0.197c | 0.01 | |
| Asset Securitization Charge | | |
| 7.000 kWh @ 4.670c | 0.33 | |
| Fuel Charge | | |
| 7.000 kWh @ 9.419c | 0.65 | |
| Energy Charge | | |
| Customer Charge | \$16.02 | |
| Meter - 1030740 | | |
| Billing Period - Nov 21 24 to Dec 19 24 | | |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

Billing details - Taxes

| Total Taxes | \$2.94 |
|---------------------------|--------|
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.03 |
| State And Other Taxes | \$2.14 |



Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC 5335 W BLADE LN PUMP

Bill date Dec 27, 2024 For service Nov 23 - Dec 23 31 days

Account number 9100 8512 6911

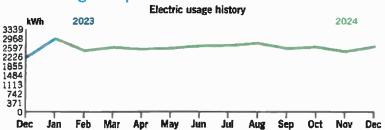
Billing summary





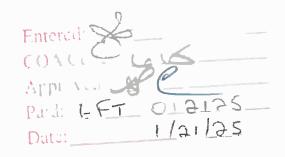
Thank you for your payment.

Your usage snapshot



Average temperature in degrees

| 60 17 31 | 1.61 | 77 | 1 4 79 | 77 1 10 |
|------------------|----------------------|--------------|----------------|-------------------|
| | Current Month | Dec 2023 | 12-Month Usage | Avg Monthly Usage |
| Electric (kWh) | 2,649 | 2,190 | 31,647 | 2,637 |
| Avg. Daily (kWh) | 85 | 88 | 86 | |
| 12-month usage | based on most re | cent history | | |



pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Mail your payment at least 7 days before the due date or

Account number 9100 8512 6911

\$433.08 by Jan 17

Your payment is scheduled to is made by monthly automatic draft on Jan 17

Add here, to help others with a contribution to Share the Light

Amount enclosed

024694 000001352 ուկիլիերինիրդոնինիրիկիրինինինինինի

CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

Please return this portion with your payment. Thank you for your business.

Duke Energy Return Mail PO Box 1090

Charlotte, NC 28201-1090

: Որ-Որ-Որ, Որ, Ուրաբանը[Արաբանը հանդիր իրի հետ հային հանդին գինքորությա

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094





| Current electric | isage for meter number 4107 | 759 |
|---------------------|-----------------------------|-----------|
| Actual reading on | Dec 23 | 64400 |
| Previous reading of | n Nov 23 | - 61751 |
| Energy Used | | 2,649 kWh |
| Billed kWh | 2,649.000 kWh | |

Billing details - Electric

| Billing Period - Nov 23 24 to Dec 23 24 | |
|---|----------|
| Meter - 4107759 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 2,649.000 kWh @ 9.419c | 249.52 |
| Fuel Charge | |
| 2,649.000 kWh @ 4.670c | 123.71 |
| Asset Securitization Charge | |
| 2,649.000 kWh @ 0.197c | 5.22 |
| Total Current Charges | \$394.47 |

Billing details - Taxes

| Total Taxes | \$38.61 |
|---------------------------|---------|
| Gross Receipts Tax | 10.12 |
| Regulatory Assessment Fee | 0.34 |
| State And Other Taxes | \$28.15 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates



Service address
CITRUS WATERWORKS INC
5265 W BANDY LN
COMM

Bill date Nov 22, 2024 For service Oct 24 - Nov 20 28 days

Account number 9100 8516 7134

Billing summary

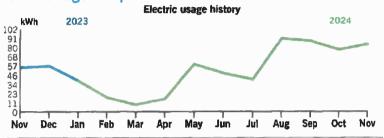
| Previous Amount Due | \$32.93 |
|--------------------------|---------|
| Payment Received Nov 15 | -32.93 |
| Current Electric Charges | 30.00 |
| Taxes | 2.94 |
| Total Amount Due Dec 13 | \$32.94 |



Thank you for your payment.

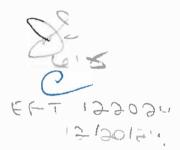
Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 8.5%, Purchased Power 4.4%, Gas 81.1%, Oil 0.1%, Nuclear 0%, Solar 5.9% (For prior 12 months ending September 30, 2024).

Your usage snapshot



Average temperature in degrees

| 64 | 6C | - 5 | 60 | | JRD | - 0 | . 0 | | - 4 |
|---------|------------|----------|---------|--------------|------|---------|-----|-------------|-------|
| | | Current | Month | Nov 2023 | 12-M | onth Us | age | Avg Monthly | Usage |
| Electri | (kWh) | 84 | 4 | 55 | | 626 | | 52 | |
| Avg. D | aily (kWh) | 3 | | 2 | | 2 | | | |
| 12-mc | nth usage | based on | most re | cent history | | | | | |



Please return this portion with your payment. Thank you for your pusiness.



Account number 9100 8516 7134

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201 1090 Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Amount of automatic draft

\$32.94 by Dec 13 Your payment is scheduled to be made by monthly automatic draft on Dec 13

Add here, to help others with a contribution to Share the Light

Amount enclosed

լեկիկիլելիների կորուդին կորուների հիրարկերին կարության և հիրարարան հուրարարան հուրարարան հուրարարան հուրարարան

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

032817 000000197 Սվետիկիիկըըթիլիլիրութիկոլիումինիլինիյինի



CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





| Current electric usa | age for meter number 10307 | 40 |
|----------------------|----------------------------|---------|
| Actual reading on No | ov 20 | 46609 |
| Previous reading on | Oct 24 | - 46525 |
| Energy Used | | 84 kWh |
| Billed kWh | 84.000 kWh | |

Billing details - Electric

| Total Current Charges | \$3 | 0.00 |
|---|---------|------|
| Minimum Bill Adjustment | 1.98 | |
| 84.000 kWh @ 0.197c | 0.17 | |
| Asset Securitization Charge | | |
| 84.000 kWh @ 4.670c | 3.92 | |
| Fuel Charge | | |
| 84.000 kWh @ 9.419c | 7.91 | |
| Energy Charge | | |
| Customer Charge | \$16.02 | |
| Meter - 1030740 | | |
| Billing Period - Oct 24 24 to Nov 20 24 | | |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

Billing details - Taxes

| Total Taxes | \$2.94 |
|---------------------------|--------|
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.03 |
| State And Other Taxes | \$2.14 |



b.def.duke.bills.20241125201511.5.afo-50421-000001308

Service address CITRUS WATERWORKS INC 5335 W BLADE LN

Bill date Nov 26, 2024 For service Oct 26 - Nov 22 28 days

Account number 9100 8512 6911

Billing summary

| Total Amount Due Dec 17 | \$401.23 |
|--------------------------|----------|
| Taxes | 35.77 |
| Current Electric Charges | 365.46 |
| Payment Received Nov 19 | -431.01 |
| Previous Amount Due | \$431.01 |

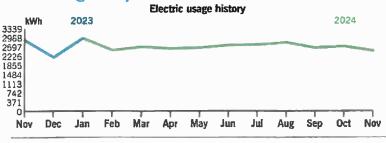


PUMP

Thank you for your payment.

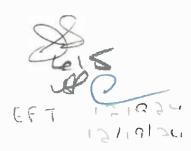
Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 8.5%, Purchased Power 4.4%, Gas 81.1%, Oil 0.1%, Nuclear 0%, Solar 5.9% (For prior 12 months ending September 30, 2024).

Your usage snapshot



Average temperature in degrees

| 64 | 60' | 2 57 | 66 | 64 | 8 8 | 79 | 7 |
|--------|------------|---------|-----------|--------------|----------------|-----------------|-----|
| | | Currer | t Month | Nov 2023 | 12-Month Usage | Avg Monthly Usa | age |
| Electr | ic (kWh) | 2, | 446 | 2,887 | 31,188 | 2,599 | |
| Avg. 1 | Daily (kWh |) | 87 | 87 | 86 | | |
| 12-m | onth usam | based o | n most re | cent history | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Please return this portion with your payment. Thank you for your business.



Account number 9100 8512 6911

\$401.23 by Dec 17

Your payment is scheduled to be made by monthly automatic draft on Dec 17

Duke Energy Return Mail PO Rox 1090 Charlotte, NC 28201 1090

Add here, to help others with a contribution to Share the Light

Amount enclosed

025211 000001308 գրույյգլանիլ իրանականի հետանական հայարարան հետորական հետ

CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094



| Current electric | usage for meter number 41077 | 759 |
|---------------------|------------------------------|-----------|
| Actual reading on | Nov 22 | 61751 |
| Previous reading of | on Oct 26 | - 59305 |
| Energy Used | | 2,446 kWh |
| Billed kWh | 2,446.000 kWh | |

Billing details - Electric

| Billing Period - Oct 26 24 to Nov 22 24 | |
|---|----------|
| Meter - 4107759 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 2,446.000 kWh @ 9.419c | 230.39 |
| Fuel Charge | |
| 2,446.000 kWh @ 4.670c | 114.23 |
| Asset Securitization Charge | |
| 2,446.000 kWh @ 0.197c | 4.82 |
| Total Current Charges | \$365.46 |

Billing details - Taxes

| Total Taxes | \$35.77 |
|---------------------------|---------|
| Gross Receipts Tax | 9.38 |
| Regulatory Assessment Fee | 0.32 |
| State And Other Taxes | \$26.07 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates



WITHLACOOCHEE RIVER ELECTRIC COOPERATIVE, INC.

Your Touchesone Energy Cooperative P.O. Box 278 • Dade City, Florida 33526-0278 Account Number Meter Number

2151511 93047332 Customer Number 20089703

State Tax

Customer Name CITRUS WATER WORKS INC

Bill Date Amount Due 11/07/202 80.6 12/02/202

Current Charges Due District Office Serving You Crystal River

Service Address Service Classification

Period

Nov 2024

Oct 2024

Nov 2023

11927 N ELL SWORTH TER General Service Non-Demand

Days

32

29

Comparative Usage Information Average kWh Per Day 12 8 7

BILLS ARE DUE WHEN RENDERED A 1.5 percent, but not less than \$5, late charge will apply to unpaid balances as of 5:00 p.m. on the due date shown on this bill.



You have 24-hour access to manage your account on-line through Smarthub at www.wrec.net. If you would like to make a payment using your credit card, please call 855-938-3431. This number is WREC's Secure Pay-By-Phone system.

See Reverse Side For More Information

Cycle 05

ELECTRIC SERVICE Date Date Reading Reading Multiplier Dem. Reading | KW Demand kWh Used 10/03 63690 11/04 64080 390 Previous Balance 64.62 Payment 64.62CR Balance Forward 0.00 Customer Charge 39.16 Energy Charge 390 KWH @ 0.05017 Fuel Adjustment 390 KWH @ 0.03800 19.57 14.82 FL Gross Receipts Tax 1.89

Total Current Charges Total Due E.F.T. 80.68 80.68

DO NOT PAY Total amount will be electronically transferred on or after 11/22/2024.

WITHLACOOCHEE RIVER ELECTRIC Your Touchstone Energy Cooperative P.O. Box 278 • Dade City, Florida 33526-0278

Please Detach and Return This Portion With Your Payment To Ensure Accurate Posting.

See Reverse Side For Mailing Instructions

Bill Date: 11/07/2024

Use above space for address change ONLY.

District: CR05



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CITRUS WATER WORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

մՈԷՈրըընոնոշ|ՄՈլիշկյոնլիոլ|Ոլիիլիվուն|ՄՈլիլիլին||ՈՒՈ||Ոլիլիլի

CR05

Electronic Funds Transfer on or after 11/22/2024 **TOTAL CHARGES DUE** 80.68 DO NOT PAY

00021515110000008068000000806806



Your Energy Bill

Page 1 of 3

Service address
CITRUS WATERWORKS INC
5265 W BANDY LN
COMM

Bill date Oct 25, 2024 For service Sep 21 - Oct 23 33 days

Account number 9100 8516 7134

Billing summary

| Previous Amount Due | \$32.94 |
|--------------------------|---------|
| Payment Received Oct 15 | -32.94 |
| Current Electric Charges | 30.00 |
| Taxes | 2.93 |
| Total Amount Due Nov 15 | \$32.93 |



Thank you for your payment.

Learn how to lower your bill with an online or free on-site Business Energy Check. This no-cost analysis provides you with specific tips on how to save energy and qualify for valuable rebates for energy-savings measures. You may also qualify for a FREE Commercial Energy Savings Kit. Go to duke-energy.com/FreeBizCheck or email prescriptiveincentives@duke-energy.com.

To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Your usage snapshot

| | | _ | | Ε | lectric | usage | history | , | | | | |
|---|-----|------|-----|-----|---------|-------|---------|-----|-----|-----|------|-----|
| kWi | h . | 2023 | | | | _ | | , | | | 2024 | |
| 102 91 80 68 57 46 34 23 | | ~ | \ | | _ | _/ | _ | _ | _/ | | | |
| Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | nut | Jut | Aug | Sep | Oct |

Average temperature in degrees

| 7). | 64 | 604 | 32 | AP | 64 | UT | 3.7 | 86.7 | - 9 | - A | 777 | |
|--------|------------|------|---------|----------|-------|--------|------|---------|------|-------|--------|-------|
| | | - (| Current | Month | Oct | 2023 | 12-N | lonth U | sage | Avg N | onthly | Usage |
| Electr | ic (kWh) | | 77 | | 4 | 15 | | 597 | | | 50 | |
| Avg. [| Daily (kWl | 1) | 2 | | | 1 | | 2 | | | | |
| 12-m | onth usas | e ba | sed റെ | most red | ent h | istorv | | | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Please return this portion with your payment. Thank you for your business.



Account number 9100 8516 7134

imbor \$22.02 Vous

\$32.93 by Nov 15 Your payment is scheduled to be made by monthly automatic draft on Nov 15

Add here, to help others with a contribution to Share the Light

Amount enclosed

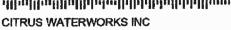
լիայինեսին երկինիկինիկինիկինիկինինինինին

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

PO 8px 1090 Charlotte, NC 28201-1090

Duke Energy Return Mail





CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434







| Current electric us | age for meter number 10307 | 40 |
|---------------------|----------------------------|--------|
| Actual reading on O | ct 23 | 46525 |
| Previous reading on | - 46448 | |
| Energy Used | | 77 kWh |
| Billed kWh | 77.000 kWh | |

Billing details - Electric

| Billing Period - Sep 21 24 to Oct 23 24 | | |
|---|---------|---------|
| Meter - 1030740 | | |
| Customer Charge | \$16.02 | |
| Energy Charge | | |
| 77.000 kWh @ 9.419c | 7.25 | |
| Fuel Charge | | |
| 77.000 kWh @ 4.670c | 3.60 | |
| Asset Securitization Charge | | |
| 77.000 kWh @ 0.197c | 0.15 | |
| Minimum Bill Adjustment | 2.98 | |
| Total Current Charges | | \$30.00 |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

Billing details - Taxes

| Total Taxes | \$2.93 |
|---------------------------|--------|
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.03 |
| State And Other Taxes | \$2.13 |





Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC 5335 W BLADE LN PUMP

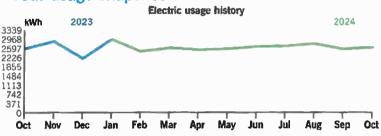
Bill date Oct 29, 2024 For service Sep 25 - Oct 25 31 days

Account number 9100 8512 6911

Billing summary

| Total Amount Due Nov 19 | \$431.01 |
|--------------------------|----------|
| Taxes | 38.42 |
| Current Electric Charges | 392.59 |
| Payment Received Oct 17 | -420.85 |
| Previous Amount Due | \$420.85 |

Your usage snapshot



Average temperature in degrees

| 71 | 64' | 60° | - 5 | 57 | 14 | 901 | -0 | - B | , | 9 |
|---------|-----------|------|---------|----------|--------------|--------------|-------|--------|---------|------|
| | | - (| Current | Month | Oct 2023 | 12-Month Usa | ige / | Avg Mo | nthly U | sage |
| Electri | c (kWh) | | 2,63 | 36 | 2,591 | 31,629 | | 2 | ,636 | |
| Avg. D | aily (kWi | h) | 85 | i | 86 | 86 | | | | |
| 12-mc | nth usag | e ha | sed on | most red | cent history | | | | | |



Thank you for your payment.

Learn how to lower your bill with an online or free on-site Business Energy Check. This no-cost analysis provides you with specific tips on how to save energy and qualify for valuable rebates for energysavings measures. You may also qualify for a FREE Commercial Energy Savings Kit. Go to duke-energy.com/FreeBizCheck or email prescriptiveincentives@duke-energy.com.

To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information, 3. Specific addresses, landmarks and directions work best.



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Picase return this portion with your payment. Thank you for your business.



PO Box 1090

Duke Energy Return Mail

Charlotte, NC 28201-1090

Account number

9100 8512 6911

\$431.01 by Nov 19

greater.

Your payment is scheduled to be made by monthly automatic draft on Nov 19

Add here, to help others with a

Amount enclosed

contribution to Share the Light

agetalustatjajegaetaggyttilustittiffeffallediejeniffefellfleffijje

Duke Energy Payment Processing PO Box 1094

Charlotte, NC 28201-1094

024254 000003624 երոչմի<u>իի</u> իոչմու<u>իցինիոլիի</u> իրկուցիիրիկոնիի











| Current electric | usage for meter number 41077 | 759 |
|---------------------|------------------------------|-----------|
| Actual reading on | Oct 25 | 59305 |
| Previous reading of | on Sep 25 | - 56669 |
| Energy Used | | 2,636 kWh |
| Billed kWh | 2,636.000 kWh | |

Billing details - Electric

| Billing Period - Sep 25 24 to Oct 25 24 | |
|---|----------|
| Meter - 4107759 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 2,636,000 kWh @ 9.419c | 248.28 |
| Fuel Charge | |
| 2,636.000 kWh @ 4.670c | 123,10 |
| Asset Securitization Charge | |
| 2,636.000 kWh @ 0.197c | 5.19 |
| Total Current Charges | \$392.59 |

Billing details - Taxes

| Total Taxes | \$38.42 |
|---------------------------|---------|
| Gross Receipts Tax | 10.08 |
| Regulatory Assessment Fee | 0.34 |
| State And Other Taxes | \$28.00 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates





Your Touchstone Energy Cooperative P.O. Box 278 • Dade City, Florida 33526-0278

Account Number 2151511 Meter Number 93047332 Customer Number 20089703

Customer Number 20089703
Customer Name CITRUS WATER WORKS INC

Bill Date Amount Due Current Charges Due 10/08/202 64.6 10/29/202

District Office Serving You Crystal River

Service Address 11927 N ELLSWO

Service Classification

11927 N ELLSWORTH TER General Service Non-Demand

| | W-1000 | |
|---------------|-------------|----------------|
| Comparative | Usage In | formation |
| | Ave | rage kWh |
| <u>Period</u> | <u>Days</u> | <u>Per Day</u> |
| Oct 2024 | 29 | 8 |
| Sep 2024 | 30 | 6 |
| Oct 2023 | 28 | 11 |

BILLS ARE DUE WHEN RENDERED A 1.5 percent, but not less than \$5, late charge will apply to unpaid balances as of 5:00 p.m. on the due date shown on this bill.



You have 24-hour access to manage your account on-line through Smarthub at www.wrec.net. If you would like to make a payment using your credit card, please call 855-938-3431. This number is WREC's Secure Pay-By-Phone system.

See Reverse Side For More Information

Cycle 05

| From To | ELECTRIC SER | VICE | |
|-----------------------------|--------------------------|------------------------|------------------------|
| Date Reading Date Rea | ding Multiplier 690 | Dem. Reading KW Demand | <u>kWh Used</u> 224 |
| Previous Balance Payment | | 61.43CR | 61.43 |
| Balance Forward | | 01.43CR | 0.00 |
| | | | |
| Customer Charge | | 39.16 | |
| Energy Charge 224 KWH @ | | 11.24 | |
| Fuel Adjustment 224 KWH | @ 0.03800 | 8.51 | |
| FL Gross Receipts Tax | | 1.51 | |
| State Tax | | 4.20 | |
| Total Current Charges | | | 64.62 |
| Total Due | E.F.T. | | 64.62 |

Approved: 62 1005311

Date: 10725/84

DO NOT PAY

Total amount will be electronically transferred on or after 10/25/2024

WITHLACOOCHEE RIVER ELECTRIC
COOPERATIVE, INC.
Your Touchstone Energy Cooperative

Your Touchstone Energy Cooperative P.O. Box 278 - Dade City, Florida 33526-0278

Please Detach and Return This Portion With Your Payment To Ensure Accurate Posting.

See Reverse Side For Mailing Instructions

Bill Date: 10/08/2024

Use above space for address change ONLY.

District: CR05



CR05
CITRUS WATER WORKS INC
4939 CROSS BAYOU BLVD
NEW PORT RICHEY FL 34652-3434

արհայիլակիկիկիկիկին հուրոյիկանակիլ

TOTAL CHARGES DUE 64.62

DO NOT PAY

duke-energy.com **RGY.** 877.372.8477

Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC 5265 W BANDY LN *COMM*

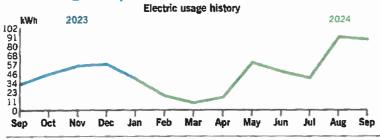
Bill date Sep 24, 2024 For service Aug 23 - Sep 20 29 days

Account number 9100 8516 7134

Billing summary

| Total Amount Due Oct 15 | \$32.94 |
|--------------------------|---------|
| Taxes | 2.94 |
| Current Electric Charges | 30.00 |
| Payment Received Sep 16 | -32.94 |
| Previous Amount Due | \$32.94 |

Your usage snapshot



Average temperature in degrees

| 78 71 | * 64 | - 60 | +2 | 5 2" | 90 | AB | 7 | BL | III. | - # | 147 |
|--------------|-------|----------|---------|--------|--------|------|---------|------|-------|--------|-------|
| | | Curren | t Month | Sep | 2023 | 12-M | lonth U | sage | Avg M | onthly | Usage |
| Electric (k) | Nh) | 8 | 8 | 3 | 32 | | 565 | | | 47 | |
| Avg. Daily | (kWh) | | 3 | | 1 | | 2 | | | | |
| 12-month | usage | based or | most re | cent h | istory | | | | | | |



Thank you for your payment.

Know what's below. Call before you dig. Always call 811 before you dig, it's the law. Making this free call at least two full working days before you dig gets utility lines marked and helps protect you from injury and expense, Call 811 or visit Call811.com.

To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Approved: Je

Mail your payment at least 7 days before the due date or pay Instantiy at duke-energy.com/billing, Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



9100 8516 7134

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090 Account number

Add here, to help others with a contribution to Share the Light

\$32.94

by Oct 15

Your payment is scheduled to

draft on Oct 15

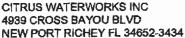
be made by monthly automatic

Amount enclosed

գոհունիոլիկիկիկիկիկուիկիրութիրությանը բոլարունիոնիայիկիկինը

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

033866 000000179 <u>નું કુ કુર્કોનું કુ તે તું કુર્કોનું મુખ્યત્વો છે.</u>









| Current electric usage | for meter number 10307 | 40 |
|--------------------------|------------------------|---------|
| Actual reading on Sep 20 | 0 | 46448 |
| Previous reading on Aug | 23 | - 46360 |
| Energy Used | | 88 kWh |
| Billed kWh | 88,000 kWh | |

Billing details - Electric

| Minimum Bill Adjustment | 1.41 |
|---|---------|
| 88.000 kWh @ 0.197c | 0.17 |
| Asset Securitization Charge | |
| 88.000 kWh @ 4.670c | 4.11 |
| Fuel Charge | |
| 88.000 kWh @ 9.419c | 8.29 |
| Energy Charge | |
| Customer Charge | \$16.02 |
| Meter - 1030740 | |
| Billing Period - Aug 23 24 to Sep 20 24 | |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable efectric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section.

Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

Billing details - Taxes

| Total Taxes | \$2.94 |
|---------------------------|--------|
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.03 |
| State And Other Taxes | \$2.14 |



duke-energy.com 877.372.8477

Your Energy Bill

Service address CITRUS WATERWORKS INC. 5335 W BLADE LN PUMP

Bill date Sep 26, 2024 For service Aug 27 - Sep 24 29 days

Account number 9100 8512 6911

Billing summary

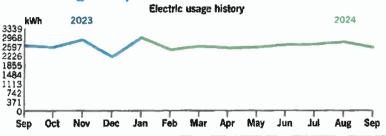
| Previous Amount Due | \$454.76 |
|--------------------------|----------|
| Payment Received Sep 18 | -454.76 |
| Current Electric Charges | 383.32 |
| Taxes | 37.53 |
| Total Amount Due Oct 17 | \$420.85 |

Thank you for your payment.

Know what's below, Call before you dig. Always call 811 before you dig, it's the law. Making this free call at least two full working days before you dig gets utility lines marked and helps protect you from injury and expense. Call 811 or visit Call811.com.

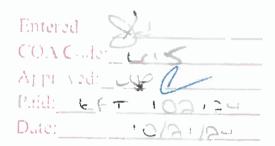
To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Your usage snapshot



Average temperature in degrees

| 78 71 | 54 | 60. | 1,7 | 57 | 1,0 | DV. | 17 | (117 | | - 1 | 79 |
|---------------|-------|----------|---------|--------|--------|------|--------|------|-------|----------|-------|
| | | Current | Month | Sep | 2023 | 12-M | onth U | sage | Avg M | onthly L | Jsage |
| Electric (kW | h) | 2,5 | 71 | 2, | 651 | 3 | 31,584 | | | 2,632 | |
| Avg. Daily (k | (Wh) | 89 | 9 | 8 | 36 | | 87 | | | | |
| 12-month u | sage! | based on | most re | cent h | istory | | | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

ուկոլ[իրակիրակիրակիրանիակիրանի հայարարանի հայարակիրակիրակիրակիրակում

Please return this portion with your payment. Thank you for your business.



Account number 9100 8512 6911

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

\$420.85

by Oct 17

Amount enclosed

Your payment is scheduled to

draft on Oct 17

be made by monthly automatic

029715 000001181 մոլովեկիկիրականակիրականիկիկիկիկի

CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434



Duke Energy Payment Processing PO Box 1094

greater.

Charlotte, NC 28201-1094



| Current electric usage for meter number 4107759 | | | | | | |
|---|---------------|---------------|--|--|--|--|
| Actual reading on | Sep 24 | 5666 9 | | | | |
| Previous reading of | - 54098 | | | | | |
| Energy Used | | 2,571 kWh | | | | |
| Billed kWh | 2,571.000 kWh | | | | | |

Billing details - Electric

| Billing Period - Aug 27 24 to Sep 24 24 | | |
|---|---------|--|
| Meter - 4107759 | | |
| Customer Charge | \$16.02 | |
| Energy Charge | | |
| 2,571.000 kWh @ 9.419c | 242.17 | |
| Fuel Charge | | |
| 2,571.000 kWh @ 4.670c | 120.07 | |
| Asset Securitization Charge | | |
| 2,571.000 kWh @ 0.197c | 5.06 | |
| Total Current Charges \$3 | | |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates

Billing details - Taxes

| Total Taxes | \$37.53 |
|---------------------------|---------|
| Gross Receipts Tax | 9.84 |
| Regulatory Assessment Fee | 0.33 |
| State And Other Taxes | \$27.36 |



WITHLACOOCHEE RIVER ELECTRIC COOPERATIVE INC.

Your Touchstone Energy Cooperative P.O. Box 278 - Dade City, Florida 33526-0278 Account Number Meter Number

2151511 93047332

Customer Number 20089703

Total Current Charges

Total Due

Customer Name CITRUS WATER WORKS INC

Bill Date Amount Due Current Charges Due 09/09/202 61.4 10/01/202

61.43

61.43

District Office Serving You Crystal River

Service Address Service Classification

Sep 2023

11927 N ELLSWORTH TER General Service Non-Demand

Comparative Usage Information Average kWh Period <u>Davs</u> Per Day Sep 2024 30 Aug 2024 5 33

BILLS ARE DUE WHEN RENDERED A 1.5 percent, but not less than \$5, late charge will apply to unpaid balances as of 5:00 p.m. on the due date shown on this bill.



You have 24-hour access to manage your account on-line through Smarthub at www.wrec.net. If you would like to make a payment using your credit card, please call 855-938-3431. This number is WREC's Secure Pay-By-Phone system.

10

See Reverse Side For More Information

Cycle 05

ELECTRIC SERVICE <u>Date</u> <u>Date</u> kWh Used Reading Reading Multiplier Dem. Reading KW Demand 08/05 63275 09/04 63466 191 Previous Balance 59.98 Payment 59,98CR Balance Forward 0.00 Customer Charge 39,16 Energy Charge 191 KWH @ 0.05017 9.58 Fuel Adjustment 191 KWH @ 0.03800 7.26 FL Gross Receipts Tax 1.44 State Tax 3.99

E.F.T.

WO 3002 9/20/07

DO NOT PAY

Total amount will be electronically transferred on or after 09/20/2024

WITHLACOOCHEE RIVER ELECTRIC COOPERATIVE, INC. Your Touchstone Energy Cooperative P.O. Box 278 • Dade City, Florida 33526-0278

Please Detach and Return This Portion With Your Payment To Ensure Accurate Posting.

See Reverse Side For Mailing Instructions

Bill Date: 09/09/2024

Use above space for address change ONLY.

District: CR05

CR05 약영 2151511 CITRUS WATER WORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

ոլիվ||Որոլովկը||ժետև||||հրվ||Անվ||նոնիվ։

Electronic Funds Transfer on or after 09/20/2024 **TOTAL CHARGES DUE** 61.43

DO NOT PAY

Billing summary

Current Electric Charges

Total Amount Due Sep 18

Previous Amount Due

duke-energy.com GY. 877.372.8477

Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC. 5335 W BLADE LN **PUMP**

Bill date Aug 28, 2024 For service Jul 26 - Aug 26 32 days

Account number 9100 8512 6911



Thank you for your payment.

Duke Energy Florida utilized fuel in the following proportions to generate your power; Coal 8.7%, Purchased Power 6.2%, Gas 79.5%, Oil 0.1%, Nuclear 0%, Solar 5.5% (For prior 12 months ending June 30, 2024).

Energy Review: Our team of Business Energy Advisors is here to connect you with personalized energy solutions and rebates. Get started: duke-energy.com/MySolution



\$440.33

440.33

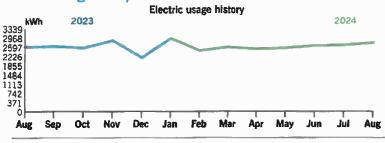
414.22

40.54

\$454.76

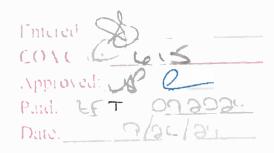
Your usage snapshot

Payment Received Aug 19



Average temperature in degrees

| 02 /0 | 7.1 | 04 | 00 | | 0.0 | 0.7 | - | |
|----------------|------------|----------|----------|-------------|------|------------|----------|-----------|
| | C | urrent f | Month | Aug 2023 | 12-M | onth Usage | Avg Mont | hly Usage |
| Electric (kWh) | | 2,78 | 6 | 2,624 | 3 | 31,664 | 2,6 | 39 |
| Avg. Daily (kW | ჩ) | 87 | | 85 | | 86 | | |
| 12-month usas | e ba | sed on r | nost red | ent history | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Please return this portion with your payment. Thank you for your pusiness.



Account number 9100 8512 6911

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201 1090

draft on Sep 18

Add here, to help others with a contribution to Share the Light

Amount enclosed

Your payment is scheduled to

be made by monthly automatic

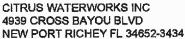
ումըլական արագայան է արդանական արգանական արդանական հետ արդանական հետ արդանական հետ արդանական հետ արդանական հետ

\$454.76

by Sep 18

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094













| Current electric usage for meter number 4107759 | | | | | | |
|---|---------------|-----------|--|--|--|--|
| Actual reading on Aug 26 54098 | | | | | | |
| Previous reading of | - 51312 | | | | | |
| Energy Used | | 2,786 kWh | | | | |
| Billed kWh | 2,786.000 kWh | | | | | |

Billing details - Electric

| Billing Period - Jul 26 24 to Aug 26 24 | | |
|---|---------|--|
| Meter - 4107759 | | |
| Customer Charge | \$16.02 | |
| Energy Charge | | |
| 2,786.000 kWh @ 9.419c | 262.41 | |
| Fuel Charge | | |
| 2,786.000 kWh @ 4.670c | 130.11 | |
| Asset Securitization Charge | | |
| 2,786.000 kWh @ 0.204c | 5.68 | |
| Total Current Charges \$ | | |

Billing details - Taxes

| Total Taxes | \$40.54 |
|---------------------------|---------|
| Gross Receipts Tax | 10.63 |
| Regulatory Assessment Fee | 0.36 |
| State And Other Taxes | \$29.55 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukenergy.com/rates





Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC 5265 W BANDY LN *COMM*

Bill date Aug 26, 2024 For service Jul 24 - Aug 22 30 days

Account number 9100 8516 7134



| Total Amount Due Sep 16 | \$32.94 |
|--------------------------|---------|
| Taxes | 2.94 |
| Current Electric Charges | 30.00 |
| Payment Received Aug 15 | -26.04 |
| Previous Amount Due | \$26.04 |

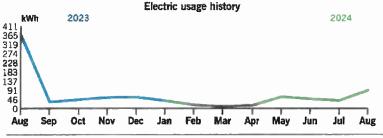


Thank you for your payment.

Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 8.7%, Purchased Power 6.2%, Gas 79.5%, Oil 0.1%, Nuclear 0%, Solar 5.5% (For prior 12 months ending June 30, 2024).

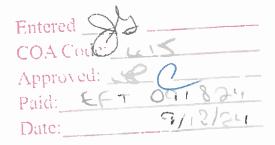
Energy Review: Our team of Business Energy Advisors is here to connect you with personalized energy solutions and rebates. Get started: duke-energy.com/MySolution

Your usage snapshot



Average temperature in degrees

| 82 | 7 | 71 | 64 | 60* | 57 | fa | 69 | - 1 | HC. | | 8.7 |
|--------|-----------|------|----------|---------|--------------|------|---------|------|--------|-------|-------|
| | | | Current | Month | Aug 2023 | 12-N | Month U | sage | Avg Mo | nthly | Usage |
| Electr | ic (kWh) | | 9 | 1 | 365 | | 509 | | | 42 | |
| Avg. I | Daity (kW | h) | 3 | } | 11 | | 1 | | | | |
| 12-m | onth usa | ge l | pased on | most re | cent history | | | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

լունաինակարորդարիկնում է ինչ և անդարանական արևանիկան և հայարանական և հայարան և հայարանական և հայարանական և հայարանական և հայարանական և հայարան և հայարանական և հայարան և հայարանական և հայարանական և հայարանական և հայարանական և հայարան և հայարանական և հայարանական և հայարանական և հայարանական և հայարան և հայարան և հայարանական և հայարանական և հայարանական և հայարան և հայարանական և հայարան և հայարանական և հայարանական և հայարան և հայարանական և հայարանական և հայարան և հայարան և հայարանական և հայարանական և հայարան և հայարան և հայարանական և հայարանական և

Please return this portion with your payment. Thank you for your business.



Duke Energy Return Mail

Account number 9100 8516 7134

\$32.94 by Sep 16

greater.

Your payment is scheduled to be made by monthly automatic draft on Sep 16

PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

Amount enclosed

033678 000000179

CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434



Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094





| Current electric usage for meter number 1030740 | | | | | | |
|---|------------|---------|--|--|--|--|
| Actual reading on Aug | 22 | 46360 | | | | |
| Previous reading on J | ul 24 | - 46269 | | | | |
| Energy Used | | 91 kWh | | | | |
| Billed kWh | 91.000 kWh | | | | | |

Billing details - Electric

| Billing Period - Jul 24 24 to Aug 22 24 | |
|---|---------|
| Meter - 1030740 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 91.000 kWh @ 9.419c | 8.56 |
| Fuel Charge | |
| 91.000 kWh @ 4.670c | 4.25 |
| Asset Securitization Charge | |
| 91.000 kWh @ 0.204c | 0.19 |
| Minimum Bill Adjustment | 0.98 |
| Total Current Charges | \$30.00 |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

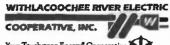
Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates

Billing details - Taxes

| Total Taxes | \$2.94 |
|---------------------------|--------|
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.03 |
| State And Other Taxes | \$2.14 |





Your Touchstone Energy Cooperative P.O. Box 278 • Dade City, Florida 33526-0278

Account Number 2151511 Meter Number 93047332

Customer Number 20089703

Customer Name CITRUS WATER WORKS INC

Cycle 05

Bill Date Amount Due Current Charges Due

08/08/2024 59.98 08/30/2024

District Office Serving You Crystal River

Service Address Service Classification

Aug 2023

11927 N ELLSWORTH TER General Service Non-Demand

| Comparative Usage Information | | | | | | | | |
|-------------------------------|------|-------------|----------|--|--|--|--|--|
| l . | | Ave | rage kWh | | | | | |
| Ps | riod | <u>Days</u> | Per Day | | | | | |
| Aug | 2024 | 33 | 5 | | | | | |
| Jul | 2024 | 28 | 4 | | | | | |

BILLS ARE DUE WHEN RENDERED A 1.5 percent, but not less than \$5, late charge will apply to unpaid balances as of 5:00 p.m. on the due date shown on this bill.



You have 24-hour access to manage your account on-line through Smarthub at www.wrec.net. If you would like to make a payment using your credit card, please call 844-209-7166. This number is WREC's Secure Pay-By-Phone system.

9

See Reverse Side For More Information

| | /ICE | | |
|---|-----------|------------------------|-----------------|
| From To <u>Date Reading Date Read</u> 07/03 63099 08/05 632 | | Dem. Reading KW Demand | kWh Used 176 |
| Previous Balance | | 54 760D | 54.76 |
| Payment Balance Forward | 54.76CR | 0.00 | |
| Customer Charge | | 39.16 | |
| Energy Charge 176 KWH @ | | 8.83 | |
| Fuel Adjustment 176 KWH FL Gross Receipts Tax | @ 0.03800 | 6.69 1.40 | |
| State Tax | | 3.90 | |
| Total Current Charges Total Due | E.F.T. | | 59.98 59.98 |

Date:

DO NOT PAY Total amount will be electronically transferred on or after 08/23/2024.

WITHLACOOCHEE RIVER ELECTRIC COOPERATIVE, INC. Your Touchstone Energy Cooperative

Please Detach and Return This Portion With Your Payment To Ensure Accurate Posting.

See Reverse Side For Mailing Instructions

P.O Box 278 - Dade City, Florida 33526-0278

Bill Date: 08/08/2024

Use above space for address change ONLY.

District: CR05



°% 2151511 **CR05** CITRUS WATER WORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

<u>Եվրենիրուանիկնեն անդերելիրի իրաննիկիրի ընդանին</u>

Electronic Funds Transfer on or after 08/23/202 **TOTAL CHARGES DUE** 59.9 DO NOT PAY

duke-energy.com 877.372.8477

Your Energy Bill

Service address CITRUS WATERWORKS INC. 5335 W BLADE LN **PUMP**

Bill date Jul 29, 2024 For service Jun 25 - Jul 25

31 days

Account number 9100 8512 6911

Billing summary

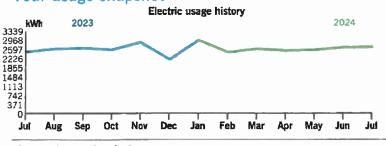
| Total Amount Due Aug 19 | \$440.33 |
|--------------------------|----------|
| Taxes | 39.26 |
| Current Electric Charges | 401.07 |
| Payment Received Jul 17 | -437.34 |
| Previous Amount Due | \$437.34 |



Thank you for your payment.

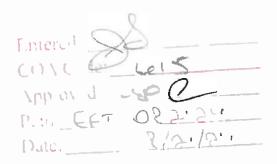
To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Your usage snapshot



Average temperature in degrees

| 81. | 92. | 10. | 7.4 | 641 | DU | - 1 | | | 47 | | | |
|--------|-----------|-------|---------|---------|--------|--------|------|---------|------|-------|----------|-------|
| | | | Current | Month | Jul | 2023 | 12-N | Aonth U | sage | Avg M | onthly (| Jsage |
| Electr | ic (kWh) | | 2,6 | 94 | 2, | 500 | | 31.502 | | | 2,625 | |
| Avg. I | Daily (kW | h) | 8 | 7 | { | 36 | | 86 | | | | |
| 12-m | onth usa | ge ba | sed on | most re | cent h | istory | | | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



9100 8512 6911

Account number

\$440.33 by Aug 19

greater.

Your payment is scheduled to be made by monthly automatic draft on Aug 19

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

Amount enclosed

024986 000003789 մեկկիուՈնանկրեկութիպիկանկութինուննիվութիկիիիկո

CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434



Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094





| Current electric | isage for meter number 41077 | 759 |
|---------------------|------------------------------|-----------|
| Actual reading on | Jul 25 | 51312 |
| Previous reading of | - 48618 | |
| Energy Used | | 2,694 kWh |
| Billed kWh | 2,694.000 kWh | |

Billing details - Electric

| Billing Period - Jun 25 24 to Jul 25 24 | |
|---|----------|
| Meter - 4107759 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 2,694.000 kWh @ 9.419c | 253.74 |
| Fuel Charge | |
| 2,694.000 kWh @ 4.670c | 125.81 |
| Asset Securitization Charge | |
| 2,694.000 kWh @ 0.204c | 5,50 |
| Total Current Charges | \$401.07 |

Billing details - Taxes

| Total Taxes | \$39.26 |
|---------------------------|---------|
| Gross Receipts Tax | 10.29 |
| Regulatory Assessment Fee | 0.35 |
| State And Other Taxes | \$28.62 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates $\,$



duke-energy.com 877.372.8477

Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC 5265 W BANDY LN *COMM*

Bill date Jul 25, 2024 For service Jun 21 - Jul 23 33 days

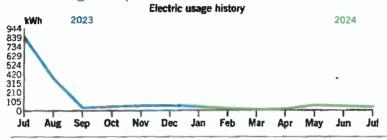
Account number 9100 8516 7134

To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Billing summary

| Total Amount Due Aug 15 | \$26.04 |
|--------------------------|---------|
| Taxes | 2.94 |
| Current Electric Charges | 30.00 |
| Payment Received | 0.00 |
| Previous Amount Due | \$-6.90 |

Your usage snapshot



Average temperature in degrees

| 81. | 82* | 781 | 71 | 64" | 60 | 57 | 57 | 1-0 | 6.0 | / | 6.7 | - II |
|--------|-----------|-----|---------|---------|--------|--------|------|---------|------|-------|----------|-------|
| | | | Current | Month | Jul | 2023 | 12-M | ionth U | sage | Avg M | onthly (| Jsage |
| Electr | ic (kWh) | | 40 | | 8 | 39 | | 783 | | | 65 | |
| Avg. E | Dally (kW | h) | 1 | | : | 29 | | 2 | | | | |
| 12-m | onth usar | e b | ased on | most re | cent h | istory | | | | | | |

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Please return this portion with your payment. Thank you for your business.



Account number

9100 8516 7134

Your payment is scheduled to \$26.04 be made by monthly automatic by Aug 15 draft on Aug 15

Duke Energy Return Mail PO Box 1090 Charlotte NC 28201-1090

Add here, to help others with a contribution to Share the Light

Amount enclosed

033886 000000159

CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434



Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094





| Current electric u | sage for meter number 10307 | 40 |
|---------------------|-----------------------------|---------|
| Actual reading on J | ul 23 | 46269 |
| Previous reading or | Jun 21 | - 46229 |
| Energy Used | | 40 kWh |
| Billed kWh | 40.000 kWh | |

Billing details - Electric

| Billing Period - Jun 21 24 to Jul 23 24 | |
|---|---------|
| Meter - 1030740 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 40.000 kWh @ 9.419c | 3.78 |
| Fuel Charge | |
| 40.000 kWh @ 4.670c | 1.87 |
| Asset Securitization Charge | |
| 40.000 kWh @ 0.204c | 0.08 |
| Minimum Bill Adjustment | 8.25 |
| Total Current Charges | \$30.00 |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

Billing details - Taxes

| 0.03 | |
|------|--------|
| 0.00 | |
| | |
| | \$2.14 |





Your Touchstone Energy Cooperative P.O. Box 278 • Dade City, Florida 33526-0278 Account Number 2151511 Meter Number

93047332 Customer Number 20089703

Customer Name CITRUS WATER WORKS INC

Cycle 05

Bill Date **Amount Due** Current Charges Due 07/09/2024 54.76

07/31/2024

District Office Serving You Crystal River

Service Address Service Classification

Jun 2024

Jul 2023

11927 N ELLSWORTH TER General Service Non-Demand

Comparative Usage Information Average kWh Period Davs Per Day Jul 2024 28

33

30

BILLS ARE DUE WHEN RENDERED A 1.5 percent, but not less than \$5, late charge will apply to unpaid balances as of 5:00 p.m. on the due date shown on this bill.



You have 24-hour access to manage your account on-line through Smarthub at www.wrec.net. If you would like to make a payment using your credit card, please call 844-209-7166. This number is WREC's Secure Pay-By-Phone system.

5

8

See Reverse Side For More Information

ELECTRIC SERVICE

Date Date kWh Used Reading Reading Dem. Reading KW Demand Multiplier 06/05 62977 07/03 63099 122

Previous Balance 58.44 58.44CR Payment 0.00 Balance Forward

Customer Charge 39.16 Energy Charge 122 KWH @ 0.05017 6.12 Fuel Adjustment 122 KWH @ 0.03800 4.64 FL Gross Receipts Tax 1.28 State Tax 3.56

54.76 Total Current Charges 54.76 Total Due ਦ ਦਾ ਦ

DO NOT PAY

Total amount will be electronically transferred on or after 07/26/2024.

WITHLACOOCHEE RIVER ELECTRIC COOPERATIVE, INC. Your Touchstone Energy* Cooperative P.O. Box 278 • Dade City, Florida 33526-0278

Please Detach and Return This Portion With Your Payment To Ensure Accurate Posting.

See Reverse Side For Mailing Instructions

Bill Date: 07/09/2024

Use above space for address change ONLY.

District: CR05



9 월 2151511 **CR05** CITRUS WATER WORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

Ֆրովս[{րիկրից|լեցիկանիշթութնոր[||Աներալ||Աների[Ուոլ|||Արինթինը

Electronic Funds Transfer on or after 07/26/202 **TOTAL CHARGES DUE** 54.7

DO NOT PAY



duke-energy.com

Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC 5335 W BLADE LN **PUMP**

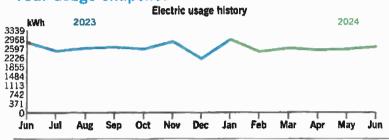
Bill date Jun 26, 2024 For service May 25 - Jun 24 31 days

Account number 9100 8512 6911



| Previous Amount Due | \$438.60 |
|--------------------------|----------|
| Payment Received Jun 19 | -438.60 |
| Current Electric Charges | 398.36 |
| Taxes | 38.98 |
| Total Amount Due Jul 17 | \$437.34 |

Your usage snapshot



Average temperature in degrees

| 78 | 91- | 95. | /6 | 12 | 041 | ΟU | 77 | | | 0.7 | 17 | | | |
|--------|------------------|-----|---------|---------|--------|------------------------|----|--------|---|--------------------|-------|--|--|--|
| | Current Month | | | | | un 2023 12-Month Usage | | | | e Avg Monthly Usaş | | | | |
| Electr | ric (kWh) | | 2,6 | 75 | 2, | 857 | , | 31,308 | 1 | | 2,609 | | | |
| Avg. | Avg. Daily (kWh) | | 86 | 3 | | 37 | | 86 | | | | | | |
| 12-m | 12-month usage t | | ased on | most re | cent h | istory | | | | | | | | |



Thank you for your payment.

On May 7, 2024, the Florida Public Service Commission approved Duke Energy's request for a mid-course correction of its 2024 fuel cost recovery factors. As a result, commercial and industrial bills are decreasing between 3.5% and 7.0% with the new rateeffective June 2024 (specific bill impact varies depending on several factors). To learn more about this adjustment visit duke-energy.com/ **FuelUpdateBiz**

To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Your payment is scheduled to be made by monthly automatic

Amount enclosed

draft on Jul 17

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Amount of automatic draft

\$437.34

by Jul 17

Add here, to help others with a

contribution to Share the Light

Please return this portion with your payment. Thank you for your business.



Account number 9100 8512 6911

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

025015 000003675



CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434



ॏॿॹऻॎढ़ऻॕऻॗॎॏॻॿॻऻऻॿय़ॳऻॗड़ज़ऻॗऀढ़ॻॗय़ऻॷऻढ़ॗॗढ़ॗढ़ऻॿऻॗऻढ़ऻॖॗढ़ॗॗढ़ऻॗढ़ऻढ़ऻॗढ़ॗढ़ढ़ऄॗॏढ़ढ़ॵॗढ़ढ़

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094





| Current electric usage for meter number 4107759 | | | | | | | | | |
|---|---------------|------------------|--|--|--|--|--|--|--|
| Actual reading on Previous reading | | 48618 - 45943 | | | | | | | |
| Energy Used | | 2,675 kWh | | | | | | | |
| Billed kWh | 2,675.000 kWh | | | | | | | | |

Billing details - Electric

| Billing Period - May 25 24 to Jun 24 24 | |
|---|----------|
| Meter - 4107759 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 2,675.000 kWh @ 9.419c | 251.96 |
| Fuel Charge | |
| 2,675.000 kWh @ 4.670c | 124.92 |
| Asset Securitization Charge | |
| 2,675.000 kWh @ 0.204c | 5.46 |
| Total Current Charges | \$398.36 |

Billing details - Taxes

| Total Taxes | \$38.98 |
|---------------------------|---------|
| Gross Receipts Tax | 10.22 |
| Regulatory Assessment Fee | 0.35 |
| State And Other Taxes | \$28.41 |

Your current rate is General Service Non-Demand Sec (GS-1). For a complete listing of all Florida rates and riders, visit duke-energy.com/rates



duke-energy.com

Your Energy Bill

Page 1 of 3

h def duke bila.20240821211919.67.ab-68291-000000174

Service address CITRUS WATERWORKS INC. 5265 W BANDY LN *COMM*

Bill date Jun 24, 2024 For service May 23 - Jun 20 29 days

Account number 9100 8516 7134

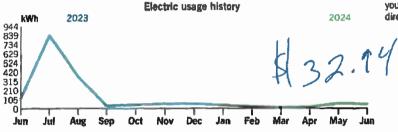
Billing summary

| Previous Amount Due | \$-39.84 |
|---------------------------|----------|
| Payment Received | 0.00 |
| Current Electric Charges | 30.00 |
| Taxes | 2.94 |
| Credit Amount, Do Not Pay | \$-6.90 |

On May 7, 2024, the Florida Public Service Commission approved Duke Energy's request for a mid-course correction of its 2024 fuel cost recovery factors. As a result, commercial and industrial bills are decreasing between 3.5% and 7.0% with the new rate effective June 2024 (specific bill impact varies depending on several factors). To learn more about this adjustment visit duke-energy.com/ **FuelUpdateBiz**

To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Your usage snapshot



Average temperature in degrees

| 78 | 81° | 824 | 78 | 715 | 640 | 60 | 576 | 57 | 66 | 4/7" | 72 | 807 |
|--------|-----------|-----|----------|---------|--------|--------|------|--------|------|--------|-------|-------|
| | | | Current | Month | Jun | 2023 | 12-M | onth U | sage | Avg Mo | nthly | Usage |
| Electr | ic (kWh) | | 48 | 3 | 1 | 19 | | 1,582 | | | 132 | |
| Avg. 1 | Dally (kW | h) | 2 | | | 4 | | 4 | | | | |
| 12-m | onth usar | e i | pased on | most re | cent h | istorv | | | | | | |

Date.

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201 1090

Account number 9100 8516 7134 \$0.00

greater.

No payment is required at this time.

Add here, to help others with a contribution to Share the Light

Amount enclosed

034146 000000174 րել ինթունակին արկանի ին հերանի ին հետոնականի հետունակուն

CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434



Duke Energy Payment Processing PO Box 1094

Charlotte, NC 28201-1094



| Current electric | isage for meter number 10307 | 40 |
|--|------------------------------|------------------|
| Actual reading on Previous reading of | | 46229 - 46181 |
| Energy Used | | 48 kWh |
| Billed kWh | 48.0 00 kWh | |

Billing details - Electric

| Billing Period - May 23 24 to Jun 20 24 | |
|---|---------|
| Meter - 1030740 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 48.000 kWh @ 9.419c | 4.52 |
| Fuel Charge | |
| 48.000 kWh @ 4.670c | 2.24 |
| Asset Securitization Charge | |
| 48.000 kWh @ 0.204c | 0.10 |
| Minimum Bill Adjustment | 7.12 |
| Total Current Charges | \$30.00 |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

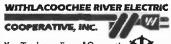
Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

Billing details - Taxes

| Total Taxes | \$2.94 |
|---------------------------|--------|
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.03 |
| State And Other Taxes | \$2.14 |





Your Touchstone Energy Cooperative P.O. Box 278 • Dade City, Florida 33526-0278 Account Number 2151511 Meter Number

93047332 Customer Number 20089703

Customer Name CITRUS WATER WORKS INC

Bill Date **Amount Due Current Charges Due** 06/10/202 58.4 07/01/202

District Office Serving You Crystal River

Service Address

11927 N ELLSWORTH TER Service Classification General Service Non-Demand

| Comparative Usage Information | | | |
|-------------------------------|----------|----------|-----------|
| Com | parative | Usage In | formation |
| | | Ave | rage kWh |
| Pe | priod | Davs | Per Day |
| Jun | 2024 | 33 | 5 |
| May | 2024 | 30 | 6 |
| Jun | 2023 | 33 | a |

BILLS ARE DUE WHEN RENDERED A 1.5 percent, but not less than \$5, late charge will apply to unpaid balances as of 5:00 p.m. on the due date shown on this bill.



You have 24-hour access to manage your account on-line through Smarthub at www.wrec.net. If you would like to make a payment using your credit card, please call 844-209-7166. This number is WREC's Secure Pay-By-Phone system.

See Reverse Side For More Information

Cycle 05

| From To | 59.50 59.50CR 0.00 39.16 8.03 8.03 9.00 8.03 1.37 3.80 | | | |
|---|--|--------------|----------------------|-------|
| Date Reading Date Read | | Dem. Reading | KW Demand | |
| Previous Balance Payment | - The second | | 59 50CP | 59.50 |
| Balance Forward | | • | JJ. JUCK | 0.00 |
| Customer Charge Energy Charge 160 KWH @ Fuel Adjustment 160 KWH FL Gross Receipts Tax State Tax | | 3 | 8.03 6.08 1.37 | |
| Total Current Charges Total Due | E.F.T. | | | |

DO NOT PAY

Total amount will be electronically transferred on or after 06/21/2024.

WITHLACOOCHEE RIVER ELECTRIC COOPERATIVE, INC. Your Touchstone Energy Cooperative P.O. Box 278 - Dade City, Florida 33526-0278

Please Detach and Return This Portion With Your Payment To Ensure Accurate Posting.

See Reverse Side For Mailing Instructions

Bill Date: 06/10/2024

Use above space for address change ONLY.

District: CR05



CR05 CITRUS WATER WORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

Ույլ[ուլլոնՈւլ]ից[ոլլ]իլ[իլ]իլ[իլ]ինել[]ովյինՈրբինյի[ինհր

Electronic Funds Transfer on or after 06/21/2024 **TOTAL CHARGES DUE** 58.44

DO NOT PAY

duke-energy.com

Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC 5265 W BANDY LN *COMM*

Bill date May 24, 2024 For service Apr 23 - May 22 30 days

Account number 9100 8516 7134

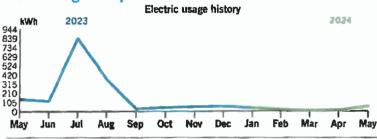
Billing summary

| Credit Amount, Do Not Pay | \$-39.84 |
|---------------------------|----------|
| Taxes | 2.94 |
| Current Electric Charges | 30.00 |
| Payment Received | 0.00 |
| Previous Amount Due | \$-72.78 |

Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 8.7%, Purchased Power 6.8%, Gas 79.4%, Oil 0.1%, Nuclear 0%, Solar 5% (For prior 12 months ending March 31, 2024).

Biz Energy Review: You need energy-saving solutions that fit your business, not someone eise's. Let a Business Energy Advisor connect you with equipment upgrades and rebates at duke-energy.com/ MySolution

Your usage snapshot



Average temperature in degrees

| 74' | 789 | 81 | 82 | 78 | 71° | 64 | 60" | - 1 | 57 | 5.6 | 64 | , |
|--------|-----------|------|----------|----------|--------|--------|------|---------|------|--------|----------|------|
| | | | Current | Month | May | 2023 | 12·M | ionth U | sage | Avg Mo | onthly U | sage |
| Electr | ic (kWh) | | 5 | 9 | 1 | 39 | | 1,653 | | | 138 | |
| Avg. (| Daily (kW | h) | 2 | <u>.</u> | | 4 | | 5 | | | | |
| 12-m | noth usad | ac i | nased on | most re | cent h | istory | | | | | | |

Date

Current 244

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Please return this portion with your payment. Thank you for your business.



Account number 9100 8516 7134

No payment is required at this \$0.00 time.

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light.

Charlotte, NC 28201-1094

PO Box 1094

Duke Energy Payment Processing

Amount due

Amount enclosed

032448 000001270 նկդևավուրնիկինիկինիկինիրորոնդություն

CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





| Current electric usage for meter number 1030740 | | | | | | | |
|---|------------|------------------|--|--|--|--|--|
| Actual reading on Ma Previous reading on | | 46181 - 46122 | | | | | |
| Energy Used | | 59 kWh | | | | | |
| Billed kWh | 59.000 kWh | | | | | | |

Billing details - Electric

| Billing Period - Apr 23 24 to May 22 24 | |
|---|---------|
| Meter - 1030740 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 59.000 kWh @ 9.419c | 5.56 |
| Fuel Charge | |
| 59,000 kWh @ 5.247c | 3.10 |
| Asset Securitization Charge | |
| 59.000 kWh @ 0.204c | 0.12 |
| Minimum Bill Adjustment | 5.20 |
| Total Current Charges | \$30.00 |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates

Billing details - Taxes

| Total Taxes | \$2.94 |
|---------------------------|--------|
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.03 |
| State And Other Taxes | \$2.14 |



duke-energy.com

Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC 5335 W BLADE LN **PUMP**

Bill date May 29, 2024 For service Apr 25 - May 24

30 days

b.def.duke.bits.20240526212440.53.afp-51257-000003710

Account number 9100 8512 6911

Billing summary

| Previous Amount Due | \$433.23 |
|--------------------------|----------|
| Payment Received May 17 | -433.23 |
| Current Electric Charges | 399.50 |
| Taxes | 39.10 |
| Total Amount Due Jun 19 | \$438.60 |

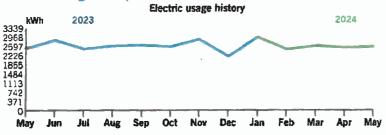
\$

Thank you for your payment.

Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 8.7%, Purchased Power 6.8%, Gas 79.4%, Oil 0.1%, Nuclear 0%, Solar 5% (For prior 12 months ending March 31, 2024).

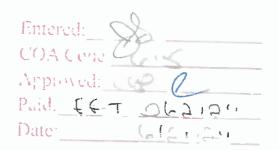
Biz Energy Review: You need energy-saving solutions that fit your business, not someone else's. Let a Business Energy Advisor connect you with equipment upgrades and rebates at duke-energy.com/ MySolution

Your usage snapshot



Average temperature in degrees

| 74 78 | 81 | 50 | 70 | 1 4 | 04 | OU | 91 | - 3 | | | - / |
|----------------|------|----------|---------|--------|--------|------|---------|-------|--------|-------|-------|
| | | Current | Month | May | 2023 | 12-M | lonth U | Isage | Avg Mo | nthly | Usage |
| Electric (kWh |) | 2,5 | 79 | 2, | 519 | | 31,490 | 1 | 2 | ,624 | |
| Avg. Daily (k) | ۷h) | 8 | 5 | 1 | 37 | | 86 | | | | |
| 12-month us | age! | based on | most re | cent h | istory | | | | | | |



Please return this portion with your payment. Thank you for your business.



Account number 9100 8512 6911

Duke Eneigy Return Mail PO Box 1090 Chartotte, NC 28201-1090

greater.

Add here, to help others with a

\$438,60

by Jun 19

Your payment is scheduled to be made by monthly automatic draft on Jun 19

contribution to Share the Light

Amount enclosed

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

025629 000003710 լուլայուրի արկարկան հիմինի հիմին արկարկարի ար CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD

NEW PORT RICHEY FL 34652-3434







| Current electric usage for meter number 4107759 | | | | | | | |
|---|---------------|------------------|--|--|--|--|--|
| Actual reading on Previous reading | | 45943 - 43364 | | | | | |
| Energy Used | | 2,579 kWh | | | | | |
| Billed kWh | 2,579.000 kWh | | | | | | |

Billing details - Electric

| Billing Period - Apr 25 24 to May 24 24 | |
|---|----------|
| Meter - 4107759 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 2,579.000 kWh @ 9.419c | 242.90 |
| Fuel Charge | |
| 2,579.000 kWh @ 5.247c | 135.32 |
| Asset Securitization Charge | |
| 2,579,000 kWh @ 0.204c | 5.26 |
| Total Current Charges | \$399.50 |

Billing details - Taxes

| Total Taxes | \$39.10 |
|---------------------------|---------|
| Gross Receipts Tax | 10.25 |
| Regulatory Assessment Fee | 0.35 |
| State And Other Taxes | \$28.50 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates





Your Touchstone Energy* Cooperative 2.0. Box 278 • Dade City, Florida 33526-0278

Account Number 2151511 Meter Number 93047332 Customer Number 20089703

Customer Name CITRUS WATER WORKS INC

FL Gross Receipts Tax

Total Current Charges

State Tax

Total Due

Cycle 05

See Reverse Side For More Information

Bill Date Amount Due Current Charges Due 05/08/2024 59.50 05/29/2024

59.50

59.50

<u>District Office Serving You</u> Crystal River

1.39

3.87

Service Address
Service Classification

11927 N ELLSWORTH TER General Service Non-Demand

| Comparative Usage Information | | | | | | | | |
|-------------------------------|-------------|------|---------|--|--|--|--|--|
| | Average kWh | | | | | | | |
| | eriod | Days | Per Day | | | | | |
| May | 2024 | 30 | 6 | | | | | |
| Apr | 2024 | 29 | 5 | | | | | |
| May | 2023 | 29 | 8 | | | | | |

BILLS ARE DUE WHEN RENDERED A 1.5 percent, but not less than \$5, late charge will apply to unpaid balances as of 5:00 p.m. on the due date shown on this bill.



You have 24-hour access to manage your account on-line through Smarthub at www.wrec.net. If you would like to make a payment using your credit card, please call 844-209-7166. This number is WREC's Secure Pay-By-Phone system.

| ſ | Fo | om | т. | ELEC | TRIC SERV | /ICE | | |
|---|----------------------|----------------------------------|----------------------|---------------|------------|--------------|-----------------------|-----------------|
| l | <u>Date</u> 04/03 | Reading | <u>Date</u> 05/03 | Reading 62817 | Multiplier | Dem. Reading | KW Demand | kWh Used 171 |
| | | s Balan | Ce | | | | io near | 58.05 |
| | Payment Balance | Forward | đ | | | | 58.05CR | 0.00 |
| 1 | Energy | r Charge Charge : ljustmen | 171 KW | | | 3 | 89.16 8.58 6.50 | |

E.F.T.

Approved: COA Code.

Paid: Constant Con

DO NOT PAY

Total amount will be electronically transferred on or after 05/24/2024

WITHLACOOCHEE RIVER ELECTRIC
COOPERATIVE, INC.

Your Touchstone Energy Cooperative 17.
P.O. Box 278 - Dade City, Florida 33826-0278

Please Detach and Return This Portion With Your Payment To Ensure Accurate Posting.

See Reverse Side For Mailing Instructions

Bill Date: 05/08/2024

Use above space for address change ONLY.

District: CR05



92 2151511 CR05
CITRUS WATER WORKS INC
4939 CROSS BAYOU BLVD
NEW PORT RICHEY FL 34652-3434

TOTAL CHARGES DUE 59.50
DO NOT PAY

duke-energy.com 877.372.8477

Your Energy Bill

Page 1 of 3

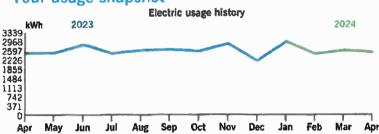
Service address CITRUS WATERWORKS INC 5335 W BLADE LN PUMP Bill date Apr 26, 2024 For service Mar 26 - Apr 24 30 days

Account number 9100 8512 6911

Billing summary

| Total Amount Due May 17 | \$433.23 |
|--------------------------|----------|
| Taxes | 38.62 |
| Current Electric Charges | 394.61 |
| Payment Received Apr 17 | -445.09 |
| Previous Amount Due | \$445.09 |

Your usage snapshot



Average temperature in degrees

0.15

| 13 14 14 | OI OL | 10 17 | 4. 00 | |
|------------------|------------------|--------------|----------------|-------------------|
| | Current Month | Apr 2023 | 12-Month Usage | Avg Monthly Usage |
| Electric (kWh) | 2,546 | 2,520 | 31,430 | 2,619 |
| Avg. Daily (kWh) | 85 | 87 | 86 | |
| 12-month usage | based on most re | cent history | | |

71

6a

609



Thank you for your payment.

Know what's below. Call before you dig. Always call 811 before you dig, it's the law. Making this free call at least Two full Business days before you dig gets utility lines marked and helps protect you from injury and expense. Call 811 or visit sunshine811.com.

Make a Clean Energy Impact by purchasing renewable energy certificates with Duke Energy and match your organization's electricity usage with zero-emissions energy. Visit duke-energy.com/ CEI to learn more.

To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Please return this portion with your payment. Thank you for your business.



Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090 Account number 9100 8512 6911

mber 6011

greater.

\$433.23by May 17

Your payment is scheduled to be made by monthly automatic draft on May 17

\$____Add here, to help others with a contribution to Share the Light

Amount enclosed

եվիրիչվանդներիկինիրգինացրիներիանունցունի

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

024723 000004158 գորկլիիկավիկիկակիկորդիիկիկիլոդերի CITRUS WATERWORKS INC



CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





| Current electric | usage for meter number 41077 | ' 59 |
|---------------------------------------|------------------------------|------------------|
| Actual reading on Previous reading | | 43364 - 40818 |
| Energy Used | | 2,546 kWh |
| Billed kWh | 2,546.000 kWh | |

Billing details - Electric

| Billing Period - Mar 26 24 to Apr 24 24 | |
|---|----------|
| Meter - 4107759 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 2,546.000 kWh @ 9.419c | 239.81 |
| Fuel Charge | |
| 2,546.000 kWh @ 5,247c | 133.59 |
| Asset Securitization Charge | |
| 2,546.000 kWh @ 0.204c | 5.19 |
| Total Current Charges | \$394.61 |

Billing details - Taxes

| Total Taxes | \$38.62 |
|---------------------------|---------|
| Gross Receipts Tax | 10.13 |
| Regulatory Assessment Fee | 0.34 |
| State And Other Taxes | \$28.15 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates



duke-energy.com

Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC 5265 W BANDY LN *COMM*

Bill date Apr 24, 2024 For service Mar 22 - Apr 22

32 days

Account number 9100 8516 7134 Billing summary

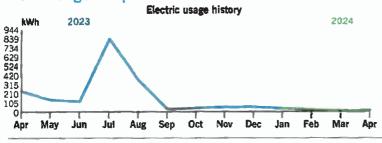
| Credit Amount, Do Not Pay | \$-72.78 |
|---------------------------|-----------|
| Taxes | 2.95 |
| Current Electric Charges | 30.00 |
| Payment Received | 0.00 |
| Previous Amount Due | \$-105.73 |

Know what's below. Call before you dig. Always call 811 before you dig, it's the law. Making this free call at least Two full Business days before you dig gets utility lines marked and helps protect you from injury and expense. Call 811 or visit sunshine811.com.

Make a Clean Energy Impact by purchasing renewable energy certificates with Duke Energy and match your organization's electricity usage with zero-emissions energy. Visit duke-energy.com/ CEI to learn more.

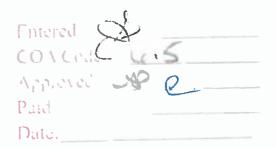
To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Your usage snapshot



Average temperature in degrees

| 71 74* | 78 | 81 | 82 | 78" | 71 | 10-4 | 60 | _ 3 | 97 | 987 | - 10 |
|----------------|-------|----------|---------|--------|--------|------|---------|-------|--------|---------|-------|
| | | Current | Month | Apr | 2023 | 12-N | tonth L | Isage | Avg Mo | nthly (| Jsage |
| Electric (kWh |) | 10 | 5 | 2 | 38 | | 1,733 | | | 144 | |
| Avg. Daily (kV | Vh) | 1 | | | 8 | | 5 | | | | |
| 12-month usa | age l | based on | most re | cent h | istory | | | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



9100 8516 7134

Account number

\$0.00

greater.

No payment is required at this time.

Duke Energy Return Mail PO Bux 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

Amount enclosed

034135 000000174

CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434



Duke Energy Payment Processing PO Box 1094

Charlotte, NC 28201-1094





| Current electric usage for meter number 1030740 | | | | | | |
|---|------------|------------------|--|--|--|--|
| Actual reading on A Previous reading or | | 46122 - 46106 | | | | |
| Energy Used | | 16 kWh | | | | |
| Billed kWh | 16.000 kWh | | | | | |

Billing details - Electric

| Billing Period - Mar 22 24 to Apr 22 24 | |
|---|---------|
| Meter - 1030740 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 16.000 kWh @ 9.419c | 1.51 |
| Fuel Charge | |
| 16.000 kWh @ 5.247c | 0.84 |
| Asset Securitization Charge | |
| 16.000 kWh @ 0.204c | 0.03 |
| Minimum Bill Adjustment | 11.60 |
| Total Current Charges | \$30.00 |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke-energy.com/minimum.

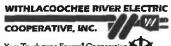
Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates

Billing details - Taxes

| Total Taxes | \$2.95 | | | | |
|---------------------------|--------|--|--|--|--|
| Gross Receipts Tax | 0.77 | | | | |
| Regulatory Assessment Fee | 0.03 | | | | |
| State And Other Taxes | \$2.15 | | | | |





Your Touchstone Energy Cooperative P.O. Box 278 - Dade City, Florida 33526-0278

Account Number 2151511 Meter Number 93047332

Customer Number 20089703

Customer Name CITRUS WATER WORKS INC

Cycle 05

Bill Date Amount Due Current Charges Due 04/08/2024 58.05 04/30/2024

District Office Serving You Crystal River

Service Address
Service Classification

11927 N ELLSWORTH TER General Service Non-Demand

| Comparative Usage Information | | | | | | | | | | |
|-------------------------------|-------------|---------|--|--|--|--|--|--|--|--|
| Average kWh | | | | | | | | | | |
| Period | <u>Davs</u> | Per Day | | | | | | | | |
| Apr 2024 | 29 | 5 | | | | | | | | |
| Mar 2024 | 29 | 5 | | | | | | | | |
| Apr 2023 | 32 | 8 | | | | | | | | |

BILLS ARE DUE WHEN RENDERED A 1.5 percent, but not less than \$5, late charge will apply to unpaid balances as of 5:00 p.m. on the due date shown on this bill.



You have 24-hour access to manage your account on-line through Smarthub at www.wrec.net. If you would like to make a payment using your credit card, please call 844-209-7166. This number is WREC's Secure Pay-By-Phone system.

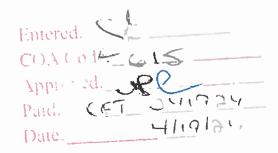
*** ATTENTION ***

The 2023 Capital Credits assigned amount for this account is \$86.61. These credits are not refundable at this time nor can they be applied toward the balance owed.

Capital Credits will be refunded as approved by the Cooperative's Board of Trustees and in compliance of our mortgage agreement with the United States Government.

See Reverse Side For More Information

| ELECTRIC SERVICE | |
|---|------------------|
| | |
| From To <u>Date Reading Date Reading Multiplier Dem. Reading KW D</u> | emand kWh Used |
| 03/05 62490 04/03 62646 | 1 156 |
| Previous Balance Payment 55.9 | 55.91 |
| Balance Forward | 0.00 |
| Customer Charge 39.1 | 6 |
| Energy Charge 156 KWH @ 0.05017 7.83 | _ |
| Fuel Adjustment 156 KWH @ 0.03800 5.9 | - |
| FL Gross Receipts Tax 1.30 State Tax 3.7 | - |
| Total Current Charges Total Due E.F.T. | 58.05 58.05 |



DO NOT PAY

Total amount will be electronically transferred on or after 04/19/2024

WITHLACOOCHEE RIVER ELECTRIC
COOPERATIVE, INC.
Your Touchstone Energy Cooperative (Cooperative (

Please Detach and Return This Portion With Your Payment To Ensure Accurate Posting. See Reverse Side For Mailing Instructions

Use above space for address change ONLY.

District: CR05



2151511 CR05
CITRUS WATER WORKS INC
4939 CROSS BAYOU BLVD
NEW PORT RICHEY FL 34652-3434

նարիկիկիկիկիկիրությմինիրիկիրունայիաների

Electronic Funds Transfer on or after 04/19/202 TOTAL CHARGES DUE 58.0

Bill Date: 04/08/2024

DO NOT PAY

Service address

CITRUS WATERWORKS INC. 5335 W BLADE LN

Your Energy Bill

Bill date Mar 27, 2024 For service Feb 24 - Mar 25 31 days

PUMP

Account number 9100 8512 6911

Billing summary

| Previous Amount Due | \$422.24 |
|--------------------------|----------|
| Payment Received Mar 19 | -422.24 |
| Current Electric Charges | 405.47 |
| Taxes | 39.62 |
| Total Amount Due Apr 17 | \$445.09 |

\$

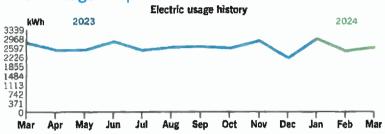
Thank you for your payment.

Important power line safety reminder. Stay away from power lines. Do not work near overhead lines. Always assume that downed lines are energized and dangerous. Report downed power lines to Duke Energy immediately by calling 800-228-8485.

National Renewable Energy Day is March 21, so there's no better time to sign up for Clean Energy Connection and support solar energy without rooftop panels. Learn more at duke-energy.com/ Celebrate.

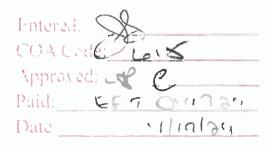
Learn how to lower your bill with an online or free on-site Business Energy Check. This no-cost analysis provides you with specific tips on how to save energy and qualify for valuable rebates for energysavings measures. You may also qualify for a FREE Commercial Energy Savings Kit, Go to duke-energy.com/FreeBizCheck or email prescriptiveincentives@duke-energy.com.

Your usage snapshot



Average temperature in degrees

| 66' | 71* | 740 | 78 | 81 | 82' | 78 | /1• | 64 | P0. | , | 37 | 87 |
|----------|----------|------|---------|---------|--------|--------|------|---------|------|-------|----------|-------|
| | | | Current | Month | Mar | 2023 | 12-M | lonth U | sage | Avg M | onthly L | Isage |
| Electric | (kWh) | | 2,6 | 19 | 2, | 807 | ; | 31,404 | | | 2,617 | |
| Avg. Da | aily (kW | h) | 84 | ļ | 8 | 38 | | 86 | | | | |
| 12-moi | nth usas | ze b | ased ол | most re | cent h | istory | | | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Please return this portion with your payment. Thank you for your business.



Account number 9100 8512 6911

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

\$445.09 by Apr 17

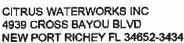
Your payment is scheduled to be made by monthly automatic draft on Apr 17

Add here, to help others with a contribution to Share the Light

Amount enclosed

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

024930 000004319









| Current electric | usage for meter number 4107 | 759 |
|--|-----------------------------|------------------|
| Actual reading on Previous reading of | Mar 25 | 40818 - 38199 |
| Energy Used | | 2,619 kWh |
| Billed kWh | 2,619.000 kWh | |

Billing details - Electric

| Billing Period - Feb 24 24 to Mar 25 24 | | | | | | |
|---|----------|--|--|--|--|--|
| Meter - 4107759 | | | | | | |
| Customer Charge | \$16.02 | | | | | |
| Energy Charge | | | | | | |
| 2,619.000 kWh @ 9.419c | 246.69 | | | | | |
| Fuel Charge | | | | | | |
| 2,619.000 kWh @ 5.247c | 137.42 | | | | | |
| Asset Securitization Charge | | | | | | |
| 2,619.000 kWh @ 0.204c | 5.34 | | | | | |
| Total Current Charges | \$405.47 | | | | | |

Billing details - Taxes

| Total Taxes | \$39.6 | 2 |
|---------------------------|---------|---|
| Gross Receipts Tax | 10.40 | |
| Regulatory Assessment Fee | 0.30 | |
| State And Other Taxes | \$28.92 | |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates



duke-energy.com

Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC 5265 W BANDY LN

COMM

2.93

Bill date Mar 25, 2024 For service Feb 22 - Mar 21

29 days

Account number 9100 8516 7134

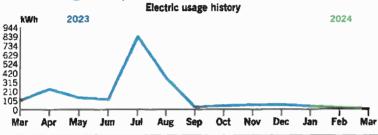
Billing summary \$-138.66 Previous Amount Due Payment Received 0.00 30.00 **Current Electric Charges**

Credit Amount, Do Not Pay \$-105.73 Important power line safety reminder. Stay away from power lines. Do not work near overhead lines. Always assume that downed lines are energized and dangerous. Report downed power lines to Duke Energy immediately by calling 800-228-8485.

National Renewable Energy Day is March 21, so there's no better time to sign up for Clean Energy Connection and support solar energy without rooftop panels. Learn more at duke-energy.com/ Celebrate.

Learn how to lower your bill with an online or free on-site Business Energy Check. This no-cost analysis provides you with specific tips on how to save energy and qualify for valuable rebates for energysavings measures. You may also qualify for a FREE Commercial Energy Savings Kit, Go to duke-energy.com/FreeBizCheck or email prescriptiveincentives@duke-energy.com.

Your usage snapshot



Average temperature in degrees

| 60r | 71* | 74 | 78 | 81 | 82 | 78 | 71 | 64 | 60 | 4.7 | 4" | 9.7 |
|--------|-----------|------|---------|---------|--------|--------|------|---------|------|-------|----------|-------|
| | | | Current | Month | Mar | 2023 | 12-N | fonth C | sage | Avg M | onthly l | Jsage |
| Electr | ic (kWh) | | 9 | | 1 | 08 | | 1,955 | | | 163 | |
| Avg. [| Daily (kW | h) | C | i | | 4 | | 5 | | | | |
| 12-m | onth usa | oe h | ased on | most re | cent h | istory | | | | | | |

(0) (ade 0 618

Please return this portion with your payment. Thank you for your business.



Account number

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090 9100 8516 7134

greater.

Add here, to help others with a

Amount enclosed

No payment is required at this

contribution to Share the Light

\$0.00

աննակիրությիլը ոն կումին իրագրին անդականում է արևականի անձականին անձական հայարական հայարական հայարական հայարակ

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

034397 000000172 CITRUS WATERWORKS INC



4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





| Current electric usage for meter number 1030740 | | | | | | |
|---|-----------|------------------|--|--|--|--|
| Actual reading on Mar Previous reading on Fe | | 46106 - 46097 | | | | |
| Energy Used | | 9 kWh | | | | |
| Billed kWh | 9.000 kWh | | | | | |

Billing details - Electric

| Billing Period - Feb 22 24 to Mar 21 24 | | |
|---|---------|---|
| Meter - 1030740 | | |
| Customer Charge | \$16.02 | |
| Energy Charge | | |
| 9.000 kWh @ 9.419c | 0.84 | |
| Fuel Charge | | |
| 9.000 kWh @ 5.247c | 0.47 | |
| Asset Securitization Charge | | |
| 9.000 kWh @ 0.204c | 0.02 | |
| Minimum Bill Adjustment | 12.65 | _ |
| Total Current Charges | \$30.0 | ю |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Detaits section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

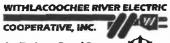
Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

Billing details - Taxes

| Total Taxes | \$2.93 |
|---------------------------|--------|
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.02 |
| State And Other Taxes | \$2.14 |





Your Touchstone Energy Cooperative P.O. Box 278 • Dade City, Florida 33526-0278 Account Number 2151511 Meter Number

93047332 Customer Number 20089703

Customer Name CITRUS WATER WORKS INC

Biil Date **Amount Due** Current Charges Due 03/08/2024 55.91

04/01/2024 District Office Serving You

Crystal River

See Reverse Side For More Information

Cycle 05

Service Address Service Classification

11927 N ELLSWORTH TER General Service Non-Demand

| Com | Comparative Usage Information | | | | |
|-----|-------------------------------|------|--|--|--|
|] | | Ave | rage kWh | | |
| | rlod | Days | Per Day | | |
| Mar | 2024 | 29 | 5 | | |
| Feb | 2024 | 32 | 5 | | |
| Mar | 2023 | 29 | 6 | | |
| | | | The second secon | | |

BILLS ARE DUE WHEN RENDERED A 1.5 percent, but not less than \$5, late charge will apply to unpaid balances as of 5:00 p.m. on the due date shown on this bill.



You have 24-hour access to manage your account on-line through Smarthub at www.wrec.net. If you would like to make a payment using your credit card, please call 844-209-7166. This number is WREC's Secure Pay-By-Phone system.

*** ATTENTION *** Plan to attend WREC's 77th Annual Meeting on Wednesday, April 17, 2024. Registration: 4:30 p.m. to 6:15 p.m. The Bar Code above will be used for registration. Present the top portion of your bill along with photo ID to register. See the enclosed Newsletter for additional information.

| ose Maydias Side I of more unormation | | | | |
|---|--------|---|-----------------|--|
| ELECTRIC SERVICE | | | | |
| Date Reading Oate Read 02/05 62359 03/05 624 | | Dem. Reading KW Demand | kWh Used 131 | |
| Previous Balance Payment | | 57.89CR | 57.89 | |
| Balance Forward | | - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | 0.00 | |
| Customer Charge Energy Charge 131 KWH @ Fuel Adjustment 131 KWH FL Gross Receipts Tax State Tax | | 39.16 6.57 5.24 1.31 3.63 | | |
| Total Current Charges Total Due | E.F.T. | | 55.91 55.91 | |

DO NOT PAY Total amount will be electronically transferred on or after 03/22/2024.

WITHLACOOCHEE RIVER ELECTRIC COOPERATIVE, INC. Your Touchstone Energy Cooperative P.O. Box 278 • Dade City, Florida 33526-0278

Please Detach and Return This Portion With Your Payment To Ensure Accurate Posting.

See Reverse Side For Mailing Instructions

Bill Date: 03/08/2024

Use above space for address change ONLY.

District: CR05



CR05 ଦର୍ଥ 2151511 CITRUS WATER WORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

<u>, իրկին Աիրիին անկիրն նաև անձանիրի արևոր հիրին բնուսիրն է</u>

Electronic Funds Transfer on or after 03/22/202 **TOTAL CHARGES DUE** 55.9

DO NOT PAY

duke-energy.com 877.372.8477

Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC 5335 W BLADE LN **PUMP**

Bill date Feb 27, 2024 For service Jan 26 - Feb 23

29 days

fb.def.duke.bills.20240228203830.58.afp-50457-000004415

Account number 9100 8512 6911

Billing summary

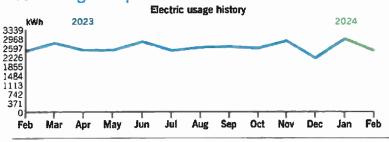
| Total Amount Due Mar 19 | \$422.24 |
|--------------------------|----------|
| Taxes | 37.59 |
| Current Electric Charges | 384.65 |
| Payment Received Feb 20 | -502.26 |
| Previous Amount Due | \$502.26 |



Thank you for your payment.

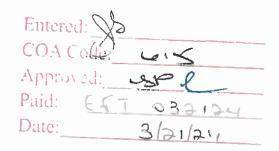
Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 8.5%, Purchased Power 7.8%, Gas 78.8%, Oil 0.1%, Nuclear 0%, Solar 4.8% (For prior 12 months ending December 31, 2023).

Your usage snapshot



Average temperature in degrees

| 63 66 | 71 | /4 | 78 | 814 | BZ | 78 | 7.1 | 54" | DU | - 2 | 20 |
|----------------|-------|----------|---------|--------|--------|------|---------|-------|--------|---------|-------|
| | | Current | Month | Feb | 2023 | 12-N | lonth U | Isage | Avg Mc | nthly (| Jsage |
| Electric (kWh |) | 2,4 | 78 | 2, | 484 | - | 31,592 | ! | 2 | 2,633 | |
| Avg. Daily (kV | Vh) | 85 | 5 | 8 | 36 | | 87 | | | | |
| 12-month usa | age I | based on | most re | cent h | istory | | | | | | |



Please return this portion with your payment. Thank you for your business.



Account number 9100 8512 6911

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

\$422.24 by Mar 19

Your payment is scheduled to be made by monthly automatic draft on Mar 19

Add here, to help others with a contribution to Share the Light

Amount enclosed

լլոնվունվարդնումյուննեննենին կրուկոկութներ մակկլիկլի

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

025229 000004415 <u>. Մին ինդինին անանակին հերանինինինին ու բանանակինինին</u>









| Current electric | usage for meter number 41077 | 759 |
|--|------------------------------|------------------|
| Actual reading on Previous reading of | | 38199 - 35721 |
| Energy Used | _ | 2,478 kWh |
| Billed kWh | 2,478.000 kWh | |

Billing details - Electric

| Billing Period - Jan 26 24 to Feb 23 24 Meter - 4107759 | |
|--|----------|
| Customer Charge | \$16.02 |
| Energy Charge | |
| 2,478.000 kWh @ 9.419c | 233.41 |
| Fuel Charge | |
| 2,478.000 kWh @ 5.247c | 130.02 |
| Asset Securitization Charge | |
| 2,478.000 kWh @ 0.210c | 5.20 |
| Total Current Charges | \$384.65 |

Billing details • Taxes

| Total Taxes | \$37.59 |
|---------------------------|---------|
| Gross Receipts Tax | 9.87 |
| Regulatory Assessment Fee | 0.28 |
| State And Other Taxes | \$27.44 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates



Billing summary

duke-energy.com 877.372.8477

Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC. 5265 W BANDY LN

COMM

Bill date Feb 23, 2024 For service Jan 24 - Feb 21 29 days

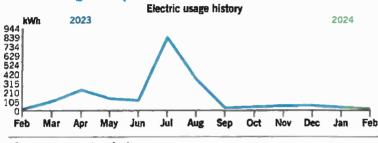
Account number 9100 8516 7134

| Previous Amount Due | \$-171.60 |
|---------------------------|-----------|
| Payment Received | 0.00 |
| Current Electric Charges | 30.00 |
| Taxes | 2.94 |
| Credit Amount, Do Not Pay | \$-138.66 |

generate your power: Coal 8.5%, Purchased Power 7.8%, Gas 78.8%, Oil 0.1%, Nuclear 0%, Solar 4.8% (For prior 12 months ending December 31, 2023).

Duke Energy Florida utilized fuel in the following proportions to

Your usage snapshot



Average temperature in degrees 66 714 744 78 811 78

| | Current Month | Feb 2023 | 12-Month Usage | Avg Monthly Usage |
|------------------|-------------------|--------------|----------------|-------------------|
| Electric (kWh) | 18 | 18 | 2,054 | 171 |
| Avg. Daily (kWh) | 1 | 1 | 6 | |
| 12-month usage | based on most red | cent history | | |

Date

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



9100 8516 7134

Account number

\$0.00

greater.

No payment is required at this time.

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

Amount enclosed

034346 000000168 րկեւմիկին արև վերականին անկանին արա

CITRUS WATERWORKS INC 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434



Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094





| Current electric usag | ge for meter number 10307 | 40 |
|---|---------------------------|---------------------------------|
| Actual reading on Feb Previous reading on Ja | | 46097 - 460 79 |
| Energy Used | | 18 kWh |
| Billed kWh | 18.000 kWh | |

Billing details - Electric

| Billing Period - Jan 24 24 to Feb 21 24 | | |
|---|---------|-----|
| Meter - 1030740 | | |
| Customer Charge | \$16.02 | |
| Energy Charge | | |
| 18.000 kWh @ 9.419c | 1.70 | |
| Fuel Charge | | |
| 18,000 kWh @ 5.247c | 0.94 | |
| Asset Securitization Charge | | |
| 18.000 kWh @ 0.210c | 0.04 | |
| Minimum Bill Adjustment | 11.30 | |
| Total Current Charges | \$30. | .00 |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates

Billing details - Taxes

| Total Taxes | \$2.94 |
|---------------------------|--------|
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.02 |
| State And Other Taxes | \$2.15 |





Your Touchstone Energy Cooperative P.O. Box 276 • Dade City, Florida 33526-0278

Account Number 2151511

Meter Number 93047332 Customer Number 20089703

Customer Name CITRUS WATER WORKS INC

Total Due

E

Bill Date
Amount Due
Current Charges Due

02/08/202-57.8: 02/29/202-

57.89

<u>District Office Serving You</u> Crystal River

Service Address
Service Classification

Feb 2023

11927 N ELLSWORTH TER General Service Non-Demand

Comparative Usage Information
Average kWh
Period Days Per Day
Feb 2024 32 5
Jan 2024 31 4

BILLS ARE DUE WHEN RENDERED A 1.5 percent, but not less than \$5, late charge will apply to unpaid balances as of 5:00 p.m. on the due date shown on this bill.



You have 24-hour access to manage your account on-line through Smarthub at www.wrec.net. If you would like to make a payment using your credit card, please call 844-209-7166. This number is WREC's Secure Pay-By-Phone system.

See Reverse Side For More Information

Cycle 05

| Fo | om | 7 | /ICE | | | | |
|----------------------|---------------|----------------------|------------------|------------|--------------|-----------|-----------------|
| <u>Date</u> 01/04 | Reading 62208 | <u>Date</u> 02/05 | Reading 62359 | Multiplier | Dem. Reading | KW Demand | kWh Used 151 |
| Previou | ıs Balan | ce | | | | 55.71CR | 55.71 |
| | Forwar | d. | | | | | 0.00 |
| Cuetomo | r Charg | • | | | | 39.16 | |
| | Charge : | | н @ 0.0 | 5017 | • | 7.58 | |
| | ljustmen | | | .04000 | | 6.04 | |
| | s Recei | pts Ta | x | | | 1.35 | |
| State I | ax: | | | | | 3.76 | |
| Total C | urrent (| Charge | s | | | | 57.89 |

E.F.T.

Fintered:

COA Code:

Approved:

Paid:

Date:

2 | Code 2

DO NOT PAY

Total amount will be electronically transferred on or after 02/23/2024

WITHLACOOCHEE RIVER ELECTRIC
COOPERATIVE, INC.

Your Touchstone Energy Cooperative
P.O. Box 278 - Dade City, Florida 33526-0278

Please Detach and Return This Portion With Your Payment To Ensure Accurate Posting.

See Reverse Side For Mailing Instructions

Bill Date: 02/08/2024

Use above space for address change ONLY.

District: CR05



© 2151511 CR05
CITRUS WATER WORKS INC
4939 CROSS BAYOU BLVD
NEW PORT RICHEY FL 34652-3434

իսիսիկննկիցներիցիցիցիցիցությիրիցիսնով

Electronic Funds Transfer on or after 02/23/202-TOTAL CHARGES DUE 57.89

DO NOT PAY



Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC 5265 W BANDY LN *COMM*

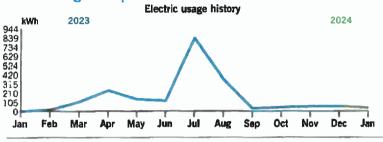
Bill date Jan 25, 2024 For service Dec 21 - Jan 23 34 days

Account number 9100 8516 7134

Billing summary

| Credit Amount, Do Not Pay | \$-171.60 |
|---------------------------|-----------|
| Taxes | 2.93 |
| Current Electric Charges | 30.00 |
| Payment Received | 0.00 |
| Previous Amount Due | \$-204.53 |

Your usage snapshot



Average temperature in degrees

| 76 | b3- | 66" | 71 | /4 | 78" | - 81 | 82 | _ /8 | 17. | 54 | DD. | 34 |
|--------|-----------|-------|--------|---------|-------|--------|------|---------|-------|-------|----------|-------|
| | | C | urrent | Month | Jan | 2023 | 12-M | lonth L | Isage | Avg M | onthly (| isage |
| Electr | ic (kWh) | | 39 | } | | 0 | | 2,054 | | | 171 | |
| Avg. [| Daily (kW | h) | 1 | | | 0 | | 5 | | | | |
| 12-m | onth usa: | ze ba | sed on | most re | ent h | istory | | | | | | |

Date:

Please return this portion with your payment. Thank you for your business.



Account number

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090 9100 8516 7134

greater.

Amount due

\$0.00

Add here, to help others with a Amount enclosed contribution to Share the Light

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

No payment is required at this

ւլյլեւ մենկերը անկիրայիկնենի ինչունիների որ և հերակային

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

033562 000001130 իլինիդունինակումիլներա<u>ինիննակունինինու</u> CITRUS WATERWORKS INC

4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434







| Current electric usag | e for meter number 10307 | 40 |
|---|--------------------------|------------------|
| Actual reading on Jan Previous reading on De | | 46079 - 46040 |
| Energy Used | | 39 kWh |
| Billed kWh | 39.000 kWh | |

Billing details - Electric

| Billing Period - Dec 21 23 to Jan 23 24 | | | | | | |
|---|---------|--|--|--|--|--|
| Meter - 1030740 | | | | | | |
| Customer Charge | \$16.02 | | | | | |
| Energy Charge | | | | | | |
| 39.000 kWh @ 9.419c | 3.67 | | | | | |
| Fuel Charge | | | | | | |
| 39.000 kWh @ 5.247c | 2.05 | | | | | |
| Asset Securitization Charge | | | | | | |
| 39.000 kWh @ 0.210c | 80.0 | | | | | |
| Minimum Bill Adjustment | 8.18 | | | | | |
| Total Current Charges | \$30.00 | | | | | |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke-energy.com/minimum.

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates

Billing details - Taxes

| Total Taxes | \$2.93 |
|---------------------------|--------|
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.02 |
| State And Other Taxes | \$2.14 |



duke-energy.com 877.372.8477

Your Energy Bill

Page 1 of 3

Service address CITRUS WATERWORKS INC 5335 W BLADE LN **PUMP**

Bill date Jan 29, 2024 For service Dec 23 - Jan 25 34 days

Account number 9100 8512 6911

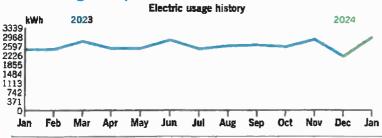
Billing summary

| Previous Amount Due Payment Received Jan 18 | \$401.71 -401.71 |
|---|---------------------|
| Current Electric Charges | 457.54 |
| Taxes | 44.72 |
| Total Amount Due Feb 20 | \$502.26 |



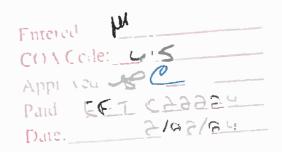
Thank you for your payment.

Your usage snapshot



Average temperature in degrees

| 587 | 6.7 | 66' | 71 | 74 | 78- | 81 | 82 | 78 | 71. | 64 | 60' |
|--------|-----------|-------|--------|---------|--------|--------|------|---------|------|--------|--------------|
| | | (| urrent | Month | Jan | 2023 | 12-N | ionth L | sage | Avg Mo | onthly Usage |
| Electr | ric (kWh) | | 2,9 | 68 | 2, | 472 | | 31,598 | | : | 2,633 |
| Avg. I | Daily (kW | h) | 8 | 7 | 8 | 35 | | 87 | | | |
| 12-m | onth usa | ge ba | sed on | most re | cent h | istory | | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Please return this portion with your payment. Thank you for your business.



9100 8512 6911

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090 Account number

Add here, to help others with a

\$502.26

by Feb 20

Your payment is scheduled to be made by monthly automatic draft on Feb 20

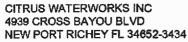
contribution to Share the Light

Amount enclosed

ւմ վերակարեր այդ արարարարության արդականության կուրական կուրական հայարարարար

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

025663 000004578 իվինանիլինիանիլիանակներիանաներինինիանի









| Current electric usage for meter number 4107759 | | | | | | |
|---|---------------|------------------|--|--|--|--|
| Actual reading on Previous reading of | | 35721 - 32753 | | | | |
| Energy Used | | 2,968 kWh | | | | |
| Billed kWh | 2,968.000 kWh | | | | | |

Billing details - Electric

| Billing Perlod - Dec 23 23 to Jan 25 24 | |
|---|----------|
| Meter - 4107759 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 2,968.000 kWh @ 9.419c | 279.56 |
| Fuel Charge | |
| 2,968.000 kWh @ 5.247c | 155.73 |
| Asset Securitization Charge | |
| 2,968.000 kWh @ 0.210c | 6.23 |
| Total Current Charges | \$457.54 |

Billing details - Taxes

| Total Taxes | \$44.72 |
|---------------------------|---------|
| Gross Receipts Tax | 11.74 |
| Regulatory Assessment Fee | 0.34 |
| State And Other Taxes | \$32.64 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates



WITHLACOOCHEE RIVER ELECTRIC
COOPERATIVE, INC.

Your Touchstone Energy Cooperative P.O. Box 278 - Dade City, Florida 33526-0278

Account Number 2151511 Meter Number 93047332

Meter Number 93047332 Customer Number 20089703

Customer Name CITRUS WATER WORKS INC

Bill Date Amount Due Current Charges Due

01/09/202 55.7 01/31/202

District Office Serving You Crystal River

Service Address
Service Classification

Jan 2023

11927 N ELLSWORTH TER General Service Non-Demand

Comparative Usage Information
Average kWh
Period Days Per Day
Jan 2024 31 4
Dec 2023 32 5

BILLS ARE DUE WHEN RENDERED A 1.5 percent, but not less than \$5, late charge will apply to unpaid balances as of 5:00 p.m. on the due date shown on this bill.



You have 24-hour access to manage your account on-line through Smarthub at www.wrec.net. If you would like to make a payment using your credit card, please call 844-209-7166. This number is WREC's Secure Pay-By-Phone system.

7

See Reverse Side For More Information

Cycle 05

ELECTRIC SERVICE Date **Date** kWh Used Reading Reading Multiplier Dem. Reading KW Demand 12/04 01/04 129 62079 62208 Previous Balance 54.65 54.65CR Payment Balance Forward 0.00 Customer Charge 39.16 Energy Charge 129 KWH @ 0.05017 6.47 Fuel Adjustment 129 KWH @ 0.04000 5.16 FL Gross Receipts Tax 1.30 State Tax 3.62 Total Current Charges 55.71 E.F.T. Total Due 55.71

> Entered: Ph COA Code: Cold Approved: Cold Paid: CFT Old Date: 1/24/24

> > DO NOT PAY

Total amount will be electronically transferred on or after 01/26/2024.

WITHLACOOCHEE RIVER ELECTRIC
COOPERATIVE, INC.
Your Touchstone Energy Cooperative

Your Touchstone Energy* Cooperative P.O. Box 278 • Dade City, Florida 33526-0278

Please Detach and Return This Portion With Your Payment To Ensure Accurate Posting.

See Reverse Side For Mailing Instructions

Bill Date: 01/09/2024

Use above space for address change ONLY.

District: CR05



 TOTAL CHARGES DUE 55.71
DO NOT PAY



Hawkins, Inc. 2381 Rosegate Roseville, MN 55113 Phone: (612) 331-6910

Original

INVOICE

 Total Invoice
 \$118.00

 Invoice Number
 6853072

 Invoice Date
 8/30/24

 Sales Order Number/Type
 4613687
 SL

 Branch Plant
 76

 Shipment Number
 5497916

Sold To: 507375

ACCOUNTS PAYABLE
USWS - US WATER SERVICES -JOE

GABAY-B76

4939 Cross Bayou Blvd

New Port Richey FL 34652-3434

Ship To: 413970

USWS -CITRUS WATERWORKS -JOE GABAY

5335 W Blade Ln

CITRUS WATERWORKS WTP2 Dunnellon FL 34433-2607

| 1.000 | 41530 | 1 LB BLK (Mini-Bulk) | 37 G=1 | | 40.0000 | GA GA | \$2.5300 | - 37 | 386.8 GW | 4110.00 |
|---------|-------------|--------------------------|----------|-----|----------------|--------------|----------------------|-------------|---------------------|-------------------|
| 1.000 | 41930 | Azone - EPA Reg. No. 76 | 270_1 | N | 40.0000 | GA | \$2.9500 | GA | 386.8 LB | \$118.00 |
| Line# | Item Number | Nem Name/ Description | | Tax | Qiy Shippea | Trans UGM | umi Pric a | Phoe JOH | Weight Net/Gress | Extended Price |
| 9/29/24 | Net 30 | PPD Origin | HWTG | | | | | | | 351 |
| Net Due | Date Trimis | FOB Description | Ship Via | | Çı | istomer 9 | 1 # | þ | O Reluate | Sales Agent # |

********* Receive Your Invoice Via Email *********

Please contact our Accounts Receivable Department via email at Credit.Dept@HawkinsInc.com or call 612-331-6910 to get it setup on your account.

Interded States

Page 1 of 1

Tax Rate

Sales Tax \$0.00

Invoice Total

\$118.00

No Discounts on Freight BAPORTANT. All products are said without warranty of any, lond and purchasers will by their own tests, determine switability of such products for their own cesseller warrants had a goods covered by the sine-co-were produced in compliance with the requirements of the Fill Labor. Standards Act of 1938 as emended. Select specifically declarers and excluded any warranty of reprobablebility and any warranty of filmess for a particular purpose

purpose
NO CLAIMS FOR LOSS, DAMAGE OR LEAKAGE
ALLOWED AFTER DELIVERY IS MADE IN GOOD
CONDITION

6

CHECK REMITTANCE: Hawkins, Inc PO. Box 860263 Minneapolis, MN 55486-0263

WIRING CONTACT INFORMATION: Email. Credit Dept@Hawkinsinc.com

Phone Number: (612) 617-8581 Fax Number: (612) 225-6702 FINANCIAL INSTITUTION: US Bank 800 Nicol'et Mali Minneapolis, MN 55402

Account Name
Account #
ABA/Routing #
Swift Code#
Type of Account



ACH PAYMENTS:

CTX (Corporate Trade Exchange) is our preferred method. Please remember to include in the addendum the document numbers pertaining to the payment. For other than CTX, the remail to information may be emailed to.

For other than CTX, the remit to information may be emailed to Credit Dept Mawkinsing com

Credit Dept@Hawkinsinc.com

CASH IN ADVANCE/EFT PAYMENTS
Please 6st the Hawkins, Inc. sales order number or your purchase

Please list the Hawkins, Inc. sales order number or your purchase order number if the invalce has not been processed yet.



INVOICE

Page: 1

 Invoice Number:
 \$1105382

 Invoice Date:
 10/29/2024

 Due Date
 11/28/2024

All pricing anticipates payment by check or ACH. Due to additional cost incurred, services paid by credit card will require an additional 5% processing fee.

Bill To: Citrus Waterworks, Inc.

4939 Cross Bayou Boulevard

Attn: Joe Gabay

New Port Richey, FL 34652

Customer ID

C00958

Job Number

J02144

Job Description:

Citrus Waterworks, Inc.

P.O. Number

WA:

| Date | Item/Description | Task Number | Qty. Unit | Unit Price | Total Price |
|-----------|--|-------------|-----------|------------|-------------|
| 9/30/2024 | Total Coliform-BWN Backwater Heights | 1002 | 4 Each | 10,00 | 40.00 |
| 10/1/2024 | Total Coliform-BWN Backwater Heights | 1002 | 4 Each | 10.00 | 40.00 |
| 10/1/2024 | USW Certified Operator - Sample Collection & Courier | 1002 | 2 Hour | 76.37 | 152.74 |

a Date 11/30/3.1

Phone: (727) 848-8292 Ext. 219
Toll Free: (866) 753-8292 Ext. 219
Email: ar@uswatercorp.net

 Subtotal:
 232.74

 Total Sales Tax:
 0.00

 Total USD:
 232.74

 Adjustments:
 0.00

 Amount Due:
 232.74



INVOICE

Page: 1

Invoice Number Invoice Date:

SI105384 10/29/2024

Due Date 11/28/2024

All pricing anticipates payment by check or ACH. Due to additional cost incurred, services paid by credit card will require an additional 5% processing fee.

Bill To: Citrus Waterworks, Inc.

4939 Cross Bayou Boulevard

Attn: Joe Gabay

New Port Richey, FL 34652

Customer ID

C00958

Job Number:

J02144

Job Description:

Citrus Waterworks, Inc.

P.O. Number

WA:

| Date | Item/Description | Task Number | Qty. Unit | Unit Price | Total Price |
|-----------|---|--------------|------------------|----------------|----------------|
| 9/30/2024 | Total Coliform-BWN Ellsworth Point Total Coliform-BWN Ellsworth Point | 1002 1002 | 3 Each 3 Each | 10.00 10.00 | 30.00 30.00 |
| 10/1/2024 | USW Certified Operator – Sample Collection & Courier | 1002 | 2 Hour | 76.37 | 152.74 |

Phone: (727) 848-8292 Ext. 219 Toll Free: (866) 753-8292 Ext. 219 ar@uswatercorp.net

Subtotal: 212.74 Total Sales Tax: 0.00 Total USD: 212.74 Adjustments: 0.00 212.74 **Amount Due:**



INVOICE

Page: 1

Invoice Number:

SI107022 12/1/2024

Invoice Date: Due Date

12/31/2024

All pricing anticipates payment by check or ACH. Due to additional cost incurred, services paid by credit card will require an additional 5% processing fee.

Bill To: Citrus Waterworks, Inc.

4939 Cross Bayou Boulevard

Attn: Joe Gabay

New Port Richey, FL 34652

Customer ID

C00958

Job Number:

J02144

Job Description:

Citrus Waterworks, Inc.

P.O. Number

WA:

Date Item/Description **Task Number** Qty. Unit **Unit Price Total Price** 12/1/2024 Citrus Waterworks - Monthly Water TP Ops - Annual 1005 1 EA 2.648.64 2.648.64 Contract \$31,783.80 Monthly Contact \$2,648.65

Phone: (727) 848-8292 Ext. 219 Toll Free: (866) 753-8292 Ext. 219 Email: ar@uswatercorp.net

Subtotal: 2,648.64 **Total Sales Tax:** 0.00 **Total USD:** 2,648.64 Adjustments: 0.00 2,648.64 **Amount Due:**



INVOICE

Page: 1

Invoice Number: Invoice Date: SI105584 11/1/2024

Due Date

12/1/2024

All pricing anticipates payment by check or ACH. Due to additional cost incurred, services paid by credit card will require an additional 5% processing fee.

Bill To: Citrus Waterworks, Inc.

4939 Cross Bayou Boulevard

Attn: Joe Gabay

New Port Richey, FL 34652

Customer ID

C00958

Job Number: Job Description: J02144

Citrus Waterworks, Inc.

P.O. Number

WA:

| Date | Item/Description | Task Number | Qty. Unit | Unit Price | Total Price |
|-----------|---|-------------|-----------|------------|-------------|
| 11/1/2024 | Citrus Waterworks - Monthly Water TP Ops - Annual | 1005 | 1 Each | 2,648.64 | 2,648.64 |

C1 11 2 2310 P.

Phone: (727) 848-8292 Ext. 219
Toll Free: (866) 753-8292 Ext. 219
Email: ar@uswatercorp.net

 Subtotal:
 2,648.64

 Total Sales Tax:
 0.00

 Total USD:
 2,648.64

 Adjustments:
 0.00

 Amount Due:
 2,648.64



INVOICE

Page: 1

Invoice Number:

SI104047 10/1/2024

Invoice Date: Due Date

10/31/2024

All pricing anticipates payment by check or ACH. Due to additional cost incurred, services paid by credit card will require an additional 5% processing fee.

Bill To: Citrus Waterworks, Inc.

4939 Cross Bayou Boulevard

Attn: Joe Gabay

New Port Richey, FL 34652

Job Number:

J02144

Job Description:

Citrus Waterworks, Inc.

Customer ID

C00958 P.O. Number

WA:

| Date | Item/Description | Task Number | Qty. Unit | Unit Price | Total Price |
|-----------|--|-------------|-----------|------------|-------------|
| 10/1/2024 | Citrus Waterworks - Monthly Water TP Ops - Annual Contract \$31,783.80 Monthly Contact \$2,648.65 | 100\$ | 1 Each | 2,648.64 | 2,648.64 |

D 'c:

Subtotal: 2,648.64 Total Sales Tax: 0.00 **Total USD:** 2,648.64 Adjustments: 0.00 Amount Due: 2,648.64

Phone: (727) 848-8292 Ext. 219 Toll Free: (866) 753-8292 Ext. 219 Email: ar@uswatercorp.net

INVOICE

Page: 1

Invoice Number: Invoice Date:

SI101540 9/1/2024 10/1/2024

Due Date

All pricing anticipates payment by check or ACH. Due to additional cost incurred, services paid by credit card will require an additional 5% processing fee.

Bill To: Citrus Waterworks, Inc.

4939 Cross Bayou Boulevard

Attn: Joe Gabay

New Port Richey, FL 34652

Job Number: Job Description: J02144

Citrus Waterworks, Inc.

Customer ID

C00958

P.O. Number

WA:

| Date | Item/Description | Task Number | Qty. Unit | Unit Price | Total Price |
|----------|---|-------------|-----------|------------|-------------|
| 9/1/2024 | Citrus Waterworks - Monthly Water TP Ops - Annual | 1005 | 1 Each | 2,648.64 | 2,648,64 |

Date:

Phone: (727) 848-8292 Ext. 219 Toll Free: (866) 753-8292 Ext. 219 Email: ar@uswatercorp.net

2,648.64 Subtotal: **Total Sales Tax:** 0.00 **Total USD:** 2,648.64 Adjustments: 0.00 **Amount Due:** 2,648.64

U.S. Water Services Corporation

4939 CROSS BAYOU BOULEVARD NEW PORT RICHEY, FL 34652

INVOICE

Page: 1

Invoice Number: Invoice Date: Due Date :

SI100259 8/1/2024 8/31/2024

All pricing anticipates payment by check or ACH. Due to additional cost incurred, services paid by credit card will require an additional 5% processing fee.

Bill To: Citrus Waterworks, Inc.

4939 Cross Bayou Boulevard

Attn: Joe Gabay

New Port Richey, FL 34652

Customer ID

C00958

Job Number: Job Description: J02144

Citrus Waterworks, Inc.

P.O. Number

WA:

| Date | Item/Description | Task Number | Qty. Unit | Unit Price | Total Price |
|----------|---|-------------|-----------|------------|-------------|
| 8/1/2024 | Citrus Waterworks - Monthly Water TP Ops - Annual | 1005 | 1 Each | 2,648.64 | 2,648.64 |

Entered.

COA Code Casta

Approved:

Paid:

Date:

Phone; (727) 848-8292 Ext. 219
Toll Free: (866) 753-8292 Ext. 219
Email; ar@uswatercorp.net

| Subtotal: 2,648.64 |
| Total Sales Tax: 0.00 |
| Total USD: 2,648.64 |
| Adjustments: 0.00 |
| Amount Due: 2,648.64 |



INVOICE

Page: 1

Invoice Number: Invoice Date:

Due Date

SI98044 7/1/2024

7/31/2024

Total Price

2,648.64

All pricing anticipates payment by check or ACH. Due to additional cost incurred, services paid by credit card will require an additional 5% processing fee.

Bill To: Citrus Waterworks, Inc.

Job Number:

Job Description:

4939 Cross Bayou Boulevard

Attn: Joe Gabay

New Port Richey, FL 34652

J02144

Citrus Waterworks, Inc.

Customer ID

C00958

Unit Price

2,648.64

P.O. Number

WA:

Date item/Description **Task Number** Qty. Unit 7/1/2024 Citrus Waterworks - Monthly Water TP Ops - Annual 1005 1 Each Contract \$31,783.80 Monthly Contact \$2,648.65

| Entered: | |
|--------------|--|
| COA Code 636 | |
| Approved: | |
| Paid: | |
| Daie: | |

Phone: (727) 848-8292 Ext. 219 Toff Free: (866) 753-8292 Ext. 219 Email: ar@uswatercorp.net

| Subtotal: Total Sales Tax: | 2,648.64 0.00 |
|-------------------------------|-------------------------|
| Total USD: Adjustments: | 2,648.64 |
| Amount Due: | 2,648.64 |



INVOICE

Page: 1

Invoice Number: Invoice Date: Due Date \$195956 6/1/2024 7/1/2024

All pricing anticipates payment by check or ACH. Due to additional cost incurred, services paid by credit card will require an additional 5% processing fee.

Bill To: Citrus Waterworks, Inc.

4939 Cross Bayou Boulevard

Attn: Joe Gabay

New Port Richey, FL 34652

Customer ID

C00958

Job Number.
Job Description:

J02144

Citrus Waterworks, Inc.

P.O. Number

WA:

| Date | Item/Description | Task Number | Qty. Unit | Unit Price | Total Price |
|----------|---|-------------|-----------|------------|-------------|
| 6/1/2024 | Citrus Waterworks - Monthly Water TP Ops - Annual | 1005 | 1 Each | 2,648.64 | 2,648.64 |

| Entered: | 0, | |
|-------------|----|--|
| COA Code: | () | 636 |
| Approved: _ | | |
| Paid: | | |
| Date. | | |
| Dau. | | a grander of the same of the s |

Phone: (727) 848-8292 Ext. 219
Toll Free: (866) 753-8292 Ext. 219
Email: ar@uswatercorp.net

| Subtotal: Total Sales Tax: | 2,648.64 0.00 |
|-------------------------------|-------------------------|
| Total USD: | 2,648.64 |
| Adjustments: | 0.00 |

INVOICE

Page: 1

Invoice Number. Invoice Date:

SI94278 5/1/2024

Due Date

5/31/2024

All pricing anticipates payment by check or ACH. Due to additional cost incurred. services paid by credit card will require an additional 5% processing fee.

Bill To: Citrus Waterworks, Inc. 4939 Cross Bayou Boulevard Attn: Joe Gabay New Port Richey, FL 34652

Job Number:

J02144

Job Description:

Citrus Waterworks, Inc.

Customer ID

C00958

P.O. Number

WA:

| Date | Item/Description | Task Number | Qty. Unit | Unit Price | Total Price |
|----------|---|-------------|-----------|------------|-------------|
| 5/1/2024 | Citrus Waterworks - Monthly Water TP Ops - Annual | 1005 | 1 Each | 2,648.64 | 2,648.64 |

Date

Phone: (727) 848-8292 Ext. 219 Toll Free: (866) 753-8292 Ext. 219 ar@uswatercorp.net

2,648.64 Subtotal: Total Sales Tax: 0.00 2,648.64 **Total USD:** Adjustments: 0.00 2,648.64 **Amount Due:**



INVOICE

Page: 1

 Invoice Number:
 \$192230

 Invoice Date:
 4/1/2024

 Due Date
 5/1/2024

All pricing anticipates payment by check or ACH. Due to additional cost incurred, services paid by credit card will require an additional 5% processing fee.

Bill To: Citrus Waterworks, Inc.

4939 Cross Bayou Boulevard

Attn: Joe Gabay

New Port Richey, FL 34652

Customer ID

C00958

Job Number: Job Description: J02144

Citrus Waterworks, Inc.

P.O. Number WA:

•

Date Item/Description Task Number Qty. Unit Unit Price Total Price

4/1/2024 Citrus Waterworks - Monthly Water TP Ops - Annual Contract \$31,783.80 Monthly Contact \$2,648.65

Phone: (727) 848-8292 Ext. 219
Toll Free: (866) 753-8292 Ext. 219
Email: ar@uswatercorp.net

 Subtotal:
 2,648.64

 Total Sales Tax:
 0.00

 Total USD:
 2,648.64

 Adjustments:
 0.00

 Amount Due:
 2,648.64

U.S. Water Services Corporation

4939 CROSS BAYOU BOULEVARD NEW PORT RICHEY, FL 34652

INVOICE

Page: 1

Invoice Number.

SI90685

Invoice Date:

3/1/2024

Due Date

3/31/2024

Bill To: Citrus Waterworks, Inc. 4939 Cross Bayou Boulevard

Attn: Joe Gabay

New Port Richey, FL 34652

All pricing anticipates payment by check or ACH. Due to additional cost incurred, services paid by credit card will require an additional 5% processing fee.

Job Number: Job Description: J02144

Citrus Waterworks, Inc.

Customer ID

C00958

P.O. Number

WA:

| Date | ltem/Description | Task Number | Qty. Unit | Unit Price | Total Price |
|----------|--|-------------|-----------|------------|-------------|
| 3/1/2024 | Citrus Waterworks - Monthly Water TP Ops - Annual Contract \$30,786.36 Monthly Contact \$2,565.53 | 1005 | 1 Each | 2,565.53 | 2,565.53 |

Phone: (727) 848-8292 Ext. 219
Toll Free: (866) 753-8292 Ext. 219
Email: ar@uswatercorp.net

| Subtotal: Total Sales Tax: | 2,565.53 0.00 |
|-------------------------------|-------------------------|
| Total USD: | 2,565.53 |
| Adjustments: | 0.00 |
| Amount Due: | 2,565.53 |



INVOICE

Page: 1

Invoice Number: Invoice Date: Si89055

Invoice Date: Due Date 2/1/2024 3/2/2024

All pricing anticipates payment by check or ACH. Due to additional cost incurred

All pricing anticipates payment by check or ACH. Due to additional cost incurred, services patd by credit card will require an additional 5% processing fee.

Bill To: Citrus Waterworks, Inc.

4939 Cross Bayou Boulevard

Attn: Joe Gabay

New Port Richey, FL 34652

Customer ID P.O. Number

WA:

C00958

Job Number:

J02144

Job Description: Citrus Waterworks, Inc.

DateItem/DescriptionTask NumberQty. UnitUnit PriceTotal Price2/1/2024Citrus Waterworks - Monthly Water TP Ops - Annual
Contract \$30,786.36 Monthly Contact \$2,565.5310051 Each2,565.532,565.53

Entered Scale COA Coal Custo
Approvide Coal Custo
Paid
Date

Phone: (727) 848-8292 Ext. 219 Toll Free: (866) 753-8292 Ext. 219 Email: ar@uswatercorp.net
 Subtotal:
 2,565.53

 Total Sales Tax:
 0.00

 Total USD:
 2,565.53

 Adjustments:
 0.00

 Amount Due:
 2,565.53



INVOICE

Page: 1

Invoice Number: SI86960 Invoice Date: 1/1/2024 Due Date 1/31/2024

All pricing anticipates payment by check or ACH. Due to additional cost incurred, services paid by credit card will require an additional 5% processing fee.

Bill To: Citrus Waterworks, Inc.

4939 Cross Bayou Boulevard

Attn: Joe Gabay

New Port Richey, FL 34652

Customer ID

C00958

Job Number: Job Description: J02144

Citrus Waterworks, Inc.

P.O. Number

WA:

| Date | Item/Description | Task Number | Qty. Unit | Unit Price | Total Price |
|----------|--|-------------|-----------|------------|-------------|
| 1/1/2024 | Citrus Waterworks - Monthly Water TP Ops - Annual Contract \$30,786.36 Monthly Contact \$2,565.53 | 1005 | 1 Each | 2,565.53 | 2,565.53 |

Entered, PV COA Code, 636 Approved Lip Paid: Date ____

Phone: (727) 848-8292 Ext. 219 Toll Free: (866) 753-8292 Ext. 219 Email: ar@uswatercorp.net

Subtotal: 2,565.53 Total Sales Tax: 0.00 2,565.53 **Total USD:** Adjustments: 0.00 2,565.53 **Amount Due:**

Citrus Waterworks is a water system comprised of two (2) water systems:

Backwater Heights, Florida Department of Environmental Protection Public Water System Permit Number 609-0099. This system has a capacity of 0.100 MGD and it has two (2) interconnected plants.

Ellsworth Point, Florida Department of Environmental Protection Public Water System Permit Number 609-0523. This system has a capacity of 0.086 MGD with one (1) plant.

There are no Department of Health or Water Management permits associated with this system.

PUBLIC WATER SYSTEM INFORMATION (to be completed by sampler - please type or print legibly) PWS I.D. #: 609-0523 System Name: Ellsworth Point Subdivision ☐ Nontransient Noncommunity **⊠**Community Transient Noncommunity System Type (check one): Address: 11927 N. Ellsworth Terrace ZIP Code: 34433 City: Dunnellon E-Mail Address: Fax #: SAMPLE INFORMATION (to be completed by sampler) Sample Number: 917 124 0859001 Sample Date: Sample Time: AM PM (Circle One) Sample Location (be specific): Eいいのけん Location Code: Disinfectant Residual (Required when reporting results for trihalomethanes and haloacetic acids): 1,82 mg/L Reason(s) for Sample (Check all that apply) Sample Type (Check Only One) PRoutine Compliance with 62-550 Replacement (of Invalidated Sample) Distribution MEntry Point (to Distribution) ☐ Special (not for compliance with 62-550) Confirmation of MCL Exceedance ☐ Plant Tap (not for compliance with 62-550) Composite of Multiple Sites**. ☐Clearance (permitting) □Other Raw (at well or intake) Sampling Procedure Used or Other Comments: Max Residence Time ☐Ave Residence Time SQN ples - Primary's Becordary's I vas/Raris Near First Customer See 02-550.350(4) for requirements and See 62-550,500(6) for requirements and restrictions. attach a results page for each site. And 32-550.512(3) for nitrate or nitrite exceedances. SAMPLER CERTIFICATION , do HEREBY CERTIFY (Print Title) that the above public water system and sample collection information is complete and correct. Signature: Certified Operator #1373535Phone #: Sampler's Fax #: acovell@uswatercorp.net

LABORATORY CERTIFICATION INFORMATION to be completed by lab - please type or print legibly)

| Lab Name | e:Advanced Enviror | nmental Laboratorio | es, Inc. F | Florida DOH Certifi | cation #: | E84589 | _ Certification Expire | ation Date: _ | 06/30/2024 |
|-----------------------------|----------------------|--|-----------------|------------------------------------|---------------------|---------------------|---|--------------------|--------------------------------|
| | | | | | ATTAC | H CURRENT | DOH ANALYTE SHE | ET* | |
| Address: | 9610 Princess Pa | lm Ave, Tampa, FL | 33619 | | Phone | #: _(813) 6: | 30-9616 | | |
| Were any | analyses subcontra | acted 🔽 Yes | ☐ No | If yes, please prov | ride DOH ce | rtification nu | ımber(s): <u>E82001,E</u> | 82574 | |
| | | | | | ATTAC | H DOH ANAL | LYTE SHEET FOR EA | CH SUBCONT | RACTED LAB |
| ANALYSI | S INFORMATION | (to be completed by | lab) Date S | Sample(s) Receive | d: <u>04/11/2</u> | 2024 | | | |
| PWS ID: | (From Page 1): | U-10523 | Samp | le Number (From Pa | ige 1): <u>T240</u> | 8590001 | Lab Assigned Repo | rt#OrJobID |): <u>T2408590</u> |
| Group(s) | Analyzed & Results | attached for comp | liance with | Chapter 62-550, F. | A.C. (Check a | ill that apply): | | | |
| Partial Nitrate Nitrite | ept Asbestos [| ynthetic Organics All 30 All Except Dioxin Partial Dioxin Only | | tile Organics All 21 Partial | Trihalor | | Radionuclides Single Sample Qtrly Compos | le 🔽 | condaries All 14 Partial |
| Asbesto | os | | | LAB CERTI | FICATION | I | | | |
| Ι, | Sai | rah Noonan | | | | Project Mana | , do F | IEREBY CERTIFY | |
| | (F | Print Name | | | | (Print Title) | | | |
| that all atta Signature: | | are correct and unless | | all requirements of the | he National E | nvironmental Date: | Laboratory Accreditation | on Conference | (NELAC). |
| possible | | t the public water sys | tem for failure | e to sample, and may | | | attached analysis resu DOH Bureau of Labor | | |
| | co | NFIRMATION & NOTIF | FICATION IS R | EQUIRED WITHIN 24 | HRS FOR NITE | RATE OR NITR | RITE MCL EXCEEDANCE | S | |
| | NON-DETECTS AF | RE TO BE REPORTED | AS THE MDL | WITH "U" QUALIFIER. | . (Non-detect | is reported as " | BDL" or with a "<" are not | acceptable.) | |
| COMPLIA | NCE DETERMINA | TION(to be complete | ed by DEP or | DOH - attach notes | as necessary | y) | | | |
| Sample C | ollection & Analysis | Satisfactory: Y | es 🔲 No | | Replacer | nent Sample | or Report Requested | (circle or highlig | ht group(s) above) |
| Person No | otified: | | [| Date Notified: | | DEF | P/DOH Reviewing Of | ficial: | |
| Reporting Fo | ormat 62-550.730 | | | Pa | age: 6 of 15 | | | | |

*Results must be reported with appropriate qualifiers in accordance with Florida Administration Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

INORGANIC CONTAMINANTS 62-550.310(1)

Report Number / Job ID:

T2408590001

PWS ID (From Page 1):

6090523

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|----------------|-------|-------|--------------------|------------|----------------------|----------|------------------|------------------|----------------------------|
| 1040 | Nitrate (as N) | 10 | mg/L | 0.31 | | SM 4500NO3-F | 0.092 | 04/12/2024 | 14:48 | E84589 |
| 1041 | Nitrite (as N) | 1 | mg/L | 0.081 | U | SM 4500NO3-F | 0.081 | 04/12/2024 | 14:48 | E84589 |
| 1005 | Arsenic | 0.01 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/15/2024 | 13:34 | E82574 |
| 1010 | Barium | 2 | mg/L | 0.0030 | U | EPA 200.7 | 0.0030 | 04/17/2024 | 11:39 | E84589 |
| 1015 | Cadmium | 0.005 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/15/2024 | 13:34 | E82574 |
| 1020 | Chromium | 0.1 | mg/L | 0.00050 | U | EPA 200.8 | 0.00050 | 04/15/2024 | 13:34 | E82574 |
| 1024 | Cyanide | 0.2 | mg/L | 0.0040 | U | SM 4500-CN-E | 0.0040 | 04/17/2024 | 13:35 | E84589 |
| 1025 | Fluoride | 4 | mg/L | 0.40 | U | EPA 300.0 | 0.40 | 04/25/2024 | 15:34 | E84589 |
| 1030 | Lead | 0.015 | mg/L | 0.00050 | U | EPA 200.8 | 0.00050 | 04/15/2024 | 13:34 | E82574 |
| 1035 | Mercury | 0.002 | mg/L | 0.000011 | U. | EPA 245.1 | 0.000011 | 04/17/2024 | 10:19 | E84589 |
| 1036 | Nickel | 0.1 | mg/L | 0.0012 | U | EPA 200.8 | 0.0012 | 04/15/2024 | 13:34 | E82574 |
| 1045 | Selenium | 0.05 | mg/L | 0.0012 | U | EPA 200.8 | 0.0012 | 04/15/2024 | 13:34 | E82574 |
| 1052 | Sodium | 160 | mg/L | 4.5 | | EPA 200.7 | 0.80 | 04/17/2024 | 11:39 | E84589 |
| 1074 | Antimony | 0.006 | mg/L | 0.0010 | U | EPA 200.8 | 0.0010 | 04/15/2024 | 13:34 | E82574 |
| 1075 | Beryllium | 0.004 | mg/L | 0.0020 | U | EPA 200.7 | 0.0020 | 04/17/2024 | 11:39 | E84589 |
| 1085 | Thalllum | 0.002 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/15/2024 | 13:34 | E82574 |

SECONDARY CONTAMINANTS 62-550.320

Report Number / Job ID: T2408590001

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|---------------------------|-----------|-------|--------------------|------------|----------------------|------------|------------------|------------------|----------------------------|
| 1002 | Aluminum | 0.2 | mg/L | 0.021 | U | EPA 200.7 | 0.021 | 04/17/2024 | 11:39 | E84589 |
| 1017 | Chloride | 250 | mg/L | 6.9 | I | EPA 300.0 | 2.0 | 04/25/2024 | 15:34 | E84589 |
| 1022 | Copper | 1 | mg/L | 0.0016 | I | EPA 200.8 | 0.0010 | 04/15/2024 | 13:34 | E82574 |
| 1025 | Fluoride | 2 | mg/L | 0.40 | U | EPA 300.0 | 0.40 | 04/25/2024 | 15:34 | E84589 |
| 1028 | Iron | 0.3 | mg/L | 0.0067 | U | EPA 200.7 | 0.0067 | 04/17/2024 | 11:39 | E84589 |
| 1032 | Manganese | 0.05 | mg/L | 0.0010 | U | EPA 200.8 | 0.0010 | 04/15/2024 | 13:34 | E82574 |
| 1050 | Silver | 0.1 | mg/L | 0.00050 | U | EPA 200.8 | 0.00050 | 04/15/2024 | 13:34 | E82574 |
| 1055 | Sulfate | 250 | mg/L | 12 | | EPA 300.0 | 2.0 | 04/25/2024 | 15:34 | E84589 |
| 1095 | Zinc | 5 | mg/L | 0.050 | U | EPA 200.7 | 0.050 | 04/17/2024 | 11:39 | E84589 |
| 1905 | Color | 15 | CU | 5.0 | I | SM 2120 B | 4.3 | 04/12/2024 | 08:30 | E84589 |
| 1920 | Odor | 3 | TON | 1.0 | U | SM 2150 B | 1.0 | 04/11/2024 | 17:00 | E84589 |
| 1925 | pH (field pH from page 1) | 6.5 - 8.5 | | 7.86 | Q | SM 4500H+B | | 04/12/2024 | 10:00 | E84589 |
| 1930 | Total Dissolved Solids | 500 | mg/L | 90 | | SM 2540 C | 10 | 04/14/2024 | 16:00 | E84589 |
| 2905 | Foaming Agents | 0.5 | mg/L | 0.041 | I | SM 5540 C | 0.040 | 04/12/2024 | 09:00 | E82001 |

RADIONUCLIDES 62-550.310(6)

Report Number / Job ID:

T2408590001

PWS ID (From Page 1):

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | RDL | Analysis Error | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|------------------|-----|-------|--------------------|------------|----------------------|------------|-----|-------------------|------------------|------------------|----------------------------|
| 4006 | Combined Uranium | 30 | ug/L | 0.20 | U | EPA 200.8 | 0.20 | 1 | | 04/15/2024 | 13:34 | E82574 |

If the result exceeds 5 pCi/L, a measurement for radium-226 is required. Uranium is reported separately under Contam ID 4006.

If the results exceed 5 pCi/L, a measurement for radium-226 is required. If the results exceed 15 pCi/L, a measurement for Combined Uranium must be reported separately. The DEP/DOH will subtract the U value from the Gross Alpha (ID 4002) to determine compliance with MCL for Gross Alpha (Excl. U) of 15pCi/L. If the result for ID 4002 Gross Alpha (Including Uranium) does not exceed 15pCi/L, Combined Uranium need not be measured nor reported.

If using Uranium testing methods ASTM D5174 or EPA 200.8 only, then Analysis Error need not be reported.

VOLATILE ORGANICS 62-550.310(4)(a)

Report Number / Job ID: T2408590001

PWS ID (From Page 1): 6090523

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | RDL | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|----------------------------|-------|-------|--------------------|------------|----------------------|------------|-----|------------------|------------------|----------------------------|
| 2378 | 1,2,4-Trichlorobenzene | 70 | ug/L | 0.44 | υ | EPA 524.2 | 0.44 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2380 | cis-1,2-Dichloroethylene | 70 | ug/L | 0.27 | U | EPA 524.2 | 0.27 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2955 | Xylenes (total) | 10000 | ug/L | 0.44 | U | EPA 524.2 | 0.44 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2964 | Dichloromethane | 5 | ug/L | 0.44 | U | EPA 524.2 | 0.44 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2968 | o-Dichlorobenzene | 600 | ug/L | 0.39 | U | EPA 524.2 | 0.39 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2969 | para-Dichlorobenzene | 75 | ug/L | 0.33 | U | EPA 524.2 | 0.33 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2976 | Vinyl Chloride | 1 | ug/L | 0.29 | U | EPA 524.2 | 0.29 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2977 | 1,1-Dichloroethylene | 7 | ug/L | 0.22 | U | EPA 524.2 | 0.22 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2979 | trans-1,2-Dichloroethylene | 100 | ug/L | 0.21 | U | EPA 524.2 | 0.21 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2980 | 1,2-Dichloroethane | 3 | ug/L | 0.24 | U | EPA 524.2 | 0.24 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2981 | 1,1,1-Trichloroethane | 200 | ug/L | 0.29 | U | EPA 524.2 | 0.29 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2982 | Carbon tetrachloride | 3 | ug/L | 0.25 | U | EPA 524.2 | 0.25 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2983 | 1,2-Dichloropropane | 5 | ug/L | 0.26 | U | EPA 524.2 | 0.26 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2984 | Trichloroethylene | 3 | ug/L | 0.14 | U | EPA 524.2 | 0.14 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2985 | 1,1,2-Trichloroethane | 5 | ug/L | 0.27 | U | EPA 524.2 | 0.27 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2987 | Tetrachloroethylene | 3 | ug/L | 0.42 | U | EPA 524.2 | 0.42 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2989 | Monochlorobenzene | 100 | ug/L | 0.36 | U | EPA 524.2 | 0.36 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2990 | Benzene | 1 | ug/L | 0.26 | U | EPA 524.2 | 0.26 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2991 | Toluene | 1000 | ug/L | 0.33 | U | EPA 524.2 | 0.33 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2992 | Ethylbenzene | 700 | ug/L | 0.31 | U | EPA 524.2 | 0.31 | 0.5 | 04/16/2024 | 21:08 | E84589 |
| 2996 | Styrene | 100 | ug/L | 0.25 | υ | EPA 524.2 | 0.25 | 0.5 | 04/16/2024 | 21:08 | E84589 |

Note: Results indicating non-detection with a reported lab MDL > .5 µg/L will not be accepted for compliance.



tamonte Springs: 380 Northlake Blvd., Suite 1048 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597

Ingsville: 4985 SW 41st Blvd. • Gainesville, FL 32808 • 352.377.2349 • Fax 352.395.8639

cksonville: 6881 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354

ramar: 10200 USA Today Way • Miramar, FL 33025 • 954.889,2288 • Fax 954.889.2281

Illahassee: 2639 North Monroe Street, Suite D • Tallahassee, FL 32303 • 850,219.6274 • Fax 850,219.6275 impa: 9810 Princess Palm Ave. • Tampa, FL 33819 • 813,630,9816 • Fax 813,630,4327 BOTTLE SIZE & TYPE **US Water Services** Project Name: Ellsworth Point Client Name: NUMBER P.O. Number of Project Number: WTP 4939 Cross Bayou Boulevard Address: New Port Richey, FL 34652 FDEP Facility No: 609-0523 ANALYSIS REQUIRED Phone: 866-753-8292 Project Address: Primary Inorganic LABORATORY I.D. 727-849-4219 FAX: Special Instructions: C12 1.82 Contaminants Gross Alpha Contact: Melisa Rotteveel Secondary **RAD 226 RAD 228** Uranium COUP 1 1 B23535 ph Sampled By: 7.8 STANDARD RUSH Turn Around Time: ther of ADaPT Juls Page: PRESER-VATION 100 0 SAMPLING Ce Grab NO. SAMPLE ID SAMPLE DESCRIPTION MATRIX COUNT Comp DATE TIME B POE 4.10.24 1720 DW 6 Grab X X X X X X M

| - | | | | | | | | | | | + | | | | | | | | + | | | | - |
|------|-------------|---------------------|---------|--------------|---------------|-----------|----------|---------------|------------|----------|-----------|----------|----------|---------------------|-------------|---------|---------|------------|----------|------------|----------|---------------|-----|
| Mat | rix Code: | WW = wastewater | SW = | surface wate | r GW = grou | und water | DW = d | irinking wate | r O = oil | A = air | S0 = s0 | d SL≃ | = sludg | ge Pres | ervation Co | de: I=i | ce H=(H | ICI) S = (| H2SO4) | N = (HNO3) | T = (Sod | um Thiosulfa | te) |
| Rece | ived on Ice | ☐Yes ☐ | No | Temp take | n from sample | • [| Temp fro | m blank | | | | Г | Vhe | ere required, pl | checked | | Ten | perature | when rec | elved | (in | degrees celci | us |
| DCN | AD-051 | Form last revised 0 | 4/30/20 | 15 | | | | | evice used | for meas | uring Ter | np by un | rique la | dentifier (circle) | R temp gian | used) . | J: 9A (| 3: LT-1 L | .T-2 T: | 10A A: 3/ | A M: 3A | S: 1V | |
| 62 | | Reinquished by | | Date | Time | | Res | seived by | | Date | T | ne | | 200 | | FOR | DRIN | KING ' | WATE | R USE: | 100 | 4.00 | |
| 1 | 0 | 0.00 | 00: | 14.10.24 | 1845 | | 1180 | 7 (| 7/11 | 124 | 109 | | 2 | PWS ID | | | | | | | | | |
| 2 | 0 | Ne | 4/11 | 124 | 14:00 | | 1 | 0_ | 1 | 9.11 | (.75) | 400 | | Contact Pen | оп: | | | | Phon | 9! | | | |
| 3 | | | 1 | | | | | | | | | | | Supplier of W | ater: | | | | | | | | |
| 4 | | | | | | | | | | | | | | Site-Addre | s: | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |

| PUBLIC WATER SYSTEM INFORMA | ATION (to be completed by sampler - please type or pri | int legibly) |
|---|---|---|
| System Name: Ellsworth Point Sut | odivision | PWS I.D. #: <u>609-0523</u> |
| System Type (check one): | unity Nontransient Noncommunity | ☐Transient Noncommunity |
| Address: 11927 N. Ellsworth Terrace | | |
| City: <u>Dunnellon</u> | ZIP Co | de: <u>34433</u> |
| Phone # Fax # | :E-Mail Address: | |
| SAMPLE INFORMATION (to be compl | eted by sampler) | |
| Sample Number: sr 124 | (85900) Sample Date: 4/10/24 | Sample Time: 720 AM PM (Circle One) |
| | worth point Well-po | Location Code: |
| • | porting results for trihalomethanes and haloacetic acids): 1,8 | ~ ^ / ~ ~ ~ ~ |
| Sample Type (Check Only One) | | for Sample (Check all that apply) |
| Distribution | Routine Compliance with 62-55 | 0 Replacement (of Invalidated Sample) |
| Entry Point (to Distribution) | ☐Confirmation of MCL Exceedance | ce Special (not for compliance with 62-550) |
| ☐Plant Tap (not for compliance with 62-5 | 550) Composite of Multiple Sites** | ☐Clearance (permitting) |
| ☐Raw (at well or intake) | Other | |
| ☐Max Residence Time | Sampling Procedure Used or Othe | er Comments: |
| ☐Ave Residence Time | A | |
| ☐Near First Customer | TINNUCL SO | amples-Primary's / Secondary's / Voes/Rari |
| | *See 62-550.500 6) for recuirements a And 62-550,512(3) for nitrate or nitrite | |
| Α . | SAMPLER CERTIF | FICATION |
| 1. Ancels | | do HEREBY CERTIFY |
| that the above public water system and sa | e) ample collection information is complete and correct. | (Print Title) |
| Signature: Q C | Ceel | Date: 4/10/24 |
| Certified Operator #: 373535Phon | e# 1352) (051-4078 | Sampler's Fax #: |
| Sampler's F-mail: QCDUP\ | il@ uswater coro. ne: | + |

| LABORATORY CERTIFICATION INFORMATION (to be completed by lab - | please type or print legibly) | | | | | | | | | | | | |
|---|---|--|--|--|--|--|--|--|--|--|--|--|--|
| Lab Name: KNL Environmental Testing Florida DOH Certificat | tion #: E84025 Certification Expiration D | Date: June Renewal | | | | | | | | | | | |
| ATTACH CURRENT DOH ANALYTE SHEET* | | | | | | | | | | | | | |
| Address: 3202 N. Florida Ave. Tampa, FL 33603 | Phone #: 813-229-2879 | | | | | | | | | | | | |
| Were any analyses subcontracted? Tes No If yes, please provide D | | | | | | | | | | | | | |
| | ATTACH DOH ANALYTE SHEET FOR EACH SUBC | ONTRACTED LAB | | | | | | | | | | | |
| ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Rece | ived: 4-15-24 | | | | | | | | | | | | |
| PWS ID (From Pg 1): 609 0523 Sample # (From Pg 1): 724 | 08590 Lab Assigned Report # or | Job ID: 24.6748 | | | | | | | | | | | |
| Group(s) Analyzed & Results attached for compliance with Chapter 62-550 | | | | | | | | | | | | | |
| Inorganics All Except Asbestos All 30 All 21 Partial All Except Dioxin Partial Nitrate Dioxin Only Asbestos All 21 Partial Partial Asbestos Dioxin Only Asbestos Dioxin Only Asbestos Dioxin Only Asbestos Dioxin Only Dioxin Only | Tribalomethanes XSingle Sample | Secondaries All 14 Partial | | | | | | | | | | | |
| | RTIFICATION | | | | | | | | | | | | |
| I, Thomas J. Weeks | Laboratory Director | , do HEREBY CERTIFY | | | | | | | | | | | |
| (Print Name) that all attached analytical data are correct and unless noted meet all requirements | (Print Title) of the National Environmental Laboratory Accreditation (| Conference (NELAC). | | | | | | | | | | | |
| | | , , | | | | | | | | | | | |
| Signature: | Date: 4-30-24 | | | | | | | | | | | | |
| * Failure to provide a valid and current Florida DOH lab certification number and a possible enforcement against the public water system for failure to sample, and r** Please provide radiological sample dates & locations for each quarter. | current Analyte Sheet for the attached analysis results w may result in notification of the DOH Bureau of Laboratory | rill result in rejection of the report, y Services. | | | | | | | | | | | |
| CONFIRMATION & NOTIFICATION IS REQUIRED WITH A " NON-DETECTS ARE TO BE REPORTED AS THE MDL WITH A " | HIN 24 HRS FOR NITRATE OR NITRITE MCL EXCEEDAN "U" QUALIFIER. (Non-detects reported as "BDL" or with a "<" are | CES not acceptable.\ | | | | | | | | | | | |
| COMPLIANCE DETERMINATION (to be completed by DEP or DOH – attach r | | | | | | | | | | | | | |
| Sample Collection & Analysis Satisfactory: Yes No | Replacement Sample or Report Requested (circ | de or highlight group(s) above) | | | | | | | | | | | |
| Person Notified:Date Notified: | DEP/DOH Reviewing Official: | | | | | | | | | | | | |

KNL Environmental Testing 3202 N. Florida Ave. Tampa, FL 33603

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

RADIONUCLIDES 62-550.310(6)

KNL Report Number/Job ID: 24.6748 PWS ID(From Page 1): 609 0523

Ph: (813) 229-2879 Fax: (813) 229-0002

Client ID: AEL-Tampa // T2408590

| Contam | Contam Name | MCL | Units | Analysis | Qualifier | Analytical | Lab MDL | RDL | Analysis Error | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------|-------------------------------|--------|-------|----------|-----------|------------|------------|----------|-------------------|------------------|------------------|-------------------------|
| | | | | Result | | Method | IAITAT | <u> </u> | LITTOI | Date | LIULO | Certification |
| 4002 | Gross Alpha (incl Uranium) | 15 *** | pCi/L | 0.7 | U | EPA 900.0 | 0.7 | 3 | 0.6 | 4-27-24 | 0453 | E84025 |
| 4020 | Radium-226 | 5 | pCi/L | 0.4 | I | EPA 903.0 | 0.2 | 1 | 0.2 | 4-26-24 | 1311 | E84025 |
| 4030 | Radium-228 | | pCi/L | 0.7 | U | EPA Ra-05 | 0.7 | 1 | 0.6 | 4-24-24 | 1636 | E84025 |

Reporting Format 62-550,730 Effective January 1995, Revised February 2010.

* Qualifier Codes: U = indicates that the compound was analyzed for but not detected.

I = the reported value is between the laboratory detection limit and the laboratory practical quantitation limit.

- ** If the result exceeds 5 pCi/L, a measurement for radium-226 is required. Uranium is reported separately under Contam ID 4006.
- *** If the results exceed 5 pCi/L, a measurement for radium-226 is required. If the results exceed 15 pCi/L, a measurement for Combined Uranium must be reported separately. The DEP/DOH will subtract the U value from the Gross Alpha (ID 4002) to determine compliance with MCL for Gross Alpha (Excl.U) of 15 pCi/L. If the result for ID 4002 Gross Alpha (incl.Uranium) does not exceed 15 pCi/L, Combined Uranium need not be measured nor reported.

**** If using Uranium testing methods ASTM D5174 or EPA 200.8 only, then Analysis Error need not be reported.

***** 97% carrier recovery

Page of

Test results meet all requirements of the 2016 TNI standards. Statement of estimated uncertainty available upon request. Test results refer only to sample(s) listed. Contact person: Thomas Weeks (813) 229-2879.

Approved by:

Thomas J. Weeks Laboratory Director

| | | | | | | | | 13 | | | . :• | | 11: | | |
|--|--|---|---|---|--|---------------|---------|-----------------------------|---------------------------------|------------------|---------------|---------------|------------|-----------|------------|
| Advanced Labora Invironmental Labora | oribe, doe. 🖂 | llamonie Sminu ori Myera: 1900 w acksonville: 1893 aliehasses: 200 m | relinia Teorier, Sir. I solipeni Flarj., FLA | 0, F1 30913 - 238.67 1218 - 894.883.8350 | 4.8139-1+100:E0 -1+100:E02101 | 1492 | | E | Isebesyl Idbamar Tempa: e | 10200 VEAT | eday Way, Fl. | 33425 - D54.8 | AMD Lodi | D: ED2636 | |
| Advanced Environmen | Denlard | Nume: 176 | 10859 | lO | | 35775 | T | T | | | | T | 7 | T | |
| Tampa Fl 33619 . | Project | Mumbers | | | <u></u> | P. | | | | | 1. | | | | |
| | PO Nun | abai; 75 | 020 | | | | | | | - | | + | 1 | + | 出. |
| 813-630-9616 | FDEP F | ability Mp: | 04) | | | | | | | | | | | | UMBER |
| 813-630-4327 | FDEPF | nolity Add/ess: | - | | | | - | | | | | | - | | 2 |
| mcammarata@aellab | יייי ייייייייייייייייייייייייייייייייי | | | | ANALYSISE REPERT | | | . জু - | | | | | 1 | | 0 |
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| LE ID SAMPLE DESCRI | PTION · | Grab S | E TIME | | NO, PALETTA | | | | - | - | | - | | - | LABORATORY |
| 77408590 | | GH | 124.1720 | DW | | X | X | X. | | | | 1 | | | |
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| AND THE PARTY OF T | | | 2 | www. | The state of the s | UL. 7 | m. cr. | | - 174 MEG | 1 | - | | | | |
| | | | | | 535-2 | | 1. | | 1 | | | | | - | - |
| | | | 1 | | | | - | + | + | - | | | - | - | \dashv |
| | 6 | | Kanada and | | | PERM | | | | - | All sales | | - | 40 A | 四 地名 |
| | | | | A COUNTY OF THE PARTY OF | | | | TEL SING | Max Assessment | NUMBER OF STREET | DECEMBER OF | 300 S | 34 | | |
| : WW = waslewater SW = surface water G | Mr availad violar 1 | nist - debulga wak | L. Oral As | ate bornel | | · book | | | | | | | | - 1 143 | ₽. |
| e. Dyes DNo Temptaken from | | one grow blank | 7 | | | ennp. when re | | - | kė H=(HO) | | p. when re | | | I DOBINIA | <u>"</u> |
| Fom lest revised 08/07/2019 | | - | | uping Temp by t | | | • | .,_ | | - | - | | | /. E-14 | |
| | me . · | Received by: | | Dale Tin | 100 | | | The Person of the Person of | TER US | | יאי ישיי | י אוויי | -, - 01·/1 | תויח . | 7 |
| Källiyh Pasqifalifil | THINE | - U | | 1514 | | | | | rice supplied) | | | | | | |
| | | | | | 7 | Contact | Person: | | | | Phone | | | | |



Advanced Environmental Laboratories, Inc 9610 Princess Palm Ave Tampa, FL 33619 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580 Phone: (813) 630-9616

Fax: (813) 630-4327

FINAL

Workorder: Ellsworth Point (T2408590)

May 01, 2024

Melisa Rotteveel US Water Services 4939 Cross Bayou Blvd. New Port Richey, FL 34652

RE: Workorder: T2408590 Ellsworth Point

Dear Melisa Rotteveel:

Enclosed are the analytical results for sample(s) received by the laboratory on Thursday April 11, 2024. Results reported herein conform to the most current NELAC standards, where applicable, unless otherwise narrated in the body of the report. The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody and results pertain only to these samples.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Sarah Noonan, Project Manager SNoonan@aellab.com

Sarah Noonan



Advanced Environmental Laboratories, Inc 9610 Princess Palm Ave Tampa, FL 33619 Payments: P.O. Box 551580 Jacksonville, FL 32255-9616 Phone: (813) 630-9607

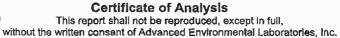
Fax: (813) 630-4327

FINAL

Workorder: Ellsworth Point (T2408590)

Sample Summary

| Lab ID | Sample ID | Matrix | Method | Date Collected | Date Received | Analytes Reported | Basis |
|-------------|-----------|--------|--------------|------------------|------------------|----------------------|-------|
| T2408590001 | POE | DW | EPA 200.7 | 04/10/2024 17:20 | 04/11/2024 16:29 | 6 | NA |
| T2408590001 | POE | DW | EPA 200.8 | 04/10/2024 17:20 | 04/11/2024 16:29 | 12 | NA |
| T2408590001 | POE | DW | EPA 245.1 | 04/10/2024 17:20 | 04/11/2024 16:29 | 1 | NA |
| T2408590001 | POE | DW | EPA 300.0 | 04/10/2024 17:20 | 04/11/2024 16:29 | 3 | NA |
| T2408590001 | POE | DW | EPA 524.2 | 04/10/2024 17:20 | 04/11/2024 16:29 | 21 | NA |
| T2408590001 | POE | DW | SM 2120 B | 04/10/2024 17:20 | 04/11/2024 16:29 | 1 | NA |
| T2408590001 | POE | DW | SM 2150 B | 04/10/2024 17:20 | 04/11/2024 16:29 | 1 | NA |
| T2408590001 | POE | DW | SM 2540 C | 04/10/2024 17:20 | 04/11/2024 16:29 | 1 | NA |
| T2408590001 | POE | DW | SM 4500-CN-E | 04/10/2024 17:20 | 04/11/2024 16:29 | 1 | NA |
| T2408590001 | POE | DW | SM 4500H+B | 04/10/2024 17:20 | 04/11/2024 16:29 | 1 | NA |
| T2408590001 | POE | DW | SM 4500NO3-F | 04/10/2024 17:20 | 04/11/2024 16:29 | 2 | NA |
| T2408590001 | POE | DW | SM 5540 C | 04/10/2024 17:20 | 04/11/2024 16:29 | 1 | NA |
| | | | | | | | |



POWERED BY HORIZON V.13.J.G





Advanced Environmental Laboratories, Inc 9610 Princess Palm Ave Tampa, FL 33619 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580

Phone: (813) 630-9616

Fax: (813) 630-4327

FINAL

Workorder: Ellsworth Point (T2408590)

Workorder Summary

Method Comments

COLR-SM-W

Batch Comments

WCAg/15772 - Surfactant-MBAS, SM5540C, Water

T2408611 was received by the lab past the recommended holding time. The analysis was performed as soon as possible after receipt by the laboratory. The data is qualified to Indicate the holding time violation.

WCAt/29070 - NO3,NO2 SM4500NO3F,Water

The matrix spike recoveries of Nitrate T2408528001 (MS -12% and MSD 87%)). Recovery in the Laboratory Control Sample (LCS) were acceptable, which indicates the analytical batch was in control. The matrix spike outliers suggest a potential low bias in this matrix. No further corrective action was required.





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Phone: (813) 630-9616 Fax: (813) 630-4327

FINAL

Workorder: Ellsworth Point (T2408590)

QC Results Qualifiers

Parameter Qualifiers

The compound was analyzed for but not detected.

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit,

Q Missed Hold Time

Lab Qualifiers

G DOH Certification #E82001 (FL NELAC) AEL-Gainesville

DOH Certification #E82574 (FL NELAC) AEL-Jacksonville

DOD-ELAP Certification #L23-514 (ISO/IEC 17025;2017) AEL-Jacksonville

T DOH Certification #E84589 (FL NELAC) AEL-Tampa

Page 4 of 15





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

See Page 4 for instructions

| I. General Information for | | 2024 | | | |
|--|---|----------------------------------|-----------------------|----------------------|--|
| A. Public Water System (PW | | | | | |
| | th Point Sub | | | - | ntification Number: 609-0523 |
| PWS Type: Comm | | | mmunity [] | Conse | |
| | nections at End of Month: 25 | Total P | opulation Served at | End of Month: 8 | 4 |
| Total and the second se | Waterworks Inc | | | | |
| Contact Person: Shar | on Purviance | Contact | Person's Title: 1 | Itility Manager | |
| Contact Person's Mailin | g Address: 4939 Cross Bayou Bouleva | ard City: No | ew Port Richey | State: FL | Zip Code: 34652 |
| Contact Person's Telepl | hone Number: 866-753-8292 | Contact | Person's Fax Numb | er: 727-848-7701 | |
| Contact Person's Email | Address: spurviance@uswatercorp | o.net | | | |
| B. Water Treatment Plant In | nformation | | | | |
| Plant Name: WTP | | | | Plant Telephor | ne Number |
| Plant Address: 11927 M | I Elleworth Terrace | City: I | Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated b | | Purchased Finished Water | | State. Th | Zip code. 54405 |
| ** | (12) Alan Orollia [| | | | |
| | ay Operating Capacity of Plant, gallons | | 4 1 | 0.000.01044) 77.4 | 0) D |
| | section 62-699.310(4), F.A.C.): V | | ass (per subsection 6 | | |
| Licensed Operators: | Name: | License Class | | Day(s)/Shift(s) V | Worked |
| Lead/Chief Operators: | Wendell Leigh | C | 14711 | | |
| Other Operators: | Jeffrey Hines | A | 19837 | | |
| | Jessie Jose Hinojosa | C | 28938 | | |
| | | | | | |
| | | | | | |
| | - | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| II. Certification by Lead Cl | nef Operator | | | | |
| I the undersigned water tre | atment plant operator licensed in Flori | da, am the lead/chief operator o | of the water treatmen | t plant identified i | n Part 1 of this report. I certify that the |
| | | | | | t chemicals used at this plant conform to NS |
| | | | | | dditional operations records for this plant we |
| | | | | | nicals used and chemical feed rate, and (2) i |
| applicable, appropriate trea | atment process performance records. F | urther more, I agree to provide | these additional ope | erations records to | the PWS owner so that the PWS owner car |
| retain them, together with | copies of this report, at a convenient lo | cation for the last ten years. | | | |
| Wendell Leigh | 2/6/2024 | Wendell Leigh | | | C 14711 |
| Signature and Date | | Printed or Typed Nam | ne | | License Number |
| DEP Form 62-555 900(300) | | | | | |
| Effective August 28, 2003 | | Page 1 | | | |

PWS Identification Number:

609-0523

4,176

6,400

Ellsworth Point Sub

Average

Maximum

WTP

III. Daily Data for the Month/Year of: Means of Achieving Four-Log Virus Inactivation/Removal *

January 2024

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)
Type of Disinfectant Residual Maintained in Distribution System:

X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

| Type of D | Disinfectan | t Residual I | Maintained in Dis | stribution System: | | K Free Chlorine | Combine | d Chlorin | e (Chloramines) | | Chlorii | ne Dioxide | | |
|------------------|---|-----------------------------|--|---------------------|--|-----------------------|-----------------------------|----------------|-----------------------------|-------------------------------------|---|------------|---|--|
| | | | | | | | | | | | | | Commence of | |
| | | | | | | CT Calculations, or U | JV Dose, to Demonstrate Fou | ur-Log Virus I | nactivation, if Applicable* | | | UV Dose | | |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in Operation | Net Quantity of Finished Water Produced, and | Peak Flow Rate, and | Lowest Residual Disarfectant Concentration (C) Before or a Fast Customer During Peak Flow, mg/L | | Lowest CT Provided | Temp of | pH of Water, if Applicable | Minimum CT Required, mg- mm/L | Lowest Operating UV Dose, mW- sec/cm ² | | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, med. | Emergency or Abnorma Operating Conditions: Rep or Maintenance Work the Involves Taking Water System Components Out Operation |
| 1 | X | 24 | 4,450 | | 1.61 | | 7. | |] | | | | 1.18 | |
| 2 | | 24 | 4,450 | | | | | | | | | | | |
| 3 | X | 24 | 4,300 | | 1.60 | | | | | | | | 1.40 | |
| 4 | | 24 | 4,300 | | | | | | | | | | | |
| 5 | X | 24 | 4,900 | | 1.44 | | | | | | | | 0.96 | |
| 6 | | 24 | 4,900 | | | | | 1 | İ | | | | | |
| 7 | | 24 | 4,900 | | | | | | | | | | | |
| 8 | X | 24 | 3,950 | | 1.71 | | | | | | | | 1.01 | |
| 9 | | 24 | 3,950 | | | | | | | | | | | |
| 10 | X | 24 | 6,400 | | 1.76 | | | | | | | | 0.97 | |
| 11 | | 24 | 6.400 | | | | | | | | | | | |
| 12 | X | 24 | 4.700 | | 1.87 | | | | | | | | 1.04 | |
| 13 | | 24 | 4,700 | | | | | | | | | | | |
| 14 | | 24 | 4,700 | | | | | | | | | | | |
| 15 | X | 24 | 3,500 | | 1.19 | | | | | | | | 0.98 | |
| 16 | | 24 | 3,500 | | 1 | | | | - |] | | | | |
| 17 | X | 24 | 3,550 | | 1.84 | | | | | | | | 1.15 | |
| 18 | | 24 | 3.550 | | | | | | | | | | | |
| 19 | X | 24 | 3,633 | | 2.00 | | | | | | | | 1.01 | |
| 20 | | 24 | 3.633 | | | | | | | | | | | |
| 21 | | 24 | 3,633 | | 1 | | | | | | | | | |
| 22 | l x | 24 | 3,450 | | 1.72 | | | 1_ | | | | | 1.03 | |
| 23 | | 24 | 3,450 | | | | | | | | | | | |
| 24 | X | 24 | 4,000 | | 2.10 | | | | | | | | 1.13 | |
| 25 | | 24 | 4,000 | | | | | | | | | | | |
| 26 | X | 24 | 3,667 | | 2.08 | | | | | | | | 1.16 | |
| 27 | | 24 | 3,667 | | | | | | | | | | | |
| 28 | | 24 | 3,667 | | | |] | | 1 | | | | | |
| 29 | X | 24 | 4,000 | | 2.04 | | | | 1 | | | | 1.59 | |
| 30 | | 24 | 4,000 | | | Ì | | | | | | | | |
| 31 | X | 24 | 3,550 | | 1.41 | | | | | | | | 0.96 | |
| Total | | | 129,450 | | | | | | | | | | | |
| | | | | | | | | | | | | | | |



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

See Page 4 for instructions

| 1. General Information for t | | 4 | | | |
|-------------------------------|--|-------------------------|------------------------|--------------------|--|
| A. Public Water System (PW | | | | | |
| P | h Point Sub | | | PWS Idea | ntification Number: 609-0523 |
| PWS Type: Commu | | | ommunity [] | | ecutive |
| | nections at End of Month: 25 | Total | Population Served at | End of Month: 8 | 34 |
| PWS Owner: Citrus V | | | | | |
| | on Purviance | Contac | t Person's Title: U | Itility Manager | |
| | Address: 4939 Cross Bayou Boulevard | City: N | lew Port Richey | State: FL | Zip Code: 34652 |
| Contact Person's Teleph | one Number: 866-753-8292 | Contac | Person's Fax Numbe | r: 727-848-7701 | |
| Contact Person's Email | Address: spurviance@uswatercorp.net | | | | |
| B. Water Treatment Plant In | ormation | | | | |
| Plant Name: WTP | | | | Plant Telepho | ne Number: |
| Plant Address: 11927 N | . Ellsworth Terrace | City: | Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | ~ | rchased Finished Wate | | | |
| | y Operating Capacity of Plant, gallons per o | | | | |
| | ection 62-699.310(4), F.A.C.): V | | lass (per subsection 6 | 2-699.310(4), F.A | C.): D |
| Licensed Operators: | Name: | License Class | License Number | | |
| Lead/Chief Operators: | Wendell Leigh | C | 14711 | Day (b) Other (b) | Worked |
| Other Operators: | Jeffrey Hines | Ā | 19837 | | |
| | Jessie Jose Hinojosa | C | 28938 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | 1 | |
| | | | | - | |
| | | | | | |
| II. Certification by Lead Ch | of Operator | | | | |
| | | 1 1 1/1: 6 | 0.1 | | |
| | tment plant operator licensed in Florida, an | | | | |
| | | | | | at chemicals used at this plant conform to NSF |
| | | | | | dditional operations records for this plant were |
| | | | | | micals used and chemical feed rate, and (2) if |
| | | | e mese additional ope | rations records to | the PWS owner so that the PWS owner can |
| retain them, together with co | opies of this report, at a convenient location | nor the fast ten years. | | | |
| Wendell Leigh | 3/7/2024 | Wendell Leigh | | | C 14711 |
| Signature and Date | | Printed or Typed Na | me | | License Number |
| DED E 69 555 000/2000 | | | | | |

DEP Form 62-555 900(300) Effective August 28, 2003 PWS Identification Number:

609-0523

Ellsworth Point Sub WTP

III. Daily Data for the Month Year of:

Means of Achieving Four-Log Virus Inactivation/Removal * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)

| | | - | 1 | | | CT Calculations or I | V Dose, to Demonstrate Fou | r-Log Virus In | activation, if Applicable* | | | | 100 B 100 | 61743 |
|------------|---|----------------|---|---------------------|---|---------------------------|--|----------------|-----------------------------|--------------------------------------|-------------------------------|--|--|---|
| | | | | | | CT Cake | | DOE TENDE | modianos, a replación | | | UV Dose | | Emergency or Abnormal |
| Day of the | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced and | Peak Flow Rate, and | Lowest Residual Districtant Concentration (C) Before or at First Customer During Peak Flow, mg/L | | Lowest CT Provided Before or at First Customer During Peak Flow, | Temp of | pH of Water, if Applicable | Minimum CI Required, mg- min/L | Lowest Operating UV Dose, mW- | Minmum UV Dose Required, mW-sec/cm ² | Lowest Residual Disinfectant Concentration at Remote Point an Distribution System, may/L | Operating Conditions, Repa or Maintenance Work that Involves Taking Water System Components Out o Operation |
| 1 | Pace A | 24 | 3,550 | Peak Palw Rate, and | Pow, mg L | During Peak Flow, minutes | u - mm/L | water, C | pri of water, if Applicable | mivL | sec/em | mw-sec/cm | a Distribution System, may to | Operation |
| 2 | X | 24 | 3,900 | | 2.10 | | | | | | | | 1.20 | |
| 3 | | 24 | 3,900 | | | | | | | | | | | |
| 4 | | 24 | 3,900 | | | | | | | | | | | |
| 5 | X | 24 | 3,750 | | 2.10 | | | | | | | | 1.10 | |
| 6 | | 24 | 3.750 | | | | | 1 | | Ì | ĺ | | 1110 | |
| 7 | X | 24 | 4,000 | | 0.80 | | | | | | | | 0.90 | |
| 8 | | 24 | 4,000 | | | | | | | | | | | |
| 9 | X | 24 | 4,300 | | 3.00 | | | | | | | | 1.70 | |
| 10 | | 24 | 4,300 | | | | | | | | | | | |
| 11 | | 24 | 4,300 | | | | | | | | Ì | | | |
| 12 | X | 24 | 4,100 | | 2.50 | | | | | | | | 1.90 | |
| 13 | | 24 | 4,100 | | | | | | | | | | | |
| 14 | X | 24 | 4,100 | | 1.60 | | | | | 1 | 1 | | 1.10 | |
| 15 | 1 | 24 | 4,100 | | Î | | | | | | | | | |
| 16 | X | 24 | 3,967 | | 1.40 | | | | | j | | | 1.10 | |
| <u>1</u> 7 | | 24 | 3,967 | | | | | | | | | | | |
| 18 | | 24 | 3,967 | | | | | | |] | | | | |
| 19 | X | 24 | 3,850 | | 2.40 | | | | | | | | 1.50 | |
| 20 |] | 24 | 3,850 | | | | | | | | | | | |
| 21 | X | 24 | 3,450 | | 2.40 | | | | | | | | 1.80 | |
| 22 | <u> </u> | 24 | 3,450 | | | | | | | | | | | |
| 23 | X | 24 | 3,900 | | 2.60 | | | | | | | | 1.50 | |
| 24 | <u> </u> | 24 | 3,900 | | | | | | | | | | | |
| 25 | | 24 | 3,900 | | | | | 1 | | | | | | |
| 26 | X | 24 | 3,900 | | 2.50 | | | | | | | | 2.00 | |
| 27 | | 24 | 3,900 | | | | | | | | | | | |
| 28 | X | 24 | 4,000 | | 2.20 | | | | | | | | 2.10 | |
| 29 | | 24 | 4,000 | | | | | | | | | | | |
| 30 | | | | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | | |
| | | | 44.10.54 | | | | | | | | | | | |

 Total
 114,051

 Average
 3,933

 Maximum
 4,300



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

See Page 4 for instructions

| I. General Information for the A. Public Water System (PWS) | | | | | |
|--|--|--|---------------------------|---------------------|---|
| | n Point Sub | | | DWC Ident | ification Number: 6090523 |
| | nity [X] NonTransitent [] | NonC | ommunity [] | Consec | |
| | nections at End of Month: 25 | | Population Served at 1 | | |
| PWS Owner: Citrus V | | 1 Otai | opulation served at. | End of Month. 64 | |
| Water being the control of the contr | on Purviance | Contrat | Person's Title: U | Itility Manager | |
| | Address: 4939 Cross Bayou Boulevard | | | State: FL | Zip Code: 34652 |
| | one Number: 866-753-8292 | | Person's Fax Number | | Zip Code. 34032 |
| Contact Person's Email A | | Contact | . I CISOIIS I AX IVIIIIDC | 1. 727-040-7701 | |
| B. Water Treatment Plant Inf | | | | | . 18 64 |
| Plant Name: WTP | | | | Plant Telephone | e Number: |
| Plant Address: 11927 N. | Ellsworth Terrace | City: | Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | | chased Finished Wate | | | Exp code. 57105 |
| | y Operating Capacity of Plant, gallons per da | | | | |
| | ection 62-699.310(4), F.A.C.): V | | lass (per subsection 6 | 2-699.310(4), F.A.(| C.): D |
| Licensed Operators: | Name: | License Class | | Day(s)/Shift(s) W | |
| Lead/Chief Operators: | Angela Covell | В | 23535 | | |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | |
| | | And Andrews and An | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| II. Certification by Lead Chi | of Operator | | | | |
| | | 4 1 1/1:0 | Cil | . 1 11 | Dat fall at I alf deal |
| | tment plant operator licensed in Florida, am report is true and accurate to the best of my | | | | |
| | | | | | ditional operations records for this plant were |
| | ensed operator staffed or visited this plant du | | | | |
| | ment process performance records. Further | | | | |
| | opies of this report, at a convenient location f | | . trese additional ope | radons records to t | ic i vio owici so macine i vio owici can |
| Angela Canell | 4/2/2024 | Angela Covell | - | | B 23535 |
| Signature and Date | | Printed or Typed Na | ne. | | License Number |
| | | z z z z z z z z z z z z z z z z z z z | | | AMERICAN A TRANSPORTE |

DEP Form 62-555 900(300) Effective August 28, 2003 PWS Identification Number:

6090523

Ellsworth Point Sub

Average Maximum WTP

| EMSWORTH I CHIN SCHO | 44.17 | |
|--|--------------|------|
| III. Daily Data for the Month/Year of: | March 2024 | |
| Means of Achieving Four-Log Virus Inactivation | on/Removal * | Free |

4,371

6,600

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)
Type of Disinfectant Residual Maintained in Distribution System:

X Free Chlorine

Combined Chlorine (Chloramines)

Chlorine Dioxide

| | | | | | | CT Calculations or U | N Dose, to Demonstrate For | r-Los Virus la | nactivation, if Applicable* | | | | | Emergency or Abnormal Operating Conditions; Repair or Mandenance Work that Involves Taking Water at System Components Out of |
|------------|---|----------------|----------------------------------|---------------------|--|--------------------------|----------------------------|---------------------|-----------------------------|-----------------------------|------------------------------|------------------------|--|--|
| Day of the | Days Plant Staffed or visited by operator | Hours Plant in | Net Quantity of Funshed Water | | Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak | CT Calc | Lowest CT Provided | | | Minimum CT Required, mg- | Lowest Operating UV Dose mW- | UV Dose | Lowest Residual Disinfectant Concentration at Remote Point | |
| Month | Place "X" | Operation | Produced m1 | Peak Flow Rate, and | Flow, mg/L | During Peak Flow manutes | sug-min/L | Temp of Water °C | pH of Water, if Applicable | mm/L | sec/cm ² | mW-sec/cm ² | in Distribution System, mark. | Operation |
| 1 | X | 24 | 3,700 | | 0.60 | | | | | | | | 0.20 | |
| 2 | | 24 | 3,700 | | | | | | | | | | | |
| 3 | | 24 | 3,700 | | | | | - | | | | | | |
| 4 | X | 24 | 3,950 | | 2.50 | | | 1 | | | | | 2.10 | |
| 5 | | 24 | 3,950 | | | | | | | | | | | |
| 6 | X | 24 | 4,000 | | 2.40 | 1 | | | | | | | 2.90 | |
| 7 | 1 | 24 | 4,000 | | <u> </u> | | | 1 | | | | | | |
| 8 | X | 24 | 4,433 | | 2.50 | | | | | | | | 1.90 | |
| 9 | | 24 | 4,433 | | | | | | | | | | | |
| 10 | | 24 | 4,433 | | | | | | | | | | | |
| 11 | X | 24 | 4,450 | | 2.80 | | | | | | | | 1.90 | |
| 12 | | 24 | 4,450 | | | | | | | | | | | |
| 13 | X | 24 | 5,350 | | 2.72 | | | | | | | | 1.60 | |
| 14 | | 24 | 5,350 | | | | | | | | | | | |
| 15 | X | 24 | 4,933 | | 2.65 | | | | | | | | 1.80 | |
| 16 | | 24 | 4,933 | | | | | | | | | | | |
| 17 | | 24 | 4,933 | | | | | | | | | | | |
| 18 | X | 24 | 6,600 | | 1.10 | | | 1 | | | 1 | | 0.41 | |
| 19 | | 24 | 6,600 | | | | | | | | | | | |
| 20 | X | 24 | 4,150 | | 2.68 | | | | | 1 | | | 1.49 | |
| 21 | 1 | 24 | 4 150 | | | | | | | 1 | | | | |
| 22 | X | 24 | 4,167 | | 2.68 | | | - | | | | | 1.96 | |
| 23 | | 24 | 4,167 | | | | | | | | | | | |
| 24 | | 24 | 4,167 | | | | | 1 | | | | | | |
| 25 | X | 24 | 3.550 | | 1.49 | | | | | | | | 1.02 | |
| 26 | | 24 | 3,550 | | | | | | | | | | | |
| 27 | X | 24 | 3,450 | | 2.00 | | | | | | | | 1.82 | |
| 28 | | 24 | 3,450 | | | | | | | | | | | |
| 29 | X | 24 | 4.267 | | 1.42 | | | | | | | | 0.99 | |
| 30 | | 24 | 4.267 | | | | | 1 | | | | | | |
| 31 | | 24 | 4.267 | | | | | | | | | | | |
| Total | | | 135,500 | | | | | | | | | | | |



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

See Page 4 for instructions

Effective August 28, 2003

| I. General Information for tl | ne Month/Year of: April 20 | 024 | | | | | | | | |
|--|---|--|---|--|--|---|--|--|--|--|
| L. Public Water System (PW) | | | | | | | | | | |
| | h Point Sub | | | | PWS Ider | ntification Number: 6090523 | | | | |
| PWS Type: Commun | | | | mmunity [] | | ecutive | | | | |
| | nections at End of Month: 25 | | Total F | Population Served at | End of Month: 8 | 4 | | | | |
| PWS Owner: Citrus V | | | | | and the state of t | | | | | |
| Contact Person: Share | | | Contact | Person's Title: U | Jtility Manager | | | | | |
| | Address: 4939 Cross Bayou Boulev | vard | City: New Port Richey State: FL Zip Code: 34652 | | | | | | | |
| Contact Person's Telepho | one Number: 866-753-8292 | | Contact | Person's Fax Number | er: 727-848-7701 | | | | | |
| Contact Person's Email A | Address: spurviance@uswatercor | p.net | | | | | | | | |
| . Water Treatment Plant Inf | ormation | | | | | | | | | |
| Plant Name: WTP | | | | | Plant Telephor | ne Number: | | | | |
| Plant Address: 11927 N. | . Ellsworth Terrace | | City: 1 | Dunnellon | State: FL | Zip Code: 34433 | | | | |
| Type of water treated by | | Purchased Finishe | d Water | · | | , , , , , , , , , , , , , , , , , , , | | | | |
| Permitted Maximum Da | y Operating Capacity of Plant, gallon | | | | | | | | | |
| | ection 62-699.310(4), F.A.C.): V | per day. coop | Plant Cl | ass (per subsection 6 | 9-699 310(4) FA | C)· D | | | | |
| Licensed Operators: | Name: | Licens | e Class | License Number | | | | | | |
| Lead/Chief Operators: | Angela Covell | | В | 23535 | Day Country | TO TROOTE THE PROPERTY OF THE | | | | |
| Other Operators: | Jessie Jose Hinojosa | | C | 28938 | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| II. Certification by Lead/Chi | ef Operator | | 120 | THE DAY | | | | | | |
| I the undersigned water trea information provided in this International Standard 60 or prepared each day that a lice applicable, appropriate treat | tment plant operator licensed in Flor report is true and accurate to the be r other applicable standard reference ensed operator staffed or visited this | st of my knowledge and d in subsection 62-555. plant during the month Further more, I agree t | d belief. I .320(3), F indicated o provide | certify that all drink A.C. I also certify the labove: (1) records | ing water treatment that the following ac of amounts of che | in Part 1 of this report. I certify that the at chemicals used at this plant conform to NSF additional operations records for this plant were micals used and chemical feed rate, and (2) if the PWS owner so that the PWS owner can | | | | |
| Angela Covell | 5/7/2024 | Angela Cove | 11 | | | B 23535 | | | | |
| Signature and Date | | Printed or Ty | vped Nan | ne | | License Number | | | | |
| DEP Form 62-555 900(300) | | | | | | | | | | |

| Means of UltraViole | Achieving et Radiatio | Four-Log V | | n/Removal * ther (Discribe) | Free Chlorin | | rine Dioxide | | | Combined | | Chloramines) | | |
|------------------------|---|----------------|--|--------------------------------|--|-----------------------------------|--|----------------|-----------------------------|--------------------------------------|---|--------------|---|---|
| Type of I | Disinfectan | Residual M | faintained in Di | stribution System: | X | Free Chlorine | Combine | d Chlorir | ne (Chloramines) | | Chlori | ne Dioxide | | |
| | | | | | | | | | | | | | District Con- | |
| | | | | | | CT Calculations, or L CT Calcu | V Dose, to Demonstrate For | ur-Log Virus I | nactivation, if Applicable* | | | UV Dose | | U. HELLI |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced, gal | Peak Flow Rate, gpd | Lowest Residual Dumfectant Concentration (C) Before or at First Customer During Peak Flow, mg L | | Lowest CT Provided | Temp of | pH of Water, if Applicable | Minimum CT Required, mg- min/L | Lowest Operating UV Dose, mW- sec/cm ² | | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L | Emergency or Abnorma Operating Conditions. Rep or Maintenance Work th Involves Taking Water System Components Out Operation |
| 1 | X | 24 | 4,100 | | 1.09 | Daniel Ton Immines | The District of the Control of the C | | partial management | Limy 13 | 1 | 11111 25000 | 0.82 | 077111111 |
| 2 | | 24 | 4,100 | | | | | | | | | | | |
| 3 | X | 24 | 3,200 | | 0.73 | | | | | | | | 0.51 | |
| 4 | | 24 | 3,200 | | | | | | | | | | | |
| 5 | X | 24 | 4,300 | | 2.77 | | | | | | | | 1.98 | |
| 6 | | 24 | 4,300 | | | | | | | | | | | |
| 7 | | 24 | 4,300 | | | | | | | | | | | |
| 8 | X | 24 | 2,700 | | 1.92 | l | | | | | | | 1.35 | |
| 9 | | 24 | 2,700 | | | | | | | | | | | |
| 10 | X | 24 | 4,350 | | 2.71 | | | | | | | | 1.89 | |
| 11 | | 24 | 4,350 | | | | | | | | | | | |
| 12 | X | 24 | 3,567 | | 0.97 | | | | | | | | 0.62 | |
| 13 | | 24 | 3,567 | | | | | | | | | | | |
| 14 | | 24 | 3,567 | | | | | | | | | | | |
| 15 | X | 24 | 5,150 | | 0.83 | | | | | | | | 0.59 | |
| 16 | | 24 | 5,150 | | | | | | | | | | | |
| 17 | X | 24 | 6,200 | | 3.21 | | | | | | | | 2.29 | |
| 18 | | 24 | 6,200 | | | | | | | | | | | |
| 19 | X | 24 | 4,267 | | 2.49 | | | | | | | | 1.87 | |
| 20 | | 24 | 4,267 | | | | | | | | | | | |
| 21 | | 24 | 4,267 | | | | | | | | | | | |
| 22 | X | 24 | 4,350 | | 1.83 | | | | | | | | 1.49 | |
| 23 | | 24 | 4,350 | | | | | | | Ì | | | | |
| 24 | X | 24 | 5,800 | | 1.70 | | | | | Į | | | 1.27 | |
| 25 | | 24 | 5,800 | | | | | | | | | | | |
| 26 | X | 24 | 5,600 | | 1.83 | I | | 1 | | | | | 1.41 | |
| 27 | | 24 | 5,600 | | | | Ì | | | | | | | |
| 28 | | 24 | 5,600 | | | | Ì | | 1 | Ī | 1 | | | |
| 29 | X | 24 | 9,100 | | 1.50 | | | | | | j | | 1.03 | |
| 20 | 1 | 1 04 | 0.100 | _ | | 1 | | | 1 | T | Ī | 1 | | |

| 31 | |
|---------|---------|
| Total | 143,102 |
| Average | 4,770 |
| Maximum | 9.100 |

24

9,100



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

See Page 4 for instructions

| 9 | | | | | |
|--|--|---------------------------|-------------------------|--------------------|---|
| I. General Information for t | | | | | |
| A. Public Water System (PW | | | | | |
| | h Point Sub | | | PWS Iden | tification Number: 6090523 |
| PWS Type: Commu | | | nmunity [] | Conse | |
| | nections at End of Month: 25 | Total Pe | opulation Served at 1 | End of Month: 84 | 4 |
| to the second se | Waterworks Inc | | | | |
| | on Purviance | | | tility Manager | |
| | Address: 4939 Cross Bayou Boulevard | City: Ne | w Port Richey | State: FL | Zip Code: 34652 |
| Contact Person's Teleph | one Number: 866-753-8292 | | Person's Fax Numbe | r: 727-848-7701 | |
| Contact Person's Email A | Address: spurviance@uswatercorp.net | - | | | |
| B. Water Treatment Plant In | ormation | | | | |
| Plant Name: WTP | | | | Plant Telephor | ne Number: |
| Plant Address: 11927 N | . Ellsworth Terrace | City: I | Ounnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | - | urchased Finished Water | | , | , |
| | y Operating Capacity of Plant, gallons per | | | | |
| | ection 62-699.310(4), F.A.C.): V | | as (may subscation 6) | 9 600 210(4) E A | C\.D |
| Licensed Operators: | Name: | | ss (per subsection 6) | | |
| Lead/Chief Operators: | | License Class | License Number 23535 | Day(s)/Shift(s) V | vorked |
| Other Operators: | Angela Covell Jessie Jose Hinojosa | B | 28938 | | |
| Other Operators: | Jessie Jose rimojosa | | 20900 | | |
| | | | | | |
| | | | | | |
| | , | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| II. Certification by Lead Ch | of Openator | | | | |
| | | | | | |
| | tment plant operator licensed in Florida, a | | | | |
| | | | | | chemicals used at this plant conform to NSF |
| | | | | | ditional operations records for this plant were |
| | | | | | nicals used and chemical feed rate, and (2) if |
| | | | these additional ope | rations records to | the PWS owner so that the PWS owner can |
| retain them, together with co | opies of this report, at a convenient location | n for the last ten years. | | | |
| Angela Covell | 6/1/2024 | Angela Covell | | | B 23535 |
| Signature and Date | | Printed or Typed Nam | e | | License Number |
| DEP Form 69-555 900(300) | | - Imou or a pour turn | | | 2.002.00 |

DEP Form 62-555 900(300) Effective August 28, 2003 PWS Identification Number:

6090523

126,098

4,068

5,033

Total

Average

Maximum

Ellsworth Point Sub

WTP

III. Dally Data for the Month/Year of May 2024

Means of Achieving Jour-Log Virus Inactivation/Removal *

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

UltraViolet Radiation Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* CT Calculations UV Dase Emergency or Abnormal Days Plant perating Conditions: Repair Staffed or Lowest CT Provided Lowest or Maintenance Work that Concentration (C) Before or at Disinfectant Contact Time (T) Before or at First Customer visited by Net Quantity of Operating UV Involves Taking Water Minimum UV Dose Required, Day of the operator Hours Plant in Fmished Water First Customer During Peak at C Measurement Point During Peak Flow Dose, mW-Concentration at Remote Point System Components Out of Temp of Required, mg-Durme Peak Flow minutes Month Place "X" Operation Produced mi Peak Flow Rate, and Flow Tol Water, °C pH of Water, if Applicable mW-sec/cm2 in Distribution System, mg/L trut-min/L 1.26 0.83 1 X 4.150 2 24 4,150 3 4,833 3.19 24 3.11 4.833 5 24 4.833 6 94 4.750 3.02 2.89 24 4.750 8 24 3.850 2.06 1.72 9 24 3,850 10 X 24 5.033 1.85 2.06 11 24 5.033 12 24 5.033 13 24 3,150 1.52 1.39 14 24 3,150 15 X 24 3,250 1.48 1.39 16 24 3.250 17 24 3,300 0.89 0.6218 24 3,300 19 24 3,300 20 X 24 4,300 0.65 0.35 21 24 4,300 22 X 24 4.250 1.96 1.13 23 24 4,250 24 1.61 24 4.600 1.87 25 24 4.600 26 24 4.600 27 24 3,600 1.56 1.41 28 24 3,600 29 24 3,400 1.46 1.32 30 24 3.400 31 24 3,400 1.25 0.33



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

See Page 4 for instructions

Effective August 28, 2003

| I. General Information for the | ne Month/Year of: June 2024 | | | | | |
|--|---|--|--|--|--|--|
| A. Public Water System (PW) | | | | | | |
| | n Point Sub | | | PWS Iden | tification Number: | 6090523 |
| | nity [X] NonTransitent [] | NonCor | nmunity [] | Conse | cutive | |
| | nections at End of Month: 25 | Total Pe | pulation Served at | End of Month: 84 | 4 | |
| The second secon | Vaterworks Inc | | | | | |
| Contact Person: Share | | Contact 1 | Person's Title: U | Itility Manager | | |
| | Address: 4939 Cross Bayou Boulevard | City: Ne | w Port Richey | State: FL | Zip Code: 3 | 4652 |
| Contact Person's Telepho | one Number: 866-753-8292 | Contact I | erson's Fax Numbe | r: 727-848-7701 | | |
| Contact Person's Email A | Address: spurviance@uswatercorp.net | | | | | |
| B. Water Treatment Plant Inf | ormation | | | | | |
| Plant Name: WTP | | | | Plant Telephor | ne Number: | |
| Plant Address: 11927 N | Ellsworth Terrace | City: I | unnellon | State: FL | Zip Code: 8 | 34433 |
| Type of water treated by | | urchased Finished Water | | | | The second of th |
| | y Operating Capacity of Plant, gallons per | | | | | |
| | ection 62-699.310(4), F.A.C.): V | | ss (per subsection 6 | 9 600 210(A) F A | C). D | |
| Licensed Operators: | Name: | License Class | License Number | | and the second s | THE RESERVE OF THE PERSON OF T |
| Lead/Chief Operators: | Angela Covell | B | 23535 | Day(s)/Simil(s) v | VOIKEU | |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | | |
| | | | | | | |
| | | | | | | |
| | | | | _ | | |
| II. Certification by Lead/Chi | of Operator | | | | | |
| I the undersigned water trea information provided in this International Standard 60 or prepared each day that a lice applicable, appropriate treat | tment plant operator licensed in Florida, a report is true and accurate to the best of r other applicable standard referenced in s ensed operator staffed or visited this plant ment process performance records. Further opies of this report, at a convenient location | ny knowledge and belief. I of ubsection 62-555.320(3), F., during the month indicated er more, I agree to provide | ertify that all drinking. A.C. I also certify the above: (1) records or | ng water treatment at the following ad f amounts of chen | chemicals used at Iditional operations nicals used and che | this plant conform to NSI s records for this plant wer emical feed rate, and (2) if |
| Angela Covell | 7/8/2024 | Angela Covell | | | В | 23535 |
| Signature and Date | | Printed or Typed Nam | e | | Lice | ase Number |
| DEP Form 69-555 900/2000 | | | | | | |

PWS Identification Number:

6090523

3,742

4,933

Ellsworth Point Sub

Average Maximum WTP

III Daily Data for the Month/Year of: June 2024

Means of Achieving F ur-Log Virus I active tion/Removal *

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)
Type of Disinfectant Residual Maintained in Distribution System:

X Free Chlorine

Combined Chlorine (Chloramines)

Chlorine Dioxide

| type of L | Asinlectani | Residual | Maintained in Dis | stribution System: | X | Free Chlorine | Combine | d Chlorir | ne (Chloramines) | | Chlorir | ne Dioxide | | |
|------------|--|----------------|-----------------------------------|---------------------|---|-----------------------|------------------------------|----------------|-----------------------------|----------------------------|-------------------------------------|------------------------------------|--------------------------------|-----------------------------|
| | | | | | 3 / 5 / 5 | CT Calculations. or I | UV Dosc, to Demonstrate Fou | ur-Log Virus I | nactivation, if Applicable* | | | | | im System Components Out of |
| Day of the | Days Plant Staffed or visited by operator | Hours Plant in | Net Quantity of Finished Water | | Lowest Residual Osimfoctant Concentration (C) Before or at First Customer During Peak | CT Cale | ulations Lowest CT Provided | | | Mmanum CT Required, mg- | Lowest Operating UV Dose, mW- | UV Dose Minanum UV Dose Required, | Lowest Residual Duinfectant | |
| Month | Place "X" | Operation | Produced ml | Peak Flow Rate, god | Flow, nust | Der Peak Flow mautes | ne min/L | Water °C | pH of Water, if Applicable | | sec/cm ² | mW-sec/cm² | n Distribution S retem, mr. L. | Operation |
| 1 | | 24 | 4,933 | | | | | | | | | | | |
| 2 | 1 | 24 | 4,933 | | | | | | | | | | | |
| 3 | X | 24 | 3,100 | | 1,40 | | | | | - | | | 1.26 | |
| 4. | | 24 | 3,100 | | | | | | | | | | | |
| 5 | X | 24 | 3,900 | | 1.29 | | | | _ | 1 | | | 0.96 | |
| _6 | - | 24 | 3,900 | | | | | - | | | 1 | | | |
| 7 | X | 24 | 4,600 | | 1.69 | | | | | | | 1 | 1.42 | 1 |
| 8 | | 24 | 4,600 | | | | | | | | | | <u> </u> | |
| 9 | | 24 | 4,600 | _ | | | | - | | | | | | |
| 10 | X | 24 | 3,650 | | 1.51 | | | | | | | | 1.38 | |
| 11 | | 24 | 3 650 | | | | | | | | | | | |
| 12 | X | 24 | 3 400 | | 1.69 | | | | | | | | 1.56 | |
| 13 | | 24 | 3,400 | | | | | | | | | | | |
| 14 | X | 24 | 4.067 | | 1.54 | | | | | | | | 1.46 | |
| 15 | | 24 | 4,067 | | | | | | | | | | | |
| 16 | | 24 | 4,067 | | | | | | | | | | | |
| 17 | X | 24 | 3,300 | | 1.41 | | | | | | | | 1.33 | |
| 18 | | 24 | 3,300 | | | | | | | | | | | |
| 19 | X | 24 | 3,600 | | 1.39 | | | | | | 1 | | 1.23 | |
| 20 | | 24 | 3.600 | | | | | | | | | | | |
| 21 | X | 24 | 3,300 | | 1.42 | | | | | | | | 1.26 | |
| 22 | | 24 | 3.300 | | | | | | | | | | | |
| 23 | | 24 | 3,300 | | | | | | | 1 | | | | |
| 24 | X | 24 | 2.850 | | 1.39 | | | | | | | | 1.28 | |
| 25 | | 24 | 2,850 | | | | | | | | | | | |
| 26 | X | 24 | 3,500 | | 1.39 | | | | | | | | 1.31 | |
| 27 | | 24 | 3,500 | | | | | | | | | | | |
| 28 | X | 24 | 3,967 | | 1.31 | | | | | | | | 1.22 | |
| 29 | | 24 | 3,967 | | | | | | | | | | | |
| 30 | | 24 | 3,967 | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | | |
| Total | | | 112,268 | | | | | | | | | | | |
| | | | | | | | | | | | | | | |



$MONTHLY\ OPERATION\ REPORT\ FOR\ PWS_8\ TREATING\ RAW\ GROUND\ WATER\ OR\ PURCHASED\ FINISHED\ WATER$

See Page 4 for instructions

| I. General Information for t | he Month/Year of: July 2024 | 1 | | | |
|------------------------------|---|--------------------------------|------------------------|--|--|
| A. Public Water System (PW | S) Information | | | | |
| PWS Name: Ellsworth | h Point Sub | | | PWS Ider | ntification Number: 6090523 |
| PWS Type: Commu | nity [X] NonTransitent | [] NonCo | ommunity [] | | ecutive |
| Number of Service Con | nections at End of Month: 25 | Total 1 | Population Served at | End of Month: 8 | 34 |
| PWS Owner: Citrus V | Waterworks Inc | | 3, | | |
| Contact Person: Share | on Purviance | Contact | Person's Title: | Utility Manager | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Bouleva | rd City: N | ew Port Richey | State: FL | Zip Code: 34652 |
| Contact Person's Teleph | one Number: 866-753-8292 | Contact | Person's Fax Numb | er: 727-848-7701 | |
| Contact Person's Email A | Address: spurviance@uswatercorp. | .net | | | |
| 3. Water Treatment Plant In | | | | | |
| Plant Name: WTP | | | | Plant Talanka | Number |
| Plant Address: 11927 N | Elloweth Towns | City | Dunnellon | Plant Telephor State: FL | |
| Type of water treated by | | | | State: FL | Zip Code: 34433 |
| | [] | Purchased Finished Water | r | | |
| | y Operating Capacity of Plant, gallons | | | | |
| · ··· | ection 62-699.310(4), F.A.C.): V | | lass (per subsection (| ************************************** | |
| Licensed Operators: | Name: | License Class | | Day(s)/Shift(s) V | Worked |
| Lead/Chief Operators: | Angela Covell | В | 23535 | | |
| Other Operators: | Jessie Jose Hinojosa | С | 28938 | | |
| | | | | | |
| Particular Tills | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| II. Certification by Lead Ch | ief Operator | | | | CALL DE LA CALCO |
| I the undersigned water trea | tment plant operator licensed in Florid | la, am the lead/chief operator | of the water treatme | nt plant identified i | n Part 1 of this report. I certify that the |
| | | | | | t chemicals used at this plant conform to NS |
| International Standard 60 o | r other applicable standard referenced | in subsection 62-555.320(3), I | A.C. I also certify t | hat the following ac | dditional operations records for this plant we |
| | | | | | nicals used and chemical feed rate, and (2) it |
| | | | | | the PWS owner so that the PWS owner car |
| | opies of this report, at a convenient loc | | • | | |
| Angela Cavell | 8/7/2024 | Angela Covell | | | B 23535 |
| Signature and Date | | Printed or Typed Nat | me | | License Number |
| DEP Form 62-555 900(300) | | Zimina Wajped Hu | | | A TABAANNA |
| I WILL VA-000 3/10/0/0/ | | | | | |

PWS Identification Number:

6090523

4,282

5,033

Ellsworth Point Sub

Average Maximum WTP

III. Daily Data for the Month Year of: July 2024

Means of Achieving Four-Log Virus Inactivation/Removal *

Free Chlorine

Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)
Type of Disinfectant Residual Maintained in Distribution System

Combined Chloring (Chlorennings)

| | | | | stribution System: | | Free Chlorine | | | | | | | | |
|------------|---|----------------|--|--|---|--|--|----------|---------------------------|---------------------------------------|---|---|--|--|
| | | | | CT Calculations, or UV Dose, to Demonstrate Four-Log Vrus Inactivation, if Applicable* | | | | | | | | | | 1000 |
| | Days Plant | | - | | | CT Calc | ulations | 1 | | | | UV Dose | | Emergency or Abnorma |
| Day of the | Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Firished Water Produced, 201 | Peak Flow Rate, and | Lowest Residual Dusafectant Concentration (C) Before or at First Customer During Peak Flow, mg L | Disinfectant Connect Time (F) at C Measurement Point Dising Peak Flow, manutes | Lowest CT Provided Before or at First Customer During Peak Flow, | Temp of | H of Water, of Applicable | Minimum CT Required, mg- min/L- | Lowest Operating UV Dose mW- sec/cm ² | Minimum UV Dose Required. mW-see/cm² | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mgL | Operating Conditions; Repair of Maintenance Work that Involves Taking Water System Components Out of Operation |
| 1 | X | 24 | 3,450 | | 1.45 | | | | | | | | 0.98 | |
| 2 | | 24 | 3,450 | | | | | | | | | | | |
| 3 | X | 24 | 4,450 | | 1.19 | | | | | | | | 0.95 | |
| 4 | | 24 | 4.450 | | | | | | | | | | | |
| 5 | X | 24 | 3,933 | | 1.50 | | | | | | | | 1.00 | |
| 6 | | 94 | 3,933 | | | | | } | | | | | | |
| 7 | | 24 | 3,933 | | | | | | | | | | | |
| 8 | X | 24 | 3,350 | | 1.34 | | | | | | | | 1.19 | |
| 9 | | 24 | 3,350 | | | | | | | | | | | |
| 10 | X | 24 | 4,150 | | 1.10 | and the same of th | | | | | | | 0.91 | |
| 11 | | 24 | 4,150 | | | | | | | | | | | |
| 12 | X | 24 | 4,300 | | 1.41 | | | | | | | | 1.26 | |
| 13 | | 24 | 4,300 | | | | | | | | | | | |
| 14 | | 24 | 4,300 | | | | | | | | | | | |
| 15 | X | 24 | 3,900 | | 0.78 | | | | | | | | 0.66 | |
| 16 | | 24 | 3,900 | | | | | | | | | | | |
| 17 | X | 24 | 4,250 | | 1.58 | | | | | | | | 1.32 | |
| 18 | | 24 | 4,250 | | | | | | | | | | | |
| 19 | X | 24 | 5.033 | | 1.50 | | | | | | | | 1.36 | |
| _20 | | 24 | 5.033 | | | | | | | | | | | |
| 21 | | 24 | 5,033 | | | | | | | | | | | |
| 22 | X | 24 | 4,700 | | 1.46 | | | <u> </u> | | | | | 1.11 | |
| 23 | | 24 | 4,700 | | | | | | | | | | | |
| 24 | X | 24 | 4,350 | | 1.31 | | | | | | | | 1.18 | |
| 25 | | 24 | 4,350 | | | - | | | | | | | | |
| 26 | X | 24 | 4,833 | | 1.40 | | | | | | | | 1.26 | |
| 27 | | 24 | 4,833 | | | | | | | | | | | |
| 28 | | 24 | 4.833 | | | | | | | | | | | |
| 29 | X | 24 | 4 250 | | 1.15 | | | | | | | | 0.98 | |
| 30 | | 24 | 4.250 | | | | | | | | | | | |
| 31 | X | 24 | 4.750 | | 1.52 | | | | | | | | 1.39 | |
| Total | | | 132,747 | | | | | | | | | | | |



$MONTHLY\ OPERATION\ REPORT\ FOR\ PWS_{S}\ TREATING\ RAW\ GROUND\ WATER\ OR\ PURCHASED\ FINISHED\ WATER$

See Page 4 for instructions

Effective August 28, 2003

| oce rage 4 for moduletions | | | | | | |
|------------------------------|--|----------------------------|--------------------------|-----------------------|----------------------------|---------------------|
| I. General Information for t | | 2024 | | | | |
| A. Public Water System (PW | | | | | | |
| | h Point Sub | | | PWS Ider | ntification Number: | 6090523 |
| | nity [X] NonTransitent | [] No | nCommunity [] | Conse | ecutive | |
| Number of Service Con- | nections at End of Month: 25 | То | al Population Served a | t End of Month: 8 | 34 | |
| PWS Owner: Citrus | Waterworks Inc | | | | | |
| | on Purviance | | tact Person's Title: | Utility Manager | | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Boulev | vard City | New Port Richey | State: FL | Zip Code: 34652 | |
| Contact Person's Teleph | one Number: 866-753-8292 | Con | tact Person's Fax Numl | per: 727-848-7701 | | |
| Contact Person's Email | Address: spurviance@uswatercor | p.net | | | | |
| B. Water Treatment Plant In | formation | | | | | |
| Plant Name: WTP | | | | Plant Telephor | ne Number: | |
| Plant Address: 11927 N | . Ellsworth Terrace | City | Dunnellon | State: FL | Zip Code: 34433 | |
| Type of water treated by | Plant: [X] Raw Ground | Purchased Finished W | | - | | |
| Permitted Maximum Da | y Operating Capacity of Plant, gallon | | | | | |
| | ection 62-699.310(4), F.A.C.): V | | t Class (per subsection | 62-699.310(4), F.A | C.): D | |
| Licensed Operators: | Name: | License Cla | | Day(s)/Shift(s) V | | |
| Lead/Chief Operators: | Angela Covell | В | 23535 | Die on ormitto | Tornet | |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | | |
| | , | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | - |
| | | | | | | |
| H. Certification by Lead Ch | ief Operator | | | Barbar Carry | | |
| | tment plant operator licensed in Flor | ide out the lead/abinforce | | | n Dont I of this man out I | nontifications also |
| | report is true and accurate to the be | | | | | |
| | r other applicable standard reference | | | | | |
| | ensed operator staffed or visited this | | | | | |
| | ment process performance records. | | | | | |
| | opies of this report, at a convenient lo | | viae inche additional of | octualone, records to | dic I (11) Owner 80 tike. | the ray owner can |
| ,, | | | | | | |
| Angela Coxell | 9/5/2024 | Angela Covell | | | B 2353 | 35 |
| Signature and Date | | Printed or Typed | Name | | License N | umber |
| DEP Form 62-555 900(300) | | | | | | |

Page 1

PWS Identification Number:

6090523

Ellsworth Point Sub

WTP

III. Daily Data for the Month Year of: August 2024
Means of Achieving Four-Log Virus Inactivation/Removal *

Eroo Chlorina

Combined Chlorina (Chloramines)

| JltraViol | et Radiatio | m | | ther (Discribe) | Free Chlorin | | orine Dioxide | | | | | Chloramines) | | |
|---------------------|---|----------------|--|---------------------|---|---------------------------------|------------------------------|----------------|-----------------------------|-------------------------------------|---|--------------|--|---|
| pe of I | Disinfectan | t Residual N | Maintained in Di | stribution System: | | X Free Chlorine | Combine | d Chlorir | ne (Chloramines) | | Chlori | ne Dioxide | | |
| | 5-27 | | | | | | | | | | | | | |
| | | | | | | CT Calculations or t | JV Dose, to Demonstrate I of | ur-Log Vinus L | nactivation, if Applicable* | | | UV Dase | | |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced. | Peak Flow Rate, god | Lowest Residual Disinfectant Concentration (C) Before or a First Customer During Peak Flow, that L | t Disinfectant Contact Time (T. | Lowest CT Provided | Temp of | pH of Water, if Applicable | Minimum CT Required, mg- mm/L | Lowest Operating UV Dose, mW- sec/cm ² | | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, may L | Emergency or Abnorms Operating Conditions; Rej or Maintenance Work th Involves Taking Water System Components Out Operation |
| 1 | | 24 | 4,750 | | | | | | | | | | | |
| 2 | X | 24 | 5,067 | | 1.42 | | | | | | | | 1.11 | |
| 3 | | 24 | 5,067 | | | | | | | | | | | |
| 4 | | 24 | 5,067 | | | | | | | | | | | |
| 5 | X | 24 | 4,650 | | 1.65 | | | | | | | | 1.41 | |
| 6 | | 24 | 4.650 | | | | | | | | | | | |
| 7 | X | 24 | 4,700 | | 1.43 | | | | | | | | 1.10 | |
| 8 | | 24 | 4,700 | | | | | | | | | | | |
| 9 | X | 24 | 5,100 | | 1.25 | | | | | | | | 1.03 | |
| 10 | | 24 | 5,100 | | | | | | | | | | | |
| 11 | | 24 | 5,100 | | | | | | | Í | 1 | | | |
| 12 | X | 24 | 5,300 | | 1.55 | | | | | | | | 1.36 | |
| 13 | | 24 | 5,300 | | | | | | | j | 1 | | | |
| 14 | X | 24 | 4,900 | | 1.20 | | | | | 1 | | | 1.02 | |
| 15 | | 24 | 4,900 | | | | | | | | Ï | | | |
| 16 | X | 24 | 6,133 | | 1.27 | | | | | | | | 1.10 | |
| 17 | | 24 | 6,133 | | | | | | | | Ī | | | |
| 18 | | 24 | 6,133 | | | | | | | | İ | | | |
| 19 | X | 24 | 4,900 | | 1.20 | | | | | | | | 1.03 | |
| 20 | | 24 | 4,900 | | | | | | | | | | | |
| 21 | X | 24 | 5,200 | | 1.15 | | | | | | | | 0.96 | |
| 22 | | 24 | 5,200 | | | | | | | | | | | |
| 23 | X | 24 | 5,433 | | 1.11 | | | | | | | Ì | 0.89 | |
| 24 | | 24 | 5,433 | | | | | 1 | | | | | | |
| 25 | | 24 | 5,433 | | Î | | | Ī | Ī | | | | | |
| 26 | X | 24 | 5,450 | | 1.48 | | | 1 | | İ | | | 1.32 | |
| 27 | 1 | 24 | 5,450 | | | | | Ī | | | İ | | ĺ | |
| 28 | l x | 24 | 5.550 | | 1.52 | | | | | | | | 1.41 | |
| 29 | | 24 | 5,550 | | | i | Î | 1 | | Ì | Ì | | 1 | |
| 30 | X | 24 | 6,233 | | 1.46 | | Ì | 1 | 1 | | İ | İ | 1.29 | |
| | 1 | | . OFEIGO | | | 1 | 1 | 1 | 1 | | - | 1 | 1 | |

6,233 163,715 Total 5,281 Average Maximum 6,233

24

31



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

See Page 4 for instructions

| I. General Information for the A. Public Water System (PWS) | | | | | | |
|--|--|----------------------|-----------------------|-----------------------------|---|----------|
| | Point Sub | | | PWS Ident | tification Number: 6090523 | |
| PWS Type: Commun | | NonCo | mmunity [] | Consec | | \neg |
| | ections at End of Month: 25 | | opulation Served at 1 | | | |
| PWS Owner: Citrus V | | Total I | opulation beived at i | LING OF INTORNER. 04 | <u> </u> | |
| AND THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS | n Purviance | Contact 1 | Person's Title: U | tility Manager | | |
| | Address: 4939 Cross Bayou Boulevard | | | State: FL | Zip Code: 34652 | |
| | one Number: 866-753-8292 | | Person's Fax Numbe | | Zip Code. 01002 | |
| Contact Person's Email A | | | | | | |
| B. Water Treatment Plant Info | | | | | | _ |
| Plant Name: WTP | ATTRILOTI | | | Plant Talanhan | Number | |
| Plant Address: 11927 N. | Elleworth Torrage | City, I | Dunnellon | Plant Telephon State: FL | Zip Code: 34433 | - |
| Type of water treated by | | ased Finished Water | | State: FL | Zip Code: 34433 | - |
| | () | | | | | |
| | Operating Capacity of Plant, gallons per day: | | | 2000 010/41 72 4 | 0) P | \dashv |
| | ection 62-699.310(4), F.A.C.): V | | ss (per subsection 6) | | | |
| Licensed Operators: | Name: | License Class | License Number | Day(s)/Shift(s) W | Vorked | |
| Lead/Chief Operators: | Angela Covell | В | 23535 | | | _ |
| Other Operators: | Jessie Jose Hinojosa | С | 28938 | | | _ |
| | | | | | | _ |
| | | - | | | _ | _ |
| | | | | | | |
| | | | | | | |
| | | _ | | | | |
| | | | | | | |
| H. C. see see a last a LOUI | 50 | | | | | |
| II. Certification by Lead/Chi | | | | | | |
| | ment plant operator licensed in Florida, am th | | | | | |
| | report is true and accurate to the best of my ki | | | | | |
| | other applicable standard referenced in subse | | | | | 2 |
| | nsed operator staffed or visited this plant during | | | | | |
| | ment process performance records. Further moves of this report, at a convenient location for | | mese additional ope | rations records to t | the rws owner so that the rws owner can | |
| ream them, together with co | pies of this report, at a convenient location for | uie iast ien years. | | | | |
| Angela Coxell | | Angela Covell | | | B 23535 | |
| Signature and Date | | Printed or Typed Nam | ne | | License Number | |
| DIN 13 CO 555 000 (000) | | | | | | |

DEP Form 62-555 900(300) Effective August 28, 2003

| ı | DYX/C | Identi | fication | . Man | show |
|---|-------|--------|----------|--------|------|
| ľ | CYV | Idenn | ncano | n ivun | mer: |

Average

Maximum

6090523

6,258 10,400

WTP Ellsworth Point Sub

HL. Daily Data for the Month Year of: September 2024
Means of Achieving Four-Log Virus Inactivation/Removal *

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

| | | | | , |
|-----------------------|---|-----------------|---------------------------------|------------------|
| UltraViolet Radiation | on Other (Discribe) | | | |
| Type of Disinfectar | t Residual Maintained in Distribution System: | X Free Chlorine | Combined Chlorine (Chloramines) | Chlorine Dioxide |
| | | | | |

| 15 3 | 1-67 | | 11-9 | | CT Calculations, or UV Dose, to Demonstrate Four-Log Virus inactivation, if Applicable* UV Dose UV Dose | | | | | | | | | |
|---------------------|---|-----------------------------|--|---------------------|--|-------------------------------|--------------------|---------|----------------------------|-------------------------------------|---|---|--|--|
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in Operation | Net Quantity of Faished Water Produced and | Peak Flow Rate, and | Lowest Residual Dismiscrant Concentration (C) Before or at First Customer During Peak Flow, mgd L | Disinfectant Contact Time (T) | Lowest CT Provided | Temp of | pH of Water, if Applicable | Manman CT Required, mg- min/L | Lowest Operating UV Dose, mW- sec/cm ² | UV Dose Minimum UV Dose Required, mW-sec/cm² | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mark. | Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation |
| 1 | | 24 | 6,233 | | | | | |) | | | | | |
| 2 | X | 24 | 5,300 | | 1.18 | | | | | | | | 0.95 | |
| 3 | | 24 | 5,300 | | | | | | | | | | | |
| 4 | X | 24 | 6,550 | | 1.32 | | | | | | | | 0.91 | |
| 5 | | 24 | 6,550 | | | | | | | | | | | |
| 6 | X | 24 | 5,933 | 1 | 1.20 | | | | | | | | 1.11 | |
| 7 | | 24 | 5,933 | | | | | | | | | | | |
| 8 | | 24 | 5,933 | | | | | | | | | | | |
| 9 | X | 24 | 5,650 | | 1.28 | | | 1 | | | | | 1.22 | |
| 10 | | 24 | 5,650 | | | | | | | | | | | |
| 11 | X | 24 | 5,850 | | 0.95 | | | | | | | | 0.82 | |
| 12 | | 24 | 5.850 | | | | | | | | | | | |
| 13 | X | 24 | 6.967 | | 1.20 | | | | | | | | 0.49 | |
| 14 | | 24 | 6.967 | | | | | | |] | | | | |
| 15 | | 24 | 6,967 | | | | | | | | | | | |
| 16 | X | 24 | 5,900 | | 1.26 | | | | | | | | 1.18 | |
| 17 | | 24 | 5,900 | | | | | | | | | | | |
| 18 | X | 24 | 6.400 | | 1.18 | | | | | | | | 1.09 | |
| 19 | | 24 | 6,400 | | | | | | | | | | | |
| 20 | X | 24 | 7.033 | | 1.23 | | | | | | | | 1.11 | |
| 21 | | 24 | 7,033 | | | | ! | |] | | | | | |
| 22 | | 24 | 7,033 | | | | | | | | | | | |
| 23 | X | 24 | 6,700 | | 1.28 | | | | İ | | | | 1.16 | |
| 24 | | 24 | 6,700 | | | | | - | | | | | | |
| 25 | X | 24 | 4,350 | | 1.34 | | | | 1 | | | | 1.21 | |
| 26 | | 24 | 4,350 | | | | 1 | 1 | 1 | | | | | |
| 27 | | 24 | 2,900 | | | | | | | | | | | |
| 28 | X | 24 | 7,500 | | 1.46 | | | | | | | | 1.37 | |
| 29 | | 24 | 7,500 | | | | | 1 | | | | | | |
| 30 | X | 24 | 10,400 | | 1.22 | | | 1 | | | | | 1.11 | |
| 31 | | | | | | | | | | | 1 | | | |
| Total | | | 187,732 | | | | | | | | | | | |



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

See Page 4 for instructions

| I. General Information for the | | 24 | | | |
|--|--|----------------------------|---------------------------------------|---------------------|---|
| A. Public Water System (PWS | | | | | |
| The state of the s | Point Sub | | | PWS Iden | tification Number: 6090523 |
| PWS Type: Commun | | NonCom | | Consec | |
| Number of Service Conn | ections at End of Month: 25 | Total Pop | oulation Served at I | End of Month: 84 | 4 |
| And the state of t | Vaterworks Inc | | | | |
| Contact Person: Sharo | | Contact Pe | erson's Title: U | tility Manager | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Boulevard | City: New | Port Richey | State: FL | Zip Code: 34652 |
| Contact Person's Telepho | one Number: 866-753-8292 | Contact Pe | erson's Fax Number | r: 727-848-7701 | |
| Contact Person's Email A | ddress: spurviance@uswatercorp.ne | et | | | |
| B. Water Treatment Plant Inf | ormation | | | | |
| Plant Name: WTP | | | | Plant Telephon | e Number: |
| Plant Address: 11927 N. | Ellsworth Terrace | City: Du | innellon | State: FL | Zip Code: 34433 |
| Type of water treated by | Plant: [X] Raw Ground [] I | Purchased Finished Water | | | |
| Permitted Maximum Day | y Operating Capacity of Plant, gallons pe | | | | |
| | ection 62-699.310(4), F.A.C.): V | | s (per subsection 62 | 2-699-310(4). F.A.: | C): D |
| Licensed Operators: | Name: | | License Number | | |
| Lead/Chief Operators: | Angela Covell | B | 23535 | Da) (b)/ Dilite(b) | THE REPORT OF THE PARTY OF THE |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | |
| | | | | | |
| | | | | | |
| | N The state of the | | | · | |
| | THE PARTY OF THE P | | | | |
| The state of the s | | | | | |
| | | | | | |
| | | | | | |
| II. Certification by Lead Chi | ef Operator | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | | Dot 1 faliana A I wife day day |
| | ment plant operator licensed in Florida, | | | | chemicals used at this plant conform to NSF |
| | | | | | ditional operations records for this plant were |
| | | | | | nicals used and chemical feed rate, and (2) if |
| | | | | | the PWS owner so that the PWS owner can |
| retain them, together with co | pies of this report, at a convenient locati | on for the last ten years | iese additional ope | ations records to | the 1 vvb owner so that the 1 vvb owner can |
| - Tuni Grown, togother Will Go | | on for the fast ton yours. | | | |
| Angela Coxell | 11/4/2024 | Angela Covell | | | B 23535 |
| Signature and Date | | Printed or Typed Name | | _ | License Number |
| DED E (0.555,000/000) | | | | | |

DEP Form 62-555 900(300) Effective August 28, 2003 PWS Identification Number:

6090523

11,090

30,467

Ellsworth Point Sub

Average

Maximum

WTP

| Ziki Weldi Z Chie Gui | **** |
|--|--------------|
| III. Daily Data Use the Month/Year of: | October 2024 |

Means of Achieving Four-Log Virus Inactivation/Removal *

Free Chlorine Chlorine Dioxide Ozone

Combined Chlorine (Chloramines)

UltraViolet Radiation

| | | | | | | CT Calminda | D/ Dago to Demonstrate D | e Lau Mera Y | andimetrical if Academic I. de | | | | | |
|---------------------|---|----------------|---|--------------------|---|--|--|---------------------|--------------------------------|------------------------------------|--|--|--|---|
| | | | | | | CT Calculations, or C | IV Dose to Demonstrate Fou | r-Log Virus II | activation, if Applicable* | | | UV Dose | | Parameter de Abra mai |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced, =1 | Peak Flow Rate pod | Lowest Residual Disinfectant Concentration (C) Before or at First Costomer During Peak Flow in J | Disinfectant Contact Time (T) at C Measurement Point Day Peak Flow minutes | Lowest CT Provided Before or at First Customer During Peak Flow, | Temp of Water °C | pH of Water, if Applicable | Manmam C1 Required, mg- mm/L | Lowest Operating UV Dose, mW- sec/cm ² | Minimum UV Dose Required, mW-sec/cm ² | Lowest Residual Distribution Concentration at Remote Point in Distribution System, in A. | Emergency or Abnormal Operating Conditions; Reps or Maintenance Work tha Involves Taking Water System Components Out of Operation |
| 1 | | 24 | 10,400 | | | | | | | | | | | |
| 2 | X | 24 | 12,850 | | 1.65 | | | | | | | | 1.42 | |
| 3 | | 24 | 12,850 | | | | | | | | | | | |
| 4 | X | 24 | 19,600 | | 1.64 | | | | | | | | 1.50 | |
| 5 | | 24 | 19,600 | | | | | | | | | | | |
| 6 | | 24 | 19.600 | | | | | | | | | | | |
| 7 | X | 24 | 20,700 | | 1.71 | | | | | | | | 1.68 | |
| 8 | | 24 | 20,700 | | | | | | | | | | | |
| 9 | X | 24 | 28,250 | | 1.49 | | | | | | | | 1.26 | , |
| 10 | | 24 | 28,250 | | | | | | | | | | | |
| 11 | X | 24 | 30,467 | | 1.52 | | | | | | | | 1.41 | |
| 12 | | 24 | 30,467 | | | | | | | | | | | |
| 13 | | 24 | 30,467 | | | | | | | | | | | |
| 14 | X | 24 | 4,300 | | 1.23 | | | | | | | | 1.11 | |
| 15 | | 24 | 4,300 | | | | | | | | | | | |
| 16 | X | 24 | 2,850 | | 1.21 | | | | | | | | 1.12 | |
| 17 | | 24 | 2.850 | | | | | | | | | | | |
| 18 | X | 24 | 3,700 | | 1.15 | | | | | | | | 0.96 | |
| 19 | | 24 | 3,700 | | | | | | | | | | | |
| 20 | | 24 | 3,700 | | | | | | | | | | | |
| 21 | X | 24 | 3,550 | | 1.36 | | | | | | | | 1.21 | |
| 22 | | 24 | 3,550 | | | | | | | | | | | |
| 23 | X | 24 | 3,300 | | 1.28 | | | | | | | | 1.17 | |
| 24 | | 24 | 3.300 | | | | | | | | | | | |
| 25 | X | 24 | 3 200 | | 1.26 | | | | | | | | 1.13 | |
| 26 | | 24 | 3.200 | | | | | | | | | | | |
| 27 | | 24 | 3,200 | | | | | | | | | | | |
| 28 | X | 24 | 3,050 | | 1.24 | 1 | | | | | | | 1.16 | |
| 29 | | 24 | 3,050 | | | | | | | | | | | |
| 30 | X | 24 | 2.400 | | 1.23 | | | | | | | | 1.09 | |
| 31 | | 24 | 2,400 | | | | | | | | | | | |
| | | | 343,801 | | | | | | | | | | | |



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

See Page 4 for instructions

| I. General Information for th | | 024 | | | | |
|-------------------------------|--|-------------------------------|----------------------|---------------------|---------------------|---------------------------|
| A. Public Water System (PWS | | | | | | |
| PWS Name: Ellsworth | Point Sub | | | PWS Iden | tification Number: | 6090523 |
| PWS Type: Commun | | NonCon | nmunity [] | Conse | cutive | |
| Number of Service Conn | ections at End of Month: 25 | Total Po | pulation Served at I | End of Month: 84 | 1 | |
| PWS Owner: Citrus V | Vaterworks Inc | | | | | |
| Contact Person: Sharo | n Purviance | Contact P | erson's Title: U | tility Manager | | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Boulevard | City: Nev | v Port Richey | State: FL | Zip Code: 3/ | 1652 |
| Contact Person's Telepho | one Number: 866-753-8292 | Contact P | erson's Fax Numbe | r: 727-848-7701 | | |
| Contact Person's Email A | .ddress: spurviance@uswatercorp.net | | | | | |
| B. Water Treatment Plant Inf | ormation | | | | | |
| Plant Name: WTP | | | | Plant Telephon | e Number: | |
| Plant Address: 11927 N. | Ellsworth Terrace | City: D | unnellon | State: FL | Zip Code: 8 | 34433 |
| Type of water treated by | Plant: [X] Raw Ground [] Po | urchased Finished Water | | | | |
| Permitted Maximum Day | Operating Capacity of Plant, gallons per | | | | | |
| | ection 62-699.310(4), F.A.C.): V | | s (per subsection 62 | 2-699.310(4), F.A. | C.): D | |
| Licensed Operators: | Name: | License Class | License Number | | | |
| Lead/Chief Operators: | Angela Covell | В | 23535 | | | |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | | |
| | the province of the contract o | | | | | |
| | | | | | | |
| | | | | | | |
| | M. Existing the second of the | | | | | |
| | | | | | | |
| | | | · | | | |
| | | | | | | |
| II. Certification by Lead Chi | ef Operator | | | | 200 | |
| | ment plant operator licensed in Florida, a | m the lead/aliaf anomator of | tha restauteacturant | plant identified in | Don't 1 of this war | ant. I contific that the |
| information provided in this | report is true and accurate to the best of r | on the lead/chief operator of | me water treatment | piani idenuned ii | abamiada nastat | this plant conform to NSE |
| | other applicable standard referenced in s | | | | | |
| | nsed operator staffed or visited this plant | | | | | |
| | ment process performance records. Furth | | | | | |
| | pies of this report, at a convenient locatio | | nese additional ope | anons records to | die i wo owner se | time the 1 115 owner can |
| , 8 | | | _ | | | |
| Angela Cavell | 12/3/2024 | Angela Covell | | | В | 23535 |
| Signature and Date | | Printed or Typed Name | 2 | | Licer | ise Number |
| DED E 69 555 000(200) | | | | | | |

DEP Form 62-555 900(300) Effective August 28, 2003 PWS Identification Number:

6090523

3,350

5,000

Average Maximum

Ellsworth Point Sub

WTP

| H. D. J. Date for do. M. ad. W | N 1 0004 |
|--------------------------------|----------|

III Daily Data for the Month/Year of: November 2024 Means of Achieving Four-Log Virus Inactivation/Removal *

Free Chlorine Chlorine Dioxide Ozone

Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)

| | | | | | | CT Cakulatone or I | V Dose to Demonstrate For | tal on Vince In | nactivation if Annheable* | | | | | |
|------------------|---|----------------|--|---------------------|--|--|---|----------------------|----------------------------|------------------------------------|---------------------------------------|---------------------------|---|---|
| | | | | | | CT Calc | | 1-10) VIUS II | MELITARDIC IL PAPPIACAUL | | | UV Dose | | Emergency or Abnormal |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced, | Peak Flow Rate, and | Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow | Disinfectant Contact Time (T) at C Measurement Point Dama Peak Flow mannes | Lowest CT Provided Before or at First Customer During Peak Flow, nw-min/L | Temp of Water, °C | pH of Water, if Applicable | Minmum CT Required mg- min/L | Lowest Operating UV Dose, mW- scc/cm² | Minimum UV Dose Required, | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L | Operating Conditions, Reps or Maintenauce Work that Involves Taking Water |
| 1 | X | 24 | 3,050 | | 0.90 | | | | | | | | 0.75 | |
| 2 | | 24 | 3,050 | | | | | | | | | | | |
| 3 | X | 24 | 2,900 | | 1.15 | | | | | | | | 0.91 | |
| 4 | | 24 | 2,900 | | | | | | | | | | | |
| 5 | | 24 | 2,900 | | | | | | | | | | | |
| 6 | X | 24 | 3.200 | | 0.91 | | | | | | | | 0.76 | |
| 7 | | 24 | 3.200 | | | | | | | | | | | |
| 8 | X | 24 | 2,867 | | 1.52 | | | | | | | | 1.29 | |
| _ 9 | 1 | 24 | 2,867 | | | | | | | | | | | |
| 10 | | 24 | 2,867 | | | | | | | | | | | |
| 11 | X | 24 | 2,850 | | 1.34 | | | | | | | | 1.17 | |
| 12 | | 24 | 2,850 | | | | | | | | | | | |
| 13 | X | 24 | 3,000 | | 1.47 | | | | | | | | 1.32 | |
| 14 | | 24 | 3,000 | | | | | | | | | | | |
| 15 | X | 24 | 3,433 | | 1.41 | | | | | | | | 1.26 | |
| 16 | | 24 | 3,433 | | | | | | | | | | | |
| 17 | | 24 | 3,433 | | | | 7 | | | | | | | |
| 18 | X | 24 | 3,500 | | 1.31 | | | | | | | | 1.17 | |
| 19 | | 24 | 3,500 | | | | | | | | | | | |
| 20 | X | 24 | 3,750 | | 2.03 | | | | | | | | 1.86 | |
| 21 | | 24 | 3,750 | | | | | | | | | | | |
| 22 | X | 24 | 5,000 | | 1.82 | | | | | | | | 1.71 | |
| 23 | | 24 | 5,000 | | | | | | | | | | | |
| 24 | | 24 | 5 000 | | | | | | | | ļ | | | |
| 25 | X | 24 | 3,100 | | 1.68 | | | | | | | | 1.49 | |
| 26 | | 24 | 3,100 | | | | | | | 1 | | | | |
| 27 | X | 24 | 3,450 | | 1.77 | | | | | | | | 1.49 | |
| 28 | | 24 | 3,450 | | | | | | | | | | | |
| 29 | X | 24 | 3,050 | | 1.64 | | | | | | | | 1.43 | |
| 30 | | 24 | 3,050 | | | | | | | Ì | | | | |
| 31 | | | | | | | | | | | | | | |
| Total | | | 100,500 | | | | | | | | | | | |



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

See Page 4 for instructions

| I. General Information for th | | 4 | | | |
|---|---|---|---|---|--|
| A. Public Water System (PWS | | | | | |
| PWS Name: Ellsworth | Point Sub | | | PWS Iden | tification Number: 6090523 |
| PWS Type: Commun | | NonCor | nmunity [] | Consec | cutive |
| Number of Service Conne | ections at End of Month: 25 | Total Po | opulation Served at 1 | End of Month: 84 | 1. |
| PWS Owner: Citrus W | /aterworks Inc | | | | |
| Contact Person: Sharon | n Purviance | Contact I | Person's Title: U | tility Manager | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Boulevard | City: Ne | | State: FL | Zip Code: 34652 |
| Contact Person's Telepho | one Number: 866-753-8292 | Contact 1 | Person's Fax Numbe | r: 727-848-7701 | |
| Contact Person's Email A | ddress: spurviance@uswatercorp.net | , | | | |
| B. Water Treatment Plant Info | | | | | |
| Plant Name: WTP | | | | Plant Telephon | e Number: |
| Plant Address: 11927 N. | Ellsworth Terrace | City: I | Ounnellon | State: FL | Zip Code: 34433 |
| Type of water treated by I | Plant: [X] Raw Ground Pure | chased Finished Water | | | |
| Permitted Maximum Day | Operating Capacity of Plant, gallons per da | | | | · |
| Plant Category (per subse | ction 62-699.310(4), F.A.C.): V | Plant Cla | ss (per subsection 62 | 2-699.310(4), F.A. | C.): D |
| Licensed Operators: | Name: | License Class | License Number | | |
| Lead/Chief Operators: | Angela Covell | В | 23535 | | |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | 1 | |
| | | | | | |
| II. Certification by Lead Chic | d'Opporator | | | | |
| | | | | | |
| information provided in this international Standard 60 or | other applicable standard referenced in sub | knowledge and belief. I desection 62-555.320(3), F. | certify that all drinking. A.C. I also certify the | ng water treatment at the following ad | chemicals used at this plant conform to NSF ditional operations records for this plant were nicals used and chemical feed rate, and (2) if |
| | | | | | the PWS owner so that the PWS owner can |
| | pies of this report, at a convenient location f | | arese nathronia ope | THE TOURS IN THE TENT | |
| | | or the mocton yours. | | | |
| Angela Coxell | 1/6/2025 | Angela Covell | | | B 23535 |
| Signature and Date | | Printed or Typed Nam | e | | License Number |
| DUDE GO SES GOOGOOD | | | | | |

DEP Form 62-555 900(300) Effective August 28, 2003

| | 7. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorol | vdrin, and Iron or Manganese Sequestrant for the Year: |
|---|---|---|
| | | |
| F | A. Is any polymer containing the monomer acrylamide used at the water treatment plant? [X] | No [] Yes, and the polymer dose and the acrylamide level in the polymer are as fol |
| | Polymer Dose, ppm = Acryla | nide Level, %† |
| F | B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plantition polymer are as follows: | [X] No [] Yes and the polymer dose and the epichlorohydrin level in the |
| | Polymer Dose, ppm = Epichle | orohydrin Level, %† - |
| C | C. Is any iron or manganese sequestrant used at the water treatment plant? [X] No [] Yes | and the type of sequestrant, sequestrant dose, etc., are as follows: |
| | Type of Sequestrant (polyphosphate or sodium silicate): | |
| | Sequestrant Dose, mg/L of phosphate as PO4 or mg/L of silicate as SiO2 = | |
| | If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as S | iO2 = |

Plant Name: Ellsworth Point Sub

PWS Identification Number: 6090523

^{*}Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.
†Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

| ~~~~ | | * ** | | | | |
|------|-----|--------|---------|-----|----|-----|
| PWS | der | ststu. | "AFRANT | . V | nm | her |
| | | | | | | |

6090523

Ellsworth Point Sub

31

Average Maximum

Total

24

3.100

4,300

3,503

WTP

III. Daily Data for the Month Year of Dece Means of Achieving Four-Log Virus Inactivation/Removal *

December 2024

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

Other (Discribe) UltraViolet Radiation Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* UV Dose CT Calculations Days Plant Operating Conditions; Repair Staffed or Lowest CT Provided Lowest or Maintenance Work that Lowest Residual Disinfectant visited by Concentration (C) Before or at Disinfectant Contact Time (I) Before or at First Customer Operating UV Net Quantity of Involves Taking Water Minimum CT Lowest Residual Disinfectant Day of the Hours Plant in During Peak Flow, Dose mW-Minimum UV Dose Required, Concentration at Remote Point System Components Out of Emished Water at C Measurement Point Temp of First Customer During Peak Required, mg-Operation Produced ==1 Peak Flow Rate and Flow mg L During Peak Flow minutes ng-mm/L Water, °C pH of Water, if Applicable mW-sec/cm² n Distribution System, 10gl. Operation X 3,233 1.48 0.95 2 24 3,233 3 24 3,233 4 X 24 3,300 1.55 1.32 5 24 3,300 6 24 4.033 1.69 1.57 7 24 4,033 8 24 4,033 9 X 24 3,850 1.27 1.10 10 24 3,850 11 X 24 4,300 1.51 1.19 12 24 4,300 13 X 4.033 24 1.44 1.21 4,033 14 24 15 24 4.033 16 X 24 2,550 1.34 1.17 17 24 2,550 18 X 24 3,250 1.29 1.07 19 24 3,250 20 24 3,633 1.44 1.19 21 24 3,633 22 24 3,633 23 X 24 2,500 1.33 1.32 2424 2,500 25 \mathbf{X} 3.750 1.26 24 1.38 26 24 3,750 27 X 24 3,533 1.29 1.02 28 24 3,533 29 24 3.533 30 24 3,100 1.241.41

| PUBLIC WATER SYSTEM INFORMATION (to be d | completed by sampler – please type or print legib | y) |
|--|--|---|
| System Name: Backwater Heights | | PWS I.D. #: 609-0099 |
| System Type (check one): ©Community Address: -5335 West Blade Lane W Band | Nontransient Noncommunity | Transient Noncommunity |
| City: <u>Dunnellon</u> | ZIP Code: 344 | 33 |
| Phone # Fax #: | E-Mail Address: | |
| SAMPLE INFORMATION (to be completed by sample Sample Number: 4G2403604001 s | 4 70 1 | Sample Time: 1755 AM PM Circle One |
| Sample Location (be specific): Backwater | Heights well POE | Location Code: |
| Disinfectant Residual (Required when reporting results for | trihalomethanes and haloacetic acids):2,28 mg/ | L Field pH: 7.5/24,6°C |
| Sample Type (Check Only One) | Reason(s) for Sam | ple (Check all that apply) |
| Distribution | Routine Compliance with 62-550 | Replacement (of Invalidated Sample) |
| MEntry Point (to Distribution) | Confirmation of MCL Exceedance* | Special (not for compliance with 62-550) |
| ☐Plant Tap (not for compliance with 62-550) | Composite of Multiple Sites | Clearance (permitting) |
| ☐Raw (at well or intake) | ☐Other | |
| ☐Max Residence Time | Sampling Procedure Used or Other Comr | nents: |
| ☐Ave Residence Time | - 1 | |
| ☐Near First Customer | Primary's Secondary's | s / Vacis / Rods |
| | S 3 (3-530,300)6) requirements and astro And 31 U.X.L.13(J) for hit also white proposi- | rctio. 115ep 91-550,350(4) for requirements and |
| I, (Print Name) that the above public water system and sample collection | SAMPLER CERTIFICAT (Print a Information is complete and correct. | Title) |
| Signature: | Date: | 4/8/24 |
| Certified Operator #: <u>B2353S</u> Phone #: <u>(35</u> | 2) (051-14028 samp | oler's Fax #: |
| Samplara E mail: (A COVE) WOULD USWA | ter corn. not | |

LABORATORY CERTIFICATION INFORMATION to be completed by lab - please type or print legibly)

| Lab Name:Advance | ed Environmental Laboratories, | inc. Florida DOH Certi | fication #:E82001 | Certification Expiration Da | rte: 06/30/2024 |
|--------------------------|--|-------------------------------|--|---|---|
| | | | ATTACH CURRENT | OOH ANALYTE SHEET | |
| Address: 4965 SW | V 41st Blvd, Gainesville, FL 326 | 08 | Phone #: (352) 37 | 7-2349 | |
| Were any analyses | subcontracted Yes | No If yes, please pro | ovide DOH certification num | nber(s): <u>E84589,E82535,</u> E | 82574 |
| | | | ATTACH DOH ANALY | YTE SHEET FOR EACH SUB | CONTRACTED LAS |
| ANALYSIS INFORM | MATION (to be completed by lab) | Date Sample(s) Receiv | red: 04/09/2024 | <u> </u> | |
| PWS ID: (From Page | 1): 6090099 | Sample Number (From F | Page 1): <u>G2403604001</u> L | _ab Assigned Report # Or . | lob ID: <u>G2403604</u> |
| Group(s) Analyzed 8 | & Results attached for complian | ce with Chapter 62-550, f | F.A.C. (Check all that apply): | | |
| Inorganics | Synthetic Organics | Volatile Organics | Disinfection Byproducts | Radionuclides | Secondaries |
| All except Asbesto | s All 30 | ✓ Ali 21 | Trihalomethanes | Single Sample | ☐ All 14 |
| Partial | All Except Dioxin | Partial | Haloacetic Acids | Qtrly Composite* | ✓ Partial |
| ✓ Nitrate | Partial | | Chlorite | | |
| ✓ Nitrite | Dioxin Only | | Bromate | | |
| Asbestos | | LAB CERT | IFICATION | | |
| 1. | Madeline Lynch | | Project Manag | er . | , do HEREBY CERTIFY |
| " | (Print Name | · - | (Print Title) | 101 | , do tillied to cittii i |
| that all attached analyt | tical data are correct and unless no | ted meet all requirements of | ,, | aboratory Accreditation Confe | rence (NELAC). |
| Signature: | Madeline Lynck | | Date: | 05/13/2024 | ,, |
| possible enforceme | a valid and current Florida DOH lab ent against the public water system iological sample dates & locations | for failure to sample, and ma | urrent Analyte Sheet for the a ay result in notification of the I | ttached analysis results will re OOH Bureau of Laboratory Se | suit in rejection of the repor rvices. |
| | CONFIRMATION & NOTIFICA | TION IS REQUIRED WITHIN 24 | HRS FOR NITRATE OR NITRIT | E MCL EXCEEDANCES | |
| NON-DE | ETECTS ARE TO BE REPORTED AS | THE MDL WITH "U" QUALIFIEI | R. (Non-detects reported as "Bl | DL" or with a "<" are not acceptab | le.) |
| COMPLIANCE DET | ERMINATION(to be completed b | y DEP or DOH attach note | s as necessary) | | |
| Sample Collection & | Analysis Satisfactory: Yes | No | Replacement Sample or | Report Requested (circle or I | nighlight group(s) above) |
| Person Notified: | | Date Notified: | DEP/ | DOH Reviewing Official: | |
| Reporting Format 62-550. | | F | Page: 6 of 14 | | |

*Results must be reported with appropriate qualifiers in accordance with Florida Administration Code Rule 62-160, Table 1. Results qualified with A. F. H. N. O. T. Z. ?, *, are unacceptable for compliance with 62-550. Results qualified with a J. Q. R. or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

INORGANIC CONTAMINANTS 62-550.310(1)

Report Number / Job ID: G2403604001

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|----------------|-------|-------|--------------------|------------|----------------------|----------|------------------|------------------|----------------------------|
| 1040 | Nitrate (as N) | 10 | mg/L | 1.5 | | EPA 300.0 | 0.10 | 04/09/2024 | 23:11 | E82001 |
| 1041 | Nitrite (as N) | 1 | mg/L | 0.10 | U | EPA 300.0 | 0.10 | 04/09/2024 | 23:11 | E82001 |
| 1005 | Arsenic | 0.01 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/15/2024 | 12:54 | E82574 |
| 1010 | Barium | 2 | mg/L | 0.0044 | I | EPA 200.7 | 0.0030 | 04/19/2024 | 16:05 | E82535 |
| 1015 | Cadmium | 0.005 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/15/2024 | 12:54 | E82574 |
| 1020 | Chromium | 0.1 | mg/L | 0.0050 | U | EPA 200.7 | 0.0050 | 04/19/2024 | 16:05 | E82535 |
| 1024 | Cyanide | 0.2 | mg/L | 0.0040 | U | SM 4500-CN-E | 0.0040 | 04/16/2024 | 13:37 | E84589 |
| 1025 | Fluoride | 4 | mg/L | 0.10 | U | EPA 300.0 | 0.10 | 04/09/2024 | 23:11 | E82001 |
| 1030 | Lead | 0.015 | mg/L | 0.00050 | U | EPA 200.8 | 0.00050 | 04/15/2024 | 12:54 | E82574 |
| 1035 | Mercury | 0.002 | mg/L | 0.000025 | U | EPA 245.1 | 0.000025 | 04/17/2024 | 12:12 | E82535 |
| 1036 | Nickel | 0.1 | mg/L | 0.0080 | U | EPA 200.7 | 0.0080 | 04/19/2024 | 16:05 | E82535 |
| 1045 | Selenium | 0.05 | mg/L | 0.0012 | U | EPA 200.8 | 0.0012 | 04/15/2024 | 12:54 | E82574 |
| 1052 | Sodium | 160 | mg/L | 8.1 | | EPA 200.7 | 0.80 | 04/19/2024 | 16:05 | E82535 |
| 1074 | Antimony | 0.006 | mg/L | 0.0010 | U | EPA 200.8 | 0.0010 | 04/15/2024 | 12:54 | E82574 |
| 1075 | Beryllium | 0.004 | mg/L | 0.0020 | U | EPA 200.7 | 0.0020 | 04/19/2024 | 16:05 | E82535 |
| 1085 | Thallium | 0.002 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/15/2024 | 12:54 | E82574 |

SECONDARY CONTAMINANTS

62-550,320

Report Number / Job ID:

G2403604001

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|---------------------------|-----------|-------|--------------------|------------|----------------------|------------|------------------|------------------|----------------------------|
| 1002 | Aluminum | 0.2 | mg/L | 0.024 | U | EPA 200.7 | 0.024 | 04/19/2024 | 16:05 | E82535 |
| 1017 | Chloride | 250 | mg/L | 8.8 | I | EPA 300.0 | 4.0 | 04/09/2024 | 23:11 | E82001 |
| 1022 | Copper | 1 | mg/L | 0.0050 | U | EPA 200.7 | 0.0050 | 04/19/2024 | 16:05 | E82535 |
| 1025 | Fluoride | 2 | mg/L | 0.10 | U | EPA 300.0 | 0.10 | 04/09/2024 | 23:11 | E82001 |
| 1028 | Iron | 0.3 | mg/L | 0.038 | U | EPA 200.7 | 0.038 | 04/19/2024 | 16:05 | E82535 |
| 1032 | Manganese | 0.05 | mg/L | 0.0050 | U | EPA 200.7 | 0.0050 | 04/19/2024 | 16:05 | E82535 |
| 1050 | Silver | 0.1 | mg/L | 0.00050 | U | EPA 200.8 | 0.00050 | 04/15/2024 | 12:54 | E82574 |
| 1055 | Sulfate | 250 | mg/L | 13 | | EPA 300.0 | 2.0 | 04/09/2024 | 23:11 | E82001 |
| 1095 | Zinc | 5 | mg/L | 0.050 | U | EPA 200.7 | 0.050 | 04/19/2024 | 16:05 | E82535 |
| 1905 | Color | 15 | a | 5.0 | U | SM 2120 B | 5.0 | 04/10/2024 | 10:15 | E82001 |
| 1925 | pH (field pH from page 1) | 6.5 - 8.5 | | 7.48 | Q | SM 4500H+B | 0.10 | 04/10/2024 | 15:15 | E82001 |
| 1930 | Total Dissolved Solids | 500 | mg/L | 97 | | SM 2540 C | 5.0 | 04/10/2024 | 08:15 | E82001 |
| 2905 | Foaming Agents | 0.5 | mg/L | 0.061 | I | SM 5540 C | 0.040 | 04/10/2024 | 11:00 | E82001 |

RADIONUCLIDES 62-550.310(6)

Report Number / Job ID:

G2403604001

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | RDL | Analysis Error | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|------------------|-----|-------|--------------------|------------|----------------------|------------|-----|-------------------|------------------|------------------|----------------------------|
| 4006 | Combined Uranium | 30 | ug/L | 0.20 | U | EPA 200.8 | 0.20 | 1 | | 04/15/2024 | 12:54 | E82574 |

If the result exceeds 5 pCi/L, a measurement for radium-226 is required. Uranium is reported separately under Contam ID 4006.

If the results exceed 5 pCi/L, a measurement for radium-226 is required. If the results exceed 15 pCi/L, a measurement for Combined Uranlum must be reported separately. The DEP/DOH will subtract the U value from the Gross Alpha (ID 4002) to determine compliance with MCL for Gross Alpha (Excl. U) of 15pCi/L. If the result for ID 4002 Gross Alpha (Including Uranium) does not exceed 15pCi/L, Combined Uranium need not be measured nor reported.

If using Uranium testing methods ASTM D5174 or EPA 200.8 only, then Analysis Error need not be reported.

VOLATILE ORGANICS 62-550.310(4)(a)

Report Number / Job ID:

G2403604001

PWS ID (From Page 1): 609(099

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | RDL | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|----------------------------|-------|-------|--------------------|------------|----------------------|------------|-----|------------------|------------------|----------------------------|
| 2378 | 1,2,4-Trichlorobenzene | 70 | ug/L | 0.44 | U | EPA 524.2 | 0.44 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2380 | cis-1,2-Dichloroethylene | 70 | ug/L | 0.27 | U | EPA 524.2 | 0.27 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2955 | Xylenes (total) | 10000 | ug/L | 0.44 | U | EPA 524.2 | 0.44 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2964 | Dichloromethane | 5 | ug/L | 0.44 | U | EPA 524.2 | 0.44 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2968 | o-Dichlorobenzene | 600 | ug/L | 0.39 | U | EPA 524.2 | 0.39 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2969 | para-Dichlorobenzene | 75 | ug/L | 0.33 | U | EPA 524.2 | 0.33 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2976 | Vinyl Chloride | 1 | ug/L | 0.29 | U | EPA 524.2 | 0.29 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2977 | 1,1-Dichloroethylene | 7 | ug/L | 0.22 | U | EPA 524.2 | 0.22 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2979 | trans-1,2-Dichloroethylene | 100 | ug/L | 0.21 | U | EPA 524.2 | 0.21 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2980 | 1,2-Dichloroethane | 3 | ug/L | 0.24 | U | EPA 524.2 | 0.24 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2981 | 1,1,1-Trichloroethane | 200 | ug/L | 0.29 | U | EPA 524.2 | 0.29 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2982 | Carbon tetrachloride | 3 | ug/L | 0.25 | U | EPA 524.2 | 0.25 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2983 | 1,2-Dichloropropane | 5 | ug/L | 0.26 | U | EPA 524.2 | 0.26 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2984 | Trichloroethylene | 3 | ug/L | 0.14 | U | EPA 524.2 | 0.14 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2985 | 1,1,2-Trichloroethane | 5 | ug/L | 0.27 | U | EPA 524.2 | 0.27 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2987 | Tetrachloroethylene | 3 | ug/L | 0.42 | U | EPA 524.2 | 0.42 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2989 | Monochlorobenzene | 100 | ug/L | 0.36 | U | EPA 524.2 | 0.36 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2990 | Benzene | 1 | ug/L | 0.26 | U | EPA 524.2 | 0.26 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2991 | Toluene | 1000 | ug/L | 0.33 | U | EPA 524.2 | 0.33 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2992 | Ethylbenzene | 700 | ug/L | 0.31 | U | EPA 524.2 | 0.31 | 0.5 | 04/20/2024 | 03:01 | E84589 |
| 2996 | Styrene | 100 | ug/L | 0.25 | U | EPA 524.2 | 0.25 | 0.5 | 04/20/2024 | 03:01 | E84589 |

Note: Results indicating non-detection with a reported lab MDL > .5 µg/L will not be accepted for compliance.



* G 2 4 D 3 6 G 4 *

tamonte Springs: 380 Northlake Blvd., Suite 1048 - Altamonte Springs, FL 32701 - 407.937.1594 - Fax 407.937.1597

| January | 1985 SW 41st Blvd. - Gainesville, FL 32608 - 352.377.2349 - Fax 352.395.6639

| Cksonville: 6681 Southpoint Pkwy. - Jacksonville, FL 32216 - 904.363.9350 - Fax 904.363.9354

ramar: 10200 USA Today Way • Miramar, FL 33025 • 954.889.2288 • Fax 954.889.2281

Illahassee: 2639 North Monroe Street, Suite D • Tallahassee, FL 32303 • 850.219.6274 • Fax 850.219.6275

mpa: 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327

| Client Name: | US Water Services | Project Name | : Backwa | er Height | s 1 | | BOTTLE SIZE & TYPE | | | | | | | | | | | |
|-------------------|--|----------------------------------|---------------|---------------|-------------|--------------|--------------------------|-------------------|-----------------|---------------------------|--|-------------|------------------------------|-------------------------|----------|---------|-----------|------------------------|
| \ddress: | 4939 Cross Bayou Boulevard | P.O. Number of Project Number | WTP | | | | Siz F | | | | | | | | | | | Ä |
| New | Port Richey, FL 34652 | FDEP Facility N | | 9 | | | A | | | | | | | | | | | NA. |
| ³hone: | 866-753-8292 | Project Address | 3; | | | | | <u>.</u> 2 | | | | | | | | | | z |
| FAX: | 727-849-4219 | Special Instr | uctions: | | C. 1- | = 2.18 | ANALYSIS REQUIRED | Primary Inorganic | | (A) | | | | | | | | o. |
| Contact: | Melisa Rotteveel | | | _ / | (12 | ۲,۱۵ | 2.0 | وَّ | | ant | ha | | | | | | | Σ |
| lampled By: | A. Covell | pn- temperatur | a- | 7.5 | | | Sis | 5 | | Secondary Contaminants | Gross Alpha | RAD 226 | 28 | E | | | | G |
| urn Around Time: | : STANDARD RUSH | 24.600 | | | | | A A | na Ha | ပ္ | con | 255 | 0 | RAD 228 | Uranium | | | | \\$ |
| Page: 1 | _of _ 1 | ☐ADaPT | □uis | ther | | | - | P | Voc | တီ ပိ | <u>6</u> | ₹ | ₹ | 5 | | | | LABORATORY I.D. NUMBER |
| SAMPLE ID | SAMPLE DESCRIPTION | Grab Comp | DATE | PLING | MATRIX | NO. COUNT | PRESER. | | | | | | | | | | | Š |
| A | POE | Grab | 4.8.3 | IZOS | DW | 6 | | Х | Х | X | X | X | Х | Х | | | | જા |
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| | | | | | | | | | | | | | | | | | | |
| Matrix Code: WW = | = wastewater SW = surface water GW = p | ound water DW = 0 | rinking water | O = 0i | A=air S | O=soil S | iL = sludg | e | Preservi | ation Code | e: l=io | e H≃(HCI |) S = (H2 | 2SO4) N | = (HNO3) | T = (So | dium Thic | osulfate) |
| | Yes No Temp taken from sa | Temp fro | | | | | | re require | | | | | | hen recei | | Zr (in | | |
| The second second | last revised 04/30/2015 | | TA BUTTON | evice used fo | or measurio | ng Temp bý | unique id | lentifier (ci | rcie IR te | | THE RESERVE TO SERVE THE PERSON NAMED IN | THE RESERVE | THE OWNER OF THE OWNER, WHEN | COLUMN TO SERVICE STATE | | M: 3A | S: 1V | - |
| | rgushes by Date Time | The same of | x-ved by | P. LOR | Date | Tim | C | ED) S | | 1 | FOR | DRINK | ING W | ATER | USE: | | | 1-1-1-1 |
| 2 | COD 4824 1540 | | Her Ci | 2- | 4974 | 11/20 | | PWS | | | | | | Phone: | | | | |
| 3 | m(- - - - - - - - - | | -4 | | المالية | 1700 | | Supplier | Person of Water | | | | | une. | | | | |
| 4 | | | | | | | | | ddress: | | | | | | | | | |

| PUBLIC WATER SYSTEM INFORMATION (to be | completed by sampler - please type or print legible | y) |
|--|--|---|
| System Name: Backwater Heights | | PWS I.D. #: 609-0099 |
| System Type (check one): @Community Address: -5335 West Blade Lane W Bund | Nontransient Noncommunity | ☐Translent Noncommunity |
| City: <u>Dunnellon</u> | ZIP Code: <u>344</u> : | 93 |
| Phone # Fax #: | E-Mail Address: | |
| SAMPLE INFORMATION to be completed by sample | er) | • |
| Sample Number: 4 G 2403604CC (| Sample Date: 4/8/24 | Sample Time: 1205 AM PM Circle One |
| Sample Location (be specific): Backusche | c Heights well POE | Location Code: |
| Disinfectant Residual (Required when reporting results to | r trihalomethanes and haloscetic ecids);2,28 mg/l | Field pH: 7,5/24,6°C |
| Sample Type (Check Only One) | Reason(s) for Same | ole (Check all that apply) |
| Distribution | Routine Compliance with 62-550 | Replacement (of Invalidated Sample) |
| ☑Entry Point (to Distribution) | ☐Confirmation of MCL Exceedance* | Special (not for compliance with 62-550) |
| ☐Plant Tap (not for compliance with 62-550) | ☐Composite of Multiple Sites* | Clearance (permitting) |
| Raw (at well or intake) | Other | |
| ☐Max Residence Time | Sampling Procedure Used or Other Comm | nents: |
| ☐Ave Residence Time | | |
| ☐Near First Customer | Primarys/Secondary | 15/Vocs/Rads |
| | 'See 62-550,500(6) for requirements and restri And 87-550,512(3) for nitrate or nitritulexceeds | ctions "See 62-550.550(4) for regularments and attach a resulto page for each site. |
| | SAMPLER CERTIFICAT | do HEREBY CERTIFY |
| (Print Name) that the above public water system and sample collection | | Title) |
| Signature: | Date: | 4/8/24 |
| Certified Operator #: B23535Phone #: (35 | (2) (651-4028 Samp | oler's Fax #: |
| Sampler's E-mail: <u>A COVENO USWA</u> | ter corp, net | |

| LABORATORY CERTIFI | CATION INFORMATION | (to be completed by lab | - please type or print legibly) | | |
|---|---|---|--|--|--|
| Lab Name: KNL Enviror | mental Testing | Florida DOH Certifi | cation #: E84025 Ce | ertification Expiration | Date: June Renewal |
| , | | | ATTACH CURRENT DOH | • | |
| Address: 3202 N. Florid | da Ave. Tampa, FL 33 | 603 | Phone #: 813-229-2879 | | |
| Were any analyses subco | ontracted? Yes No | If yes, please provide | DOH certification number(s): _ | | |
| | • | | ATTACH DOH ANALYTE SH | EET FOR EACH SUB | CONTRACTED LAB* |
| ANALYSIS INFORMATIO | ON (to be completed by lab) | Date Sample(s) Re | ceived: 4-17-24 | | |
| PWS ID (From Pg 1): 60 | <u>090099</u> Sample # | (From Pg 1): <u>62</u> | 403004001 Lab A | Assigned Report # or | Job ID: 24- 6945 |
| Group(s) Analyzed & Res | ults attached for complia | nce with Chapter 62-5 | 50, F.A.C. (Check all that apply): | | |
| Inorganics All Except Asbestos Partial Nitrate Nitrite Asbestos | Synthetic Organics All 30 All Except Dioxin Partial Dioxin Only | Volatile Organics □All 21 □Partial | ☐Trihalomethanes | Radionuclides Single Sample Qtrly Composite** | Secondaries □All 14 □Partial |
| | | LAB C | ERTIFICATION | | |
| Therese Mester | | | Laboratoro Biologo | | de DEDERV CEDTIEV |
| I, Thomas Week | | | Laboratory Director | | , do neixebi ceixiii i |
| | (Print Name) | otod mast all vaguirance | (Print Title) | | |
| that all attached analytical de | (Print Name) ata are correct and unless n | oted meet all requiremen | (Print Title) ats of the National Environmental La | aboratory Accreditation | |
| | (Print Name) ata are correct and unless n | oted meet all requiremen | (Print Title) ats of the National Environmental La | | |
| that all attached analytical de Signature: * Failure to provide a valid a possible enforcement agai ** Please provide radiologica | (Print Name) ata are correct and unless n and current Florida DOH lab inst the public water system al sample dates & locations i | certification number and for fallure to sample, and for each quarter. | (Print Title) ats of the National Environmental La | aboratory Accreditation CH ached analysis results wood Bureau of Laborator | Conference (NELAC). ill result in rejection of the report, y Services. |
| that all attached analytical de Signature: Failure to provide a valid a possible enforcement agai Please provide radiological | (Print Name) ata are correct and unless n and current Florida DOH lab inst the public water system al sample dates & locations to | certification number and for fallure to sample, and for each quarter. | (Print Title) Its of the National Environmental La Date: 5-(- a current Analyte Sheet for the atta d may result in notification of the DC | sboratory Accreditation CH Sched analysis results wood Bureau of Laborator TRITE MCL EXCEEDAN | Conference (NELAC). fill result in rejection of the report, y Services. |
| that all attached analytical de Signature: Failure to provide a valid a possible enforcement agai Please provide radiological | (Print Name) ata are correct and unless n and current Florida DOH lab inst the public water system al sample dates & locations i CONFIRMATION & NOTIFIC TECTS ARE TO BE REPORT | certification number and for failure to sample, and for each quarter. CATION IS REQUIRED W TED AS THE MOL WITH A | (Print Title) Its of the National Environmental La Date: | sboratory Accreditation CH Sched analysis results wood Bureau of Laborator TRITE MCL EXCEEDAN | Conference (NELAC). fill result in rejection of the report, y Services. |
| that all attached analytical de Signature: * Failure to provide a valid a possible enforcement agai ** Please provide radiological NON-DET | (Print Name) ata are correct and unless n and current Florida DOH lab inst the public water system al sample dates & locations to CONFIRMATION & NOTIFIC TECTS ARE TO BE REPORT | certification number and for failure to sample, and for each quarter. CATION IS REQUIRED WITH A STHE MOL WITH A by DEP or DOH attack | (Print Title) Its of the National Environmental La Date: | ched analysis results volt Bureau of Laborator | Conference (NELAC). fill result in rejection of the report, y Services. ICES e not acceptable. |
| that all attached analytical de Signature: * Failure to provide a valid a possible enforcement agai ** Please provide radiological NON-DET | (Print Name) ata are correct and unless n and current Florida DOH lab inst the public water system al sample dates & locations if CONFIRMATION & NOTIFIC TECTS ARE TO BE REPORT | certification number and for failure to sample, and for each quarter. CATION IS REQUIRED WITH A STHE MOL WITH A by DEP or DOH attack | (Print Title) Its of the National Environmental La Date: 5-(- a current Analyte Sheet for the atta d may result in notification of the DO ITHIN 24 HRS FOR NITRATE OR NIT "U" QUALIFIER. (Non-detects reported the notes as necessary) | sched analysis results volt Bureau of Laborator TRITE MCL EXCEEDAN d as "BDL" or with a "<" und | Conference (NELAC). cill result in rejection of the report, y Services. ICES e not acceptable.) |

KNL Environmental Testing 3202 N. Florida Ave. Tampa, FL 33603

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

RADIONUCLIDES

62-550.310(6)

KNL Report Number/Job ID: 24.6945 PWS ID(From Page 1): 6090099

Ph: (813) 229-2879 Fax: (813) 229-0002

Client ID: AEL-Gainesville // BACKWATER 1 // G2403604001

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier * | Analytical Method | Lab MDL | RDL | Analysis Error | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|-------------------------------|--------|-------|--------------------|----------------|----------------------|------------|-----|-------------------|------------------|------------------|----------------------------|
| 4002 | Gross Alpha (incl Uranium) | 15 *** | pCi/L | 0.8 | U | EPA 900.0 | 0.8 | 3 | 0.5 | 4-30-24 | 1901 | E84025 |
| 4020 | Radium-226 | 5 | pCi/L | 0.4 | I | EPA 903.0 ***** | 0.3 | 1 | 0.2 | 4-30-24 | 1258 | E84025 |
| 4030 | Radium-228 | | pCi/L | 0.9 | U | EPA Ra-05 | 0.9 | 1 | 0.6 | 4-29-24 | 1644 | E84025 |

Reporting Fermat 62-550,730 Effective January 1995, Revised February 2010.

* Qualifier Codes: U = indicates that the compound was analyzed for but not detected.

I = the reported value is between the laboratory detection limit and the laboratory practical quantitation limit.

** If the result exceeds 5 pCi/L, a measurement for radium-226 is required. Uranium is reported separately under Contam ID 4006.

If the results exceed 5 pCi/L, a measurement for radium-226 is required. If the results exceed 15 pCi/L, a measurement for Combined Uranium must be reported separately. The DEP/DOH will subtract the U value from the Gross Alpha (ID 4002) to determine compliance with MCL for Gross Alpha (Excl.U) of 15 pCi/L. If the result for ID 4002 Gross Alpha (incl.Uranium) does not exceed 15 pCi/L, Combined Uranium need not be measured nor reported.

**** If using Uranium testing methods ASTM D5174 or EPA 200.8 only, then Analysis Error need not be reported.

***** 105% carrier recovery

Page of

Test results meet all requirements of the 2016 TNI standards. Statement of estimated uncertainty available upon request. Test results refer only to sample(s) listed. Contact person: Thomas Weeks (813) 229-2879.

Approved by:

Thomas J. Weeks Laboratory Director

LAB NUMBER:

| / | 7 | (|
|---|---|---|
| 1 | | × |

| Channel . | Page <u>1</u> of <u>1</u> |
|----------------------------------|--|
| Environmental Laboratories, Inc. | ☐ 6601 Southpoint Pkwy, • Jacksonville, FL 32216 • 904.363,6350 • Fax 904.363,6354 • E6257 ☐ 9610 Princess Palm Ave, • Tampa, FL 33619 • 813,630,9616 • Fax 813,630,4327 • E84589 ☐ 4965 SW 41st Blvd. • Gemesville, FL 32606 • 362,577,2349 • Fax 352,395,6639 • E62001 ☐ 528 S. North Leke Blvd., Ste. 1018 • Altamonte Springs, FL 32701 • 407,637,1594 • Fax 407. |

R 4-29 24.6945

| | | 528 S. North Lake Blvd. | , Ste. 1010 | - Alternonia | Springs, FL 3 | 2701 • 407.83 | 7.1594 • F | EX 407.93 | 7.1597- | E53076 | | | | |
|--------------------------|-------------------------------|--------------------------------|---------------------------|--------------|---------------|--------------------------------------|--------------------------|-------------|--------------|---|------------------|-------------|-----------|------------------------|
| LIENT HANE: | AEL Gainesville | PROJECT NAME: | | | | | 244 | | | | | | | |
| ADPERS: | 4965 SW 41st Blvd. | P.O. NUMBER/PROJECT NUMBER: | G-PO- | 25 | 807 | | BOTTLE SIZE A TYPE | <u>a</u> | 9 | | | | | oz. |
| | Gainesville, FL. 32608 | PROJECT LOCATION: | | | | | | | | | | | | 7 8 |
| HONE | 352-377-2349 | RE | KARKS/SPE | CIAL INSTRUC | TIONS: | | ' | | | | | | 1 1 | 3 |
| AVC: | 352-395-6639 | Sub to K | NI | | | | ANALYSIS REQUIRED | | | | | | | 1 6 |
| PHTACT: | Desmond Brady | - Jour to It | O W Im | | | | | | 80 | | 1 1 | | | = |
| error ernañ evri 10; | dbrady@aellab.com | | | | | | | E E | 122 | | | | | 1 % |
| | TURN AROUND TIME | - | | | | | ×. | ¥ | ä | | 1 1 | 1 | 1 1 | 1 5 |
| STANDARD | : Rush | - | | | | | ANA | Gross Alpha | Rads 226/228 | | | | | LABORATORY I.D. NUMBER |
| SAMPLE ID | SAMPLE DESCRI | PTION | Grab | SAM | PLING | MATCH | PRESER | HMO3 | HNO3 | | | | | 7 |
| | OF WAR EL DECON | r non | ION Comp DATE TIME MATRIX | | | | | | | | | | | |
| G2403604001 | BACKWATE | ₹1 | G | 4/8/24 | 12:05 | DW | 200 | X | X | | | | | |
| | | | | | | | | | | | | | | |
| Form revised 2/5/0 Re | D6 Misquished by: Date Tin | | red by: | n temp blenk | Device used | Where raquic for measurin Time | | unique id | entifier (| rmperature when r circle (R temp gun used) UNKING WATER | J: 9A G: USE: | LT-1 LT-2 T | n degrees | iA |
| | Outler Fritz 4/10/2024 17: | 00 | 71 | 7.24 | 500 | | | | • | | | | | |
| 2 | | - | | | | | | | | r80n: | | _ Phone : | | |
| 3 | | | | | | | | Sur | phier of | Water: | | | | |



Advanced Environmental Laboratories, Inc. 4965 SW 41st BI Gainesville, FL 32608 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580

Phone: (352) 377-2349 Fax: (352) 395-6639

FINAL

Workorder: BACKWATER HEIGHTS 1 (G2403604)

May 13, 2024

Melisa Rotteveet **US Water Services** 4939 Cross Bayou Blvd. New Port Richey, FL 34652

RE: Workorder: G2403604 BACKWATER HEIGHTS 1

Dear Melisa Rotteveel:

Enclosed are the analytical results for sample(s) received by the laboratory on Tuesday April 9, 2024. Results reported herein conform to the most current NELAC standards, where applicable, unless otherwise narrated in the body of the report. The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody and results pertain only to these samples.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Madeline Lynch, Project Manager

Madeline Lynch

MLynch@aellab.com



Advanced Environmental Laboratories, Inc. 4965 SW 41st BI Gainesville, FL 32608 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580

Phone: (352) 377-2349 Fax: (352) 395-6639

FINAL

Workorder: BACKWATER HEIGHTS 1 (G2403604)

Sample Summary

| Lab ID | Sample ID | Matrix | Method | Date Collected | Date Received | Analytes Reported | Basis |
|-------------|------------|--------|--------------|------------------|------------------|----------------------|-------|
| G2403604001 | BACKWATER1 | DW | EPA 200.7 | 04/08/2024 12:05 | 04/09/2024 14:40 | 10 | NA |
| G2403604001 | BACKWATER1 | DW | EPA 200.8 | 04/08/2024 12:05 | 04/09/2024 14:40 | 8 | NA |
| G2403604001 | BACKWATER1 | DW | EPA 245.1 | 04/08/2024 12:05 | 04/09/2024 14:40 | 1 | NA |
| G2403604001 | BACKWATER1 | DW | EPA 300.0 | 04/08/2024 12:05 | 04/09/2024 14:40 | 5 | NA |
| G2403604001 | BACKWATER1 | DW | EPA 524.2 | 04/08/2024 12:05 | 04/09/2024 14:40 | 21 | NA |
| G2403604001 | BACKWATER1 | DW | SM 2120 B | 04/08/2024 12:05 | 04/09/2024 14:40 | 1 | NA |
| G2403604001 | BACKWATER1 | DW | SM 2540 C | 04/08/2024 12:05 | 04/09/2024 14:40 | 1 | NA |
| G2403604001 | BACKWATER1 | DW | SM 4500-CN-E | 04/08/2024 12:05 | 04/09/2024 14:40 | 1 | NA |
| G2403604001 | BACKWATER1 | DW | SM 4500H+B | 04/08/2024 12:05 | 04/09/2024 14:40 | 1 | NA |
| G2403604001 | BACKWATER1 | DW | SM 5540 C | 04/08/2024 12:05 | 04/09/2024 14:40 | 1 | NA |





Advanced Environmental Laboratories, Inc. 4965 SW 41st BI Gainesville, FL 32608 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580

Phone: (352) 377-2349 Fax: (352) 395-6639

FINAL

Workorder: BACKWATER HEIGHTS 1 (G2403604)

Workorder Summary

Method Comments

COLR-SM-W

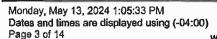
Batch Comments

WCAg/15747 - IC,E300.0,Water

The matrix spike and/or matrix spike duplicate percent recoveries failed for sample G2403505001 for the following analytes: nitrate. The recoveries for the analytes in the CCV were within the method required 90-110% range, indicating the batch was in control. The sample results have been qualified to indicate any matrix interference

WCAg/15748 - . PH,SM4500H+B, Drinking Water

G2403604 was received by the lab past the recommended holding time. The analysis was performed as soon as possible after receipt by the laboratory. The data is qualified to indicate the holding time violation.









Advanced Environmental Laboratories, Inc. 4965 SW 41st BI Gainesville, FL 32608

Payments: P.O. Box 551580 Jacksonville, FL 32255-1580

Phone: (352) 377-2349 Fax: (352) 395-6639

FINAL

Workorder: BACKWATER HEIGHTS 1 (G2403604)

QC Results Qualifiers

Parameter Qualifiers

| U | The compound was analyzed for but not detected. |
|---|---|
|---|---|

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.

Q Missed Hold Time

Lab Qualifiers

| G | DOH Certification #E82001 (FL NELAC) AEL-Gainesville |
|---|---|
| J | DOH Certification #E82574 (FL NELAC) AEL-Jacksonville DOD-ELAP Certification #L23-514 (ISO/IEC 17025:2017) AEL-Jacksonville |
| М | DOH Certification #E82535 (FL NELAC) AEL-Miami |
| T | DOH Certification #E84589 (FL NELAC) AEL-Tampa |



| PUBLIC WATER | SYSTEM INFORMATION (to be d | completed by sampler - please type or print legib | oly) |
|------------------------|---|--|---|
| System Name: _E | Backwater Heights | | PWS I.D. #: 609-0099 |
| System Type (check | cone): Community | ☐Nontranslent Noncommunity | ☐Transient Noncommunity |
| Address: <u>5335 W</u> | est Blade Lane | | |
| City: <u>Dunnellon</u> | | ZIP Code: 344 | 33 |
| Phone # | Fax #: | E-Mail Address: | |
| Sample Number: | | Sample Date: 4/24/24 | Sample Time: 0915 PM (Circle One) |
| | (be specific) : Bow BCC | | Location Code: |
| Disinfectant Resid | dual (Required when reporting results for | trihalomethanes and haloacetic acids): L. & mg/ | L Field pH: 7,9 /20.2°C |
| Sample Type (Chec | k Only One) | Reason(s) for Sam | ple (Check all that apply) |
| Distribution | | ☑Routine Compilance with 62-550 | Replacement (of Invalidated Sample) |
| Entry Point (to Di | stribution) | ☐Confirmation of MCL Exceedance* | Special (not for compliance with 62-550) |
| ☐Plant Tap (not for | r compliance with 62-550) | Composite of Multiple Sites** | Clearance (permitting) |
| Raw (at well or in | ntake) | Other | 10 ole |
| ☐Max Residence T | Γlme | Sampling Procedure Used or Other Comr | nonts: Primary's Secondary's /Vics/Racis |
| ☐Ave Residence T | ime : | · A a a -1 | |
| ☐Near First Custor | mer | Tri-Annual | Samples |
| | | *See 62-550.500'6) for requirements and restri And 62-550.512(3) for nitrate or nitrite exceeds | |
| I,A | (Print Name) | (Plint | On on the control of |
| that the above publi | ic water system and sample collection | n information is complete and correct. | 11/01/-11 |
| Signature: | 4600 | Date: | 4/24/24 |
| Certified Operator | #: <u>B23535_</u> Phone #: <u>(352</u> |)651-4028 samp | oler's Fax #; |
| Sampler's E-mail: | arovell@usi | watercarp, net | |

LABORATORY CERTIFICATION INFORMATION to be completed by lab - please type or print legibly)

| Lab Name:Advanced En | vironmental Laboratories, Inc. | Florida DOH Certificat | ion #: <u>E82001</u> | Certification Expiration Da | ite: 06/30/2024 |
|--|--|-------------------------------|---|--|---------------------------------|
| Address: 4965 SW 41s | t Blvd, Gainesville, FL 32608 | | ATTACH CURRENT De Phone #: (352) 377 | | |
| Were any analyses subc | ontracted Ves No | If yes, please provide | DOH certification num | ber(s): E845 89 ,E82535,E | 82574 |
| | | | ATTACH DOH ANALY | TE SHEET FOR EACH SUB | CONTRACTED LAB |
| ANALYSIS INFORMATION | ON (to be completed by lab) Da | ate Sample(s) Received: | 04/24/2024 | | |
| PWS ID: (From Page 1): | 6090099 Sa | mple Number (From Page | 1):_G2404193001La | ab Assigned Report # Or | lob ID: <u>G2404193</u> |
| Group(s) Analyzed & Res | sults attached for compliance wi | ith Chapter 62-550, F.A.C | C. (Check all that apply): | | |
| Inorganics | Synthetic Organics | /olatile Organics D | isinfection Byproducts | Radionuclides | Secondaries |
| All except Asbestos | All 30 | ✓ All 21 | Trihalomethanes | Single Sample | ₩ All 14 |
| Partial | All Except Dioxin | Partial | Haloacetic Acids | Qtrly Composite* | Partial |
| ✓ Nitrate | Partial | | Chlorite | | |
| Nitrite | Dioxin Only | [| Bromate | | |
| Asbestos | | LAB CERTIFIC | CATION | | |
| l, | Madeline Lynch | 1 | Project Manage | er | , do HEREBY CERTIFY |
| | (Print Name | | (Print Title) | | |
| | ata are correct and unless noted m | eet all requirements of the I | National Environmental La | boratory Accreditation Confe | rence (NELAC). |
| Signature: | tackline Lynch | | Date: | 05/23/2024 | |
| possible enforcement ag | and current Florida DOH lab certifi ainst the public water system for fa cal sample dates & locations for each | illure to sample, and may re- | it Analyte Sheet for the att sult in notification of the D | ached analysis results will re OH Bureau of Laboratory Se | sult in rejection of the report |
| | CONFIRMATION & NOTIFICATION I | IS REQUIRED WITHIN 24 HRS | FOR NITRATE OR NITRITE | MCL EXCEEDANCES | |
| NON-DETECT | S ARE TO BE REPORTED AS THE M | IDL WITH "U" QUALIFIER. | เงือ n-detect s reported a s "BD | Lf or with a "<" are not acceptab | le.) |
| COMPLIANCE DETERM | INATION(to be completed by DEF | or DOH - attach notes as | necessary) | | |
| Sample Collection & Anal | ysis Satisfactory: Yes | No | Replacement Sample or | Report Requested (circle or | nighlight group(s) above) |
| Person Notified: | | _ Date Notified: | DEP/C | OH Reviewing Official: | |
| Reporting Format 62-550.730 Effective January 1995, Revised | i December 2012 | Page: | 6 of 15 | | |

*Results must be reported with appropriate qualifiers in accordance with Florida Administration Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

INORGANIC CONTAMINANTS 62-550.310(1)

Report Number / Job ID: G2404193001

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|----------------|-------|-------|--------------------|------------|----------------------|----------|------------------|------------------|----------------------------|
| 1040 | Nitrate (as N) | 10 | mg/L | 1.9 | | EPA 300.0 | 0.10 | 04/24/2024 | 20:34 | E82001 |
| 1041 | Nitrite (as N) | 1 | mg/L | 0.10 | U | EPA 300.0 | 0.10 | 04/24/2024 | 20:34 | E82001 |
| 1005 | Arsenic | 0.01 | mg/L | 0.00025 | υ | EPA 200.8 | 0.00025 | 04/29/2024 | 14:24 | E82574 |
| 1010 | Barium | 2 | mg/L | 0.0030 | U | EPA 200.7 | 0.0030 | 05/07/2024 | 16:36 | E82535 |
| 1015 | Cadmium | 0.005 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/29/2024 | 14:24 | E82574 |
| 1020 | Chromium | 0.1 | mg/L | 0.0050 | U | EPA 200.7 | 0.0050 | 05/07/2024 | 16:36 | E82535 |
| 1024 | Cyanide | 0.2 | mg/L | 0.0040 | U | SM 4500-CN-E | 0.0040 | 05/04/2024 | 14:48 | E84589 |
| 1025 | Fluoride | 4 | mg/L | 0.10 | U | EPA 300.0 | 0.10 | 04/24/2024 | 20:34 | E82001 |
| 1030 | Lead | 0.015 | mg/L | 0.00050 | U | EPA 200.8 | 0.00050 | 04/29/2024 | 14:24 | E82574 |
| 1035 | Mercury | 0.002 | mg/L | 0.000025 | U | EPA 245.1 | 0.000025 | 05/10/2024 | 14:09 | E82535 |
| 1036 | Nickel | 0.1 | mg/L | 0.0080 | Ų | EPA 200.7 | 0.0080 | 05/07/2024 | 16:36 | E82535 |
| 1045 | Selenium | 0.05 | mg/L | 0.0012 | U | EPA 200.8 | 0.0012 | 04/29/2024 | 14;24 | E82574 |
| 1052 | Sodium | 160 | mg/L | 5.7 | | EPA 200.7 | 0.80 | 05/07/2024 | 16:36 | E82535 |
| 1074 | Antimony | 0.006 | mg/L | 0.0010 | U | EPA 200.8 | 0.0010 | 04/29/2024 | 14:24 | E82574 |
| 1075 | Beryllium | 0.004 | mg/L | 0.0020 | U | EPA 200.7 | 0.0020 | 05/07/2024 | 16:36 | E82535 |
| 1085 | Thallium | 0.002 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/29/2024 | 14:24 | E82574 |

SECONDARY CONTAMINANTS 62-550.320

Report Number / Job ID: G2404193001

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|---------------------------|-----------|-------|--------------------|------------|----------------------|------------|------------------|------------------|----------------------------|
| 1002 | Aluminum | 0.2 | mg/L | 0.024 | U | EPA 200.7 | 0.024 | 05/09/2024 | 22:46 | E82535 |
| 1017 | Chloride | 250 | mg/L | 6.3 | I | EPA 300.0 | 4.0 | 04/24/2024 | 20:34 | E82001 |
| 1022 | Copper | 1 | mg/L | 0.0050 | U | EPA 200.7 | 0.0050 | 05/07/2024 | 16:36 | E82535 |
| 1025 | Fluoride | 2 | mg/L | 0.10 | U | EPA 300.0 | 0.10 | 04/24/2024 | 20:34 | E82001 |
| 1028 | Iron | 0.3 | mg/L | 0.038 | U | EPA 200.7 | 0.038 | 05/07/2024 | 16:36 | E82535 |
| 1032 | Manganese | 0.05 | mg/L | 0.0050 | U | EPA 200.7 | 0.0050 | 05/07/2024 | 16:36 | E82535 |
| 1050 | Silver | 0.1 | mg/L | 0.00050 | U | EPA 200.8 | 0.00050 | 04/29/2024 | 14:24 | E82574 |
| 1055 | Sulfate | 250 | mg/L | 2.8 | I | EPA 300.0 | 2.0 | 04/24/2024 | 20:34 | E82001 |
| 1095 | Zinc | 5 | mg/L | 0.050 | υ | EPA 200.7 | 0.050 | 05/07/2024 | 16:36 | E82535 |
| 1905 | Color | 15 | CU | 5.0 | | SM 2120 B | 5.0 | 04/25/2024 | 10:28 | E82001 |
| 1920 | Odor | 3 | TON | 1.0 | U | SM 2150 B | 1.0 | 04/25/2024 | 09:11 | E82001 |
| 1925 | pH (field pH from page 1) | 6.5 - 8.5 | | 8.04 | Q | SM 4500H+B | 0.10 | 04/25/2024 | 10:30 | E82001 |
| 1930 | Total Dissolved Solids | 500 | mg/L | 100 | | SM 2540 C | 5.0 | 04/29/2024 | 14:10 | E82001 |
| 2905 | Foaming Agents | 0.5 | mg/L | 0.073 | I | SM 5540 C | 0.040 | 04/25/2024 | 09:00 | E82001 |

RADIONUCLIDES 62-550.310(6)

Report Number / Job ID:

G2404193001

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | RDL | Analysis Error | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|------------------|-----|-------|--------------------|------------|----------------------|------------|-----|-------------------|------------------|------------------|----------------------------|
| 4006 | Combined Uranium | 30 | ug/L | 0.20 | U | EPA 200.8 | 0.20 | 1 | | 04/29/2024 | 14:24 | E82574 |

If the result exceeds 5 pCi/L, a measurement for radium-226 is required. Uranium is reported separately under Contam ID 4006.

If the results exceed 5 pCi/L, a measurement for radium-226 is required. If the results exceed 15 pCi/L, a measurement for Combined Uranium must be reported separately. The DEP/DOH will subtract the U value from the Gross Alpha (ID 4002) to determine compliance with MCL for Gross Alpha (Excl. U) of 15pCi/L. If the result for ID 4002 Gross Alpha (Including Uranium) does not exceed 15pCi/L, Combined Uranium need not be measured nor reported.

If using Uranium testing methods ASTM D5174 or EPA 200.8 only, then Analysis Error need not be reported.

VOLATILE ORGANICS 62-550.310(4)(a)

Report Number / Job ID:

G2404193001

PWS ID (From Page 1):

6090099

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | | | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|----------------------------|-------|-------|--------------------|------------|----------------------|------|-----|------------------|------------------|----------------------------|
| 2378 | 1,2,4-Trichlorobenzene | 70 | ug/L | 0.44 | U | EPA 524.2 | 0.44 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2380 | cis-1,2-Dichloroethylene | 70 | ug/L | 0.27 | U | EPA 524.2 | 0.27 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2955 | Xylenes (total) | 10000 | ug/L | 0.44 | U | EPA 524.2 | 0.44 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2964 | Dichloromethane | 5 | ug/L | 0.44 | U | EPA 524.2 | 0.44 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2968 | o-Dichlorobenzene | 600 | ug/L | 0.39 | U | EPA 524.2 | 0.39 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2969 | para-Dichlorobenzene | 75 | ug/L | 0.33 | U | EPA 524.2 | 0.33 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2976 | Viny! Chloride | 1 | ug/L | 0.29 | U | EPA 524.2 | 0.29 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2977 | 1,1-Dichloroethylene | 7 | ug/L | 0.22 | U | EPA 524.2 | 0.22 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2979 | trans-1,2-Dichloroethylene | 100 | ug/L | 0.21 | U | EPA 524.2 | 0.21 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2980 | 1,2-Dichloroethane | 3 | ug/L | 0.24 | U | EPA 524.2 | 0.24 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2981 | 1,1,1-Trichloroethane | 200 | ug/L | 0.29 | U | EPA 524.2 | 0.29 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2982 | Carbon tetrachloride | 3 | ug/L | 0.25 | U | EPA 524.2 | 0.25 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2983 | 1,2-Dichloropropane | 5 | ug/L | 0.26 | U | EPA 524.2 | 0.26 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2984 | Trichloroethylene | 3 | ug/L | 0.14 | U | EPA 524.2 | 0.14 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2985 | 1,1,2-Trichloroethane | 5 | ug/L | 0.27 | U | EPA 524.2 | 0.27 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2987 | Tetrachloroethylene | 3 | ug/L | 0.42 | U | EPA 524.2 | 0.42 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2989 | Monochlorobenzene | 100 | ug/L | 0.36 | U | EPA 524.2 | 0.36 | 0,5 | 05/07/2024 | 02:31 | E84589 |
| 2990 | Benzene | 1 | ug/L | 0.26 | U | EPA 524.2 | 0.26 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2991 | Toluene | 1000 | ug/L | 0.33 | U | EPA 524.2 | 0.33 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2992 | Ethylbenzene | 700 | ug/L | 0.31 | U | EPA 524.2 | 0.31 | 0.5 | 05/07/2024 | 02:31 | E84589 |
| 2996 | Styrene | 100 | ug/L | 0.25 | U | EPA 524.2 | 0.25 | 0.5 | 05/07/2024 | 02:31 | E84589 |

Note: Results indicating non-detection with a reported lab MDL > .5 μg/L will not be accepted for compliance.

OTHER CONTAMINANTS

Report Number / Job ID:

G2404193001

PWS ID (From Page 1):

6090099

| Contam ID | Contam Name | Contam Name MCL Units Analysis Result Qualifier* | | Analytical Method | Lab MDL | Analysis Date | Analysis Time | DOH Lab Certification # | | |
|--------------|-------------------|--|------|----------------------|------------|------------------|------------------|----------------------------|-------|--------|
| | Bromide | N/A | mg/L | 0 | U | EPA 300.0 | | 04/24/2024 | 20:34 | |
| | Nitrate + Nitrite | N/A | mg/L | 1.88 | | EPA 300.0 | 0.20 | 04/24/2024 | 20:34 | E82001 |
| | Orthophosphate | N/A | mg/L | 0.25 | | EPA 300.0 | 0.10 | 04/24/2024 | 20:34 | E82001 |



* G 2 4 0 4 1 9 3 *

| tamonte Springs | 380 Northiake Blvd. | . Suite 1048 | Altamonte Springs, | FL 32701 | • 407.937.1594 | Fax 407.937,1597 |
|-----------------|---------------------|--------------|--|----------|----------------|--------------------------------------|
|-----------------|---------------------|--------------|--|----------|----------------|--------------------------------------|

Janesville: 4985 SW 41st Blvd. • Gainesville, FL 32608 • 352.377.2348 • Fax 352.395.6639

cksonville: 6681 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.383.9350 • Fax 904.363.9354

Tamar, 10200 USA Today Way • Miramar, FL 33025 • 954.889.2288 • Fax 954.889.2281

Ilahassee: 2638 North Monroe Street, Suite O • Tallahassee, FL 32303 • 950.219.6274 • Fax 850.219.6275

mpa: 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327

| Client Name: | US Water Services | Proje | ect Name | : Backwat | er Heigh | ts 2 | | 무조묘 | | | | | | | | | | | |
|--------------------------|---|--|--|-----------------------|-------------|---------------------|------------|---------------------------|-------------------|--------------------|---------------------------|-------------|---------|---------|---------|----------|------------|------------|------------------------|
| Address: | 4939 Cross Bayou Boulevard | Pro | Number o | WTP | | | | BOTTILE SIZE & TYPE | | | | | | | | | | | Ή̈́ |
| New | Port Richey, FL 34652 | | | 609-009 | 9 | | | a | | | | | | | | | | | ĭ. |
| Phone: | 866-753-8292 | | Project Address | | | | | ANALYSIS REQUIRED | ုပ္ည | | | | | | | | | : | ž |
| FAX: | 727-849-4219 | Spec | Special Instructions: Collector did not | | | | not | ្ត | gan | | Ø | | | | | | | | Ö. |
| Contact: | T27-849-4219 Special Instructions: Collector diol not Melisa Rotteveel C Z = 1, Columbial bodfles with | | | | | pri f-ty | 8 | وَيْ | | ant | ha | | | | | | | ≿ | |
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| Turn Around Time | : STANDARD RUSH | 7,9 | 2 | 229 | | | | AF. | Primary Inorganic | Q | Log Ep | Gross Alpha | RAD 226 | RAD 228 | Uranium | | | | \$ |
| Page:1 | of <u>1</u> | □ AD: | aPT | □uis | ther | | | A | F. | VOC | Secondary Contaminants | Ö | \$ | № | 5 | | | | LABORATORY I.D. NUMBER |
| SAMPLE ID | SAMPLE DESCRIPTION |) N | Grab | SAMPLING | | MATRIX NO. | | PRESER. | | | | | | | | | | | Š |
| OAM LL 10 | OAMILE DESOLUTION | J14 | Comp | DATE | TIME | IVATION | COUNT | PRE | | | | | | | | | | | |
| C | POE | | Grab | 4.24.24 | 0915 | DW | 6 | | Х | X | Х | Х | Χ | Х | X | | | a | 51 |
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| Matrix Code: WW | = wastewater SW = surface water GN | ground water | r DW = d | rinking water | 0 = oil | A=air S | O = soil S | L = sluag | 6 | Preserv | ation Cod | e: lelc | H=(HC |) S≖(H2 | 2SO4) N | = (HNO3) | T = (Sodiu | ım Thiosul | fate) |
| Received on Ice | Yes No Pemp taken from s | 3mple | Temp fro | | | | | | re require | | | | | | | | {(in c | | (cius) |
| THE RESERVE AND ADDRESS. | last revised 04/38/2015 | Name and Address of the Owner, where the Owner, which is the Owner, which is the Owner, where the Owner, which is the Owner, | | OF THE REAL PROPERTY. | vice used f | THE PERSON NAMED IN | TO SECURE | unique ld | o, reilbne | ircle IR te | | | | | | | M: 3A | S: 1V | - |
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| 3 | 1 yan | | | - | | -di- | 100 | | | of Water | | | | | | | | | |
| 1 | | | | | | | | | Site-A | ddress: | | | | | | | | | |
| | 9.0 | | | | | | | | | | | | | | | | | | |

| PUBLIC WATER SYSTEM INFOR | MATION (to be completed by sampler - pleas | se type or print legibly) | ı | | | | | |
|--|--|---|--------------------------------------|--|------------------|--|--|--|
| System Name: Backwater Heigh | ts | | | PWS I.D. #: 609-0 | 099 | | | |
| System Type (check one): | munity | ncommunity | ☐Transient Noncommunity | | | | | |
| Address: 5335 West Blade Lane | | | | | | | | |
| City: <u>Dunnellon</u> | | ZIP Code: 34433 | | | | | | |
| Phone # Fax | c#:E-Mail Addre | nss: | | | | | | |
| SAMPLE INFORMATION (to be con | npleted by sampler) | | | | _ | | | |
| Sample Number: <u>G2404</u> | 193001 Sample Date: 4/24 | 1/24 | _Sample Time: | 0915 | AM PM (Circle On | | | |
| Sample Location (be specific): | Es Backwater 2 por | 2 | Loca | ation Code: | | | | |
| | reporting results for trihalomethanes and haloacetic | acids): L. 6 mg/L | Field pH: | 7,9 /20.2 | °C | | | |
| Sample Type (Check Only One) | / - | Reason(s) for Sample | (Check all that app | ity) | | | | |
| Distribution | ☑ Routine Compliance | e with 62-550 | ☐Replacement (of Invalidated Sample) | | | | | |
| Entry Point (to Distribution) | ☐Confirmation of MC | L Exceedance | Special (not for | Special (not for compliance with 62-550) | | | | |
| ☐Plant Tap (not for compliance with 6 | 2-550) Composite of Multip | de Sites" | Clearance (pem | nitting) | | | | |
| ☐Raw (at well or intake) | ☐Other | | | | | | | |
| ☐Max Residence Time | Sampling Procedure U | Jsed or Other Comme | nta: i cimory's | .15ctondary" | Nus /Rods | | | |
| ☐Ave Residence Time | | A | | | | | | |
| ☐Near First Customer | Tri-; | Annual | James | oles | | | | |
| | | equirements and restrictly itrate or nitrite exc-edanc | | 50.550(4) for requireme results page for each sit | | | | |
| I, Angela (Print Na | (ovell | CERTIFICATION OF COMMENTS | rator | , do HEREB | Y CERTIFY | | | |
| that the above public water system and | sample collection information is complete and | correct. | | | | | | |
| Signature: | Cell | Date: | 4/2 | 4/24 | | | | |
| Certified Operator #: B23535_Ph | one #: (352)651-4028 | Sample | r's Fax #: | | | | | |
| Sampler's E-mail: A DVE | 1@uswetercorp. | net | | | | | | |

Safe Drinking Water Program Laboratory Reporting Format

LABORATORY CERTIFICATION INFORMATION (to be completed by lab - please type or print legibly) Lab Name: KNL Environmental Testing Florida DOH Certification #: E84025 Certification Expiration Date: June Renewal ATTACH CURRENT DOH ANALYTE SHEET* Address: 3202 N. Florida Ave. Tampa, FL 33603 Phone #: **813-229-2879** Were any analyses subcontracted? Yes No If yes, please provide DOH certification number(s): ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB* 57-24 ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Received: PWS ID (From Pg 1): 60900119 Sample # (From Pg 1): 62404193001 Lab Assigned Report # or Job ID: 24, 8058 Group(s) Analyzed & Results attached for compliance with Chapter 62-550, F.A.C. (Check all that apply): Inorganics Synthetic Organics Volatile Organics Disinfection Byproducts Radionuclides Secondaries All Except Asbestos All 30 | All 21 Tribalomethanes MSingle Sample All 14 Partial Partial ☐Alf Except Dioxin Halpacetic Acids ☐Qtrly Composite** Partial □Nitrate Partial Chlorite □Nitrite Dioxin Only Bromate □ Asbestos LAB CERTIFICATION **Thomas Weeks** Laboratory Director , do HEREBY CERTIFY (Print Name) (Print Title) that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC). Date: 5-21-24 * Failure to provide a valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the report. possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory Services. ** Please provide radiological sample dates & locations for each quarter. CONFIRMATION & NOTIFICATION IS REQUIRED WITHIN 24 HRS FOR NITRATE OR NITRITE MCL EXCEEDANCES NON-DETECTS ARE TO BE REPORTED AS THE MDL WITH A "U" QUALIFIER. (Non-detects reported as "BDL" or with a "<" are not acceptable.) COMPLIANCE DETERMINATION (to be completed by DEP or DOH -- attach notes as necessary) Sample Collection & Analysis Satisfactory: Yes No Replacement Sample or Report Requested (circle or highlight group(s) above) Person Notified: Date Notified: _____ DEP/DOH Reviewing Official: _____

Page 2 of 9

Reporting Format 62-550,730

Effective January 1995, Revised December 2012

KNL Environmental Testing 3202 N. Florida Ave. Tampa, FL 33603

Ph: (813) 229-2879 Fax: (813) 229-0002

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

RADIONUCLIDES 62-550.310(6)

KNL Report Number/Job ID: 24.8058 PWS ID(From Page 1): 6090099

Client ID: AEL-Gainesville // POE // G2404193001

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier * | Analytical Method | Lab MDL | RDL | Analysis Error | Analysis Date | Analysis Time | DOH Lab Certification |
|--------------|-------------------------------|--------|-------|--------------------|----------------|----------------------|------------|-----|-------------------|------------------|------------------|--------------------------|
| 4002 | Gross Alpha (incl Uranium) | 15 *** | pCi/L | 0.8 | U | EPA 900.0 | 0.8 | 3 | 0.5 | 5-10-24 | 0028 | E84025 |
| 4020 | Radium-226 | 5 | pCi/L | 0.4 | Ű | EPA 903.0 **** | 0.4 | 1 | 0.2 | 5-15-24 | 1252 | E84025 |
| 4030 | Radium-228 | | pCi/L | 0.7 | I | EPA Ra-05 | 0.7 | 1 | 0.5 | 5-20-24 | 1316 | E84025 |

Reporting Format 62-550.730 Effective January 1995, Revised February 2010.

* Qualifier Codes: U = indicates that the compound was analyzed for but not detected.

I = the reported value is between the laboratory detection limit and the laboratory practical quantitation limit.

** If the result exceeds 5 pCi/L, a measurement for radium-226 is required. Uranium is reported separately under Contam ID 4006.

If the results exceed 5 pCi/L, a measurement for radium-226 is required. If the results exceed 15 pCi/L, a measurement for Combined Uranium must be reported separately. The DEP/DOH will subtract the U value from the Gross Alpha (ID 4002) to determine compliance with MCL for Gross Alpha (Excl.U) of 15 pCi/L. If the result for ID 4002 Gross Alpha (incl.Uranium) does not exceed 15 pCi/L, Combined Uranium need not be measured nor reported.

**** If using Uranium testing methods ASTM D5174 or EPA 200.8 only, then Analysis Error need not be reported.

***** 81% carrier recovery

Page of

Test results meet all requirements of the 2016 TNI standards. Statement of estimated uncertainty available upon request. Test results refer only to sample(s) listed. Contact person: Thomas Weeks (813) 229-2879.

Approved by:

Thomas J. Weeks Laboratory Director

| Myanzal Environmental Leboratories, Inc. | |
|---|--|
|---|--|

24.8058

| GLIENT NAME: | AEL Gainesville | PROJECT NAME: | ., 346, 1011 |) - Polisionis | Church LP | 32/01 - 40/,3 | - | EX 407.363 | 7.15814 | 35074 | T | T | | | | |
|---------------------|-------------------------------------|------------------------------|--------------|----------------|-------------|----------------|--------------------------|----------------------|--------------------------|-------------------------|------------------------------|-----|-----------|--------|-----------|------------------------|
| ADORESS: | 4965 SW 41st Blvd. | P.O. NAMER/PROJECT NAMER: | G-PO- | 26 | 051 | | BOTTLE SIZE & TYPE | <u>_</u> | 9 | | | | | | | ~ |
| | Gainesville, FL 32608 | PROJECT LOCATION: | | P/G | | | | | | | | 1 | | | 1 | 出 |
| PHONE: | 352-377-2349 | RE | MARKS/SPE | CIAL INSTRUC | TIONS: | | 7 E | | | | 1 | | | 1 | | 5 |
| /AX: | 352-395-6639 | Sub to K | AH | | | | 灵 | | | | | | | | | Z |
| CONTACT: | | - Sub to M | MIT | | | | Ä | | _ | | | 1 1 | | 1 | | |
| Please email | Desmond Brady | - | | | | | 8 | 100 | 2 | | 1 | 1 1 | | | 1 1 | 장 |
| to: | dbrady@aellab.com TURN AROUND TIME: | - | | | | | ΥS | Ap | 28 | | 1 | | | | | Ę, |
| STANDARD: | | | | | | | ANALYSIS REQUIRED | Gross Alpha | Rads 226/228 | | | | | | | LABORATORY I.D. NUMBER |
| SAMPLE ID | SAMPLE DESCRIP | TION | Grab | SAME | LING | MATRIX | WATCH VATICE | | HNO3 | | | 1 | | | | 3 |
| Comment of | OFWIFTED BESORIE | TION | Comp | DATE | TIME | MAINA | A PER | | | | | | | | | |
| G2404193001 | POE | | G | 4/24/24 | 9:15 | DW | Marie Street | X | X | | | | | | | |
| | | | | | | | | | | | | | | | | |
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| | | | | | | | 199 | | | | | | | | | |
| | | | | | | | 333 | - | | _ | + | + | - | | + | _ |
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| | | | | | | | 181 | | | | | | | | 1 | |
| | | | | | | | 1888 | | | | | | | | | |
| | | | | | | | 1000 | | | _ | +- | + | - | _ | + | |
| | | | | | | | Trues. | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | taken from sample | Temp from | n temp blank | | Where requi | | | | perature v | | | | | ees celci | lus) |
| Form revised 2/8/00 | inquished by: Date Time | Dánals | red by: | | Device used | i for measurin | g Temp by | Contract of the last | of the latest divine the | de IR temp g NKING W | STATE OF THE PERSON NAMED IN | | LT-1 LT-2 | T: 10A | A: 3A | _ |
| | Custer Fritz 4/24/2024 17:00 | | | 1.297 | | TIPM | 1 | | | VS Information I | | | W8 ID: | | | |
| 2 | WATESCT 17.50 | | - | | | | 1 | Co | intact Pen | on: | | | Phone | | | - |
| 3 | | | | | | | | | optier of W | | | | | | | _ |
| 4 | | | | | | | 1 | SR SR | e-Address | | | | | | | - |



Advanced Environmental Laboratories, Inc. 4965 SW 41st BI Gainesville, FL 32608 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580

Phone: (352) 377-2349 Fax: (352) 395-6639

FINAL

Workorder: BACKWATER HEIGHTS 2 (G2404193)

May 23, 2024

Melisa Rotteveel **US Water Services** 4939 Cross Bayou Blvd. New Port Richey, FL 34652

RE: Workorder: G2404193 BACKWATER HEIGHTS 2

Dear Melisa Rotteveel:

Enclosed are the analytical results for sample(s) received by the laboratory on Wednesday April 24, 2024. Results reported herein conform to the most current NELAC standards, where applicable, unless otherwise narrated in the body of the report. The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody and results pertain only to these samples.

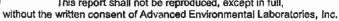
If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Madeline Lynch, Project Manager

Madeline Lynch

MLynch@aellab.com







Advanced Environmental Laboratories, Inc. 4965 SW 41st BI Gainesville, FL 32608 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580

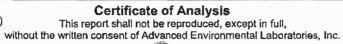
Phone: (352) 377-2349 Fax: (352) 395-6639

FINAL

Workorder: BACKWATER HEIGHTS 2 (G2404193)

Sample Summary

| Lab ID | Sample ID | Matrix | Method | Date Collected | Date Received | Analytes Reported | Basis |
|-------------|---------------|--------|--------------|------------------|------------------|----------------------|-------|
| G2404193001 | BACKWATER-POE | DW | EPA 200.7 | 04/24/2024 09:15 | 04/24/2024 14:50 | 10 | NA |
| G2404193001 | BACKWATER-POE | DW | EPA 200.8 | 04/24/2024 09:15 | 04/24/2024 14:50 | 8 | NA |
| G2404193001 | BACKWATER-POE | DW | EPA 245.1 | 04/24/2024 09:15 | 04/24/2024 14:50 | 1 | NA |
| G2404193001 | BACKWATER-POE | DW | EPA 300.0 | 04/24/2024 09:15 | 04/24/2024 14:50 | 8 | NA |
| G2404193001 | BACKWATER-POE | DW | EPA 524.2 | 04/24/2024 09:15 | 04/24/2024 14:50 | 21 | NA |
| G2404193001 | BACKWATER-POE | DW | SM 2120 B | 04/24/2024 09:15 | 04/24/2024 14:50 | 1 | NA |
| G2404193001 | BACKWATER-POE | DW | SM 2150 B | 04/24/2024 09:15 | 04/24/2024 14:50 | 1 | NA |
| G2404193001 | BACKWATER-POE | DW | SM 2540 C | 04/24/2024 09:15 | 04/24/2024 14:50 | 1 | NA |
| G2404193001 | BACKWATER-POE | DW | SM 4500-CN-E | 04/24/2024 09:15 | 04/24/2024 14:50 | 1 | NA |
| G2404193001 | BACKWATER-POE | WQ | SM 4500H+B | 04/24/2024 09:15 | 04/24/2024 14:50 | 1 | NA |
| G2404193001 | BACKWATER-POE | DW | SM 5540 C | 04/24/2024 09:15 | 04/24/2024 14:50 | 1 | NA |







Advanced Environmental Laboratories, Inc. 4965 SW 41st BI Gainesville, FL 32668

Payments: P.O. Box 551580 Jacksonville, FL 32255-1580

Phone: (352) 377-2349 Fax: (352) 395-6639

FINAL

Workorder: BACKWATER HEIGHTS 2 (G2404193)

Workorder Summary

Method Comments

COLR-SM-W

Batch Comments

WCAg/15953 - .PH,SM4500H+B, Drinking Water

G2404193 was received by the lab past the recommended holding time. The analysis was performed as soon as possible after receipt by the laboratory. The data is qualified to indicate the holding time violation.





Advanced Environmental Laboratories, Inc. 4965 SW 41st BI Gainesville, FL 32608 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580 Phone: (352) 377-2349

Phone: (352) 377-2349 Fax: (352) 395-6639

FINAL

Workorder: BACKWATER HEIGHTS 2 (G2404193)

QC Results Qualifiers

Parameter Qualifiers

U The compound was analyzed for but not detected.

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.

Q Missed Hold Time

Lab Qualifiers

| G | DOH Certification #E82001 (FL NELAC) AEL-Gainesville |
|----|---|
| G^ | Not Certified |
| J | DOH Certification #E82574 (FL NELAC) AEL-Jacksonville DOD-ELAP Certification #L23-514 (ISO/IEC 17025:2017) AEL-Jacksonville |
| M | DOH Certification #E82535 (FL NELAC) AEL-Miami |





MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| nmunit | v Water System (C er System (PWS) I | | ear of | January 209 Backwater I 609-0099 | leights | | | | | *, 454640 |
|---------------|--|----------------------------|--------------|--|---|--------------|--------------|--------------|--------------|-----------|
| | Plant 1 Name WTP 1 | Plant 2 Name WTP 2 | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plant 9 Name | Total |
| Day Month | 100,000 | tem (PWS) Name: 100,000 | | <u> </u> | | | | | 1 | year. |
| | | tem (PWS) Name: | | | | | | | | |
| Day 1 | 500 | 26,800 | | | | | | | | 27,300 |
| Day 2 | 500 | 26,800 | | | | | | | | 27,300 |
| Day 3 | 350 | 24,600 | | | | | | | | 24,950 |
| Day 4 | 350 | 24,600 | | | | | | | | 24,950 |
| Day 5 | 67 | 26,433 | _ | | | | | | | 26,500 |
| Day 6 | 67 | 26,433 | | | | | | | | 26,500 |
| Day 7 | 67 | 26,433 | | | | | | | | 26,500 |
| Day 8 | 400 | 21,350 | | | | | 1 | | | 21,750 |
| Day 9 | 400 | 21,350 | | | | | ì | | | 21,750 |
| Day 10 | 200 | 30,250 | | 1 | | | | | | 30,450 |
| Day 11 | 200 | 30,250 | | | | | | | | 30,450 |
| Day 12 | 333 | 25,700 | | | | | | | | 26,033 |
| Day 13 | 333 | 25,700 | | | | | | _ | | 26,033 |
| Day 14 | 333 | 25,700 | | | | _ | | | | 26,033 |
| Day 15 | 0 | 24,900 | | | *************************************** | | | | | 24,900 |
| Day 16 | 0 | 24,900 | | | | | | | | 24,900 |
| Day 17 | 3,250 | 29,200 | _ | | | | | | | 32,450 |
| Day 18 | 3,250 | 29,200 | | | | | | _ | | 32,450 |
| Day 19 | 467 | 26,133 | | | 1 | | | | | 26,600 |
| Day 20 | 467 | 26,133 | | | | | | | | 26,600 |
| Day 21 | 467 | 26,133 | | | | | | | | 26,600 |
| Day 22 | 0 | 25,850 | | - | _ | | _ | | | 25,850 |
| Day 23 | 0 | 25,850 | | | | | | | | 25,850 |
| Day 24 | 600 | 25,700 | | | | | | | | 26,300 |
| Day 25 | 600 | 25,700 | | | | | - | - | | |
| Day 26 | 367 | 26,233 | | | | | } | - | | 26,300 |
| Day 27 | | | | | | | | | | 26,600 |
| Day 27 Day 28 | 367 | 26,233 | | | | | | | | 26,600 |
| | 367 | 26,233 | | _ | | | 1 | | | 26,600 |
| Day 29 | 850 | 27,150 | | | | _ | | | | 28,000 |
| Day 30 | 850 | 27,150 | | | | | _ | | | 28,000 |
| Day 31 | 700 | 25,650 | 1 | | | | Į | | | 26,350 |
| Total | | | | | | | | | | 827,449 |
| Avg. | | | | | | | | | | 26,692 |
| Min | | | | | | | | | | 32,450 |





See Page 4 for instructions

Effective August 28, 2003

| I. General Information for t | | 24 | | | |
|--|--|---|--|---|--|
| A. Public Water System (PW | | | | | |
| | er Heights | | | | ntification Number: 609-0099 |
| PWS Type: Commu | | | mmunity [] | | ecutive |
| The same of the sa | nections at End of Month: 107 | Total F | opulation Served at l | End of Month: 2 | 167 |
| PWS Owner: Citrus V | | | | | |
| | on Purviance | | | tility Manager | |
| | Address: 4939 Cross Bayou Boulevard | | The second secon | State: FL | Zip Code: 34652 |
| | one Number: 866-753-8292 | | Person's Fax Numbe | r: 727-848-7701 | |
| Contact Person's Email A | Address: spurviance@uswatercorp.ne | et | | | |
| . Water Treatment Plant In | formation | | | | |
| Plant Name: WTP 1 | | | | Plant Telephor | ne Number: |
| Plant Address: 5335 We | est Blade Lane | City: 1 | Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | | Purchased Finished Water | | pourest x 22 | 2.00 |
| Permitted Maximum Da | y Operating Capacity of Plant, gallons pe | r day: 100000 | | | |
| Plant Category (per subs | ection 62-699.310(4), F.A.C.): D | Plant Cl | ass (per subsection 69 | 2-699.310(4), F.A | .C.): V |
| Licensed Operators: | Name: | License Class | License Number | Day(s)/Shift(s) V | Worked |
| Lead/Chief Operators: | Wendell Leigh | C | 14711 | | |
| Other Operators: | Jeffrey Hines | A | 19837 | | |
| | Jessie Jose Hinojosa | C | 28938 | | |
| | L | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| II. Certification by Lead/Ch | ief Operator | - 1 | | The same of the same of | The American State of the State |
| I the undersigned water trea information provided in this International Standard 60 o prepared each day that a lice applicable, appropriate treat | ttment plant operator licensed in Florida, is report is true and accurate to the best of rother applicable standard referenced in ensed operator staffed or visited this plant | my knowledge and belief. I subsection 62-555.320(3), F t during the month indicated her more, I agree to provide | certify that all drinking. A.C. I also certify the above: (1) records or | ng water treatmen at the following ac f amounts of cher | n Part 1 of this report. I certify that the t chemicals used at this plant conform to NSF dditional operations records for this plant were micals used and chemical feed rate, and (2) if the PWS owner so that the PWS owner can |
| Wendell Leigh | 2/7/2024 | Wendell Leigh | | | C 14711 |
| Signature and Date | | Printed or Typed Nan | ne | | License Number |
| DEP Form 62-555 900(300) | | | | | |

609-0099

Backwater Heights WTP 1

III. Daily Data for the Month Year of: January 2024
Means of Achieving Four-Log Virus Inactivation/Removal *

539

3,250

Average

Maximum

Free Chlorine Chlorine Dioxide

Ozone Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)

V. Franchischer Consistent Chloring (Chloring) Chloring Digital

| | - | | | | CT Calculations or U | V Dose to Demonstrate For | ur-Log Virus In | activation of Applicable* | | | L'V Dose | | |
|------------------|---|-----------------------------|--|---|----------------------|---------------------------|-----------------|----------------------------|--------------------------------------|---|----------|---|---|
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in Operation | Net Quantity of Finished Water Produced, mal Peak Fi | Lowest Residual Destrectant Concentration (C) Before or at First Customer During Peak low Rate, and | | Lowest C1 Provided | I emp of | pH of Water, if Applicable | Minimum CT Required, mg- min/L | Lowest Operating UV Dose, mW- sec/cm ² | | Lowest Residual Dismitictant Concentration at Remote Point in Distribution System, mg/le- | Emergency or Abnormal Operating Conditions. Repa or Maintenance Work that Involves Taking Water System Components Out o Operation |
| 1 | X | 24 | 500 | 1.78 | | | | | | | | 1.31 | |
| 2 | | 24 | 500 | | | | | | | | | | |
| 3 | X | 24 | 350 | 1.52 | | | | | | | | 1.22 | |
| 4 | | 24 | 350 | | | | | | | | | | |
| 5 | X | 24 | 67 | 1.99 | | | | | | | | 1.78 | |
| 6 | | 24 | 67 | | | | | | | | | | |
| 7 | | 24 | 67 | | | | | | | | | | |
| 88 | X | 24 | 400 | 2.28 | | | | | | | | 1.82 | |
| 9 | | 24 | 400 | | | | | | | | | | |
| 10 | X | 24 | 200 | 3.45 | | | | | | | | 1.76 | |
| 11 | | 24 | 200 | | | | | | | | | | |
| 12 | X | 24 | 333 | 2.56 | | | | | | | | 1.70 | |
| 13 | | 24 | 333 | | | | | | | | | | |
| 14 | | 24 | 333 | | | | | | | | | | |
| 15 | X | 24 | 0 | 2.82 | | | | | | | | 2.12 | |
| 16 | | 24 | 0 | | | | | | | | | | |
| 17 | X | 24 | 3,250 | 2.98 | | | | | | | | 2.01 | |
| 18 | | 24 | 3,250 | | | | | | | | | | |
| 19 | X | 24 | 467 | 1.40 | | | | | | | | 2.61 | |
| _20 | | 24 | 467 | | | | | | | | | | |
| 21 | | 24 | 467 | | | | | | | | | | |
| 22 | X | 24 | 0 | 1.85 | | | | | | | | 2.21 | |
| 23 | | 24 | 0 | | | | | | | | | | |
| 24 | X | 24 | 600 | 3.49 | | | | | | | | 2.01 | |
| 25 | | 24 | 600 | | | | | | | | | | |
| 26 | X | 24 | 367 | 2.17 | | | | | | | | 2.21 | |
| 27 | | 24 | 367 | | | | | | | | | | |
| 28 | | 24 | 367 | | | | | | | | | | |
| 29 | X | 24 | 850 | 1.74 | | | | | | | | 1.51 | |
| 30 | | 24 | 850 | | | | | | | | | | |
| 31 | X | 24 | 700 | 1.86 | | | | | | | | 1.28 | |
| T otal | | | 16,702 | | | | | | | | | | |



See Page 4 for instructions

| see rage 4 for instructions | | | | | | |
|-------------------------------|--|------------------------|------------|------------------------|---------------------|--|
| I. General Information for th | ne Month/Year of: January | · 2024 | | | | |
| A. Public Water System (PW) | | | | | | |
| | er Heights | | | | PWS Iden | tification Number: 609-0099 |
| PWS Type: Commun | nity [X] NonTransitent | [] | NonCo | mmunity [] | Consec | |
| Number of Service Conn | nections at End of Month: 107 | | Total F | opulation Served at I | End of Month: 26 | 67 |
| PWS Owner: Citrus V | Vaterworks Inc. | | | • | | |
| Contact Person: Sharo | on Purviance | | Contact | Person's Title: U | tility Manager | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Boule | vard | City: No | | State: FL | Zip Code: 34652 |
| Contact Person's Telepho | one Number: 866-753-8292 | | Contact | Person's Fax Number | r: 727-848-7701 | |
| Contact Person's Email A | Address: spurviance@uswaterco | rp.net | | | | |
| B. Water Treatment Plant Inf | ormation | | | | | err v madde |
| Plant Name: WTP 2 | | | | | Plant Telephon | e Number: |
| Plant Address: 5335 We | est Blade Lane | | City: I | Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | | Purchased Finishe | | | | |
| Permitted Maximum Da | y Operating Capacity of Plant, gallon | • • | | | | |
| | ection 62-699.310(4), F.A.C.): D | | Plant Cl | ass (per subsection 62 | 2-699.310(4), F.A. | C.): V |
| Licensed Operators: | Name: | Licens | se Class | License Number | | - · · |
| Lead/Chief Operators: | Wendell Leigh | | C | 14711 | Day (5)/ Strate(5) | Volked |
| Other Operators: | Jeffrey Hines | | A | 19837 | | |
| | Jessie Jose Hinojosa | | С | 28938 | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| The Land of the | | | | | | |
| | | | | | | |
| | | | | | | |
| II. Certification by Lead/Chi | ef Operator | | | | | |
| I the undersigned water treat | tment plant operator licensed in Flo | rida am the lead/chief | onerator (| of the water treatment | nlant identified in | Part 1 of this report. I certify that the |
| | | | | | | chemicals used at this plant conform to NS |
| | | | | | | ditional operations records for this plant we |
| | | | | | | nicals used and chemical feed rate, and (2) is |
| | | | | | | the PWS owner so that the PWS owner car |
| | ppies of this report, at a convenient le | | | - | | |
| Wendell Leigh | 2/7/2024 | Wendell Lei | gh | | | C 14711 |
| Signature and Date | | Printed or T | yped Nan | ne | | License Number |
| DEP Form 69-555 900(200) | | | • | | | |

DEP Form 62-555 900(300) Effective August 28, 2003

609-0099

26,153 30,250

Backwater Heights

Average

Maximum

WTP 2

| III. Daily Dat | a for the | Month/Vene | nsf- |
|----------------|-----------|------------|------|

January 2024

Means of Achieving Four-Log Virus Inactivation/Removal *

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)

| | | 18 18 18 | | | | or out to | N/ D 4- D | 1 | | | | | | |
|---------------------|---|-----------------------------|--|---------------------|---|--|-----------------------------|------------------|----------------------------|-------------------------------------|--|---------|---|---|
| | | | | | | CT Calculations, or U | JV Dose to Demonstrate Four | r-Log Varus In | activation, il Applicable* | | | UV Dose | | |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in Operation | Not Quantity of Finished Water Produced. | Peak Flow Rate, and | Lowest Residual Distributant Concentration (C) Before or at First Customer During Peak Flow. | Distribution Contact Time (1) at C Measurement Point During Peak Flow, minutes | During Peak Flow, | Temp of Water °C | pH of Water, if Applicable | Manmum CT Required ing- min/L | Lowest Operating UV Dose, mW- sec/cm ² | | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L | Emergency or Abnormal Operating Conditions; Reprior Maintenance Work tha Involves Taking Water System Components Out of Operation |
| 1 | X | 24 | 26,800 | | 1.84 | | | | | | | | 1.78 | |
| 2 | | 24 | 26,800 | | | | | | | | | | | |
| 3 | X | 24 | 24,600 | | 1.65 | | | | | | | | 1.52 | |
| 4 | | 24 | 24,600 | | | | | | | | | | | |
| 5 | X | 24 | 26,433 | | 3.16 | | | | | | | | 1.99 | |
| 6 | | 24 | 26,433 | | | | | | | 1 | | | | |
| 7 | | 24 | 26,433 | | | | | | | | | | | |
| 8 | X | 24 | 21,350 | | 2.68 | | | | | | | | 2.28 | |
| 9 | | 24 | 21,350 | | | | | | | | | | | |
| 10 | X | 24 | 30,250 | | 2.83 | | | | | | | | 3.45 | |
| 11 | | 24 | 30,250 | | | | | | | | | | | |
| _12 | X | 24 | 25,700 | | 2.87 | | | | | | | | 2.56 | |
| 13 | | 24 | 25,700 | | | | | | | | | | | |
| 14 | | 24 | 25,700 | | | | | | | | | | | |
| 15 | X | 24 | 24,900 | | 3.24 | | | | | | | | 2.82 | |
| 16 | | 24 | 24,900 | | | | | | | | | | | |
| 17 | X | 24 | 29,200 | | 3.25 | | | | | | | | 2.98 | |
| 18 | | 24 | 29,200 | | | | | | | | | | | |
| 19 | X | 24 | 26.133 | | 3.29 | | | | | | | | 1.40 | |
| 20 | | 24 | 26.133 | | | | | | | | | | | |
| 21 | | 24 | 26,133 | | | | | | | | | | | |
| 22 | X | 24 | 25,850 | | 3.45 | | | | | | | | 1.85 | |
| 2 3 | | 24 | 25.850 | | | | | | | | | | | |
| 24 | X | 24 | 25,700 | | 3.35 | | | | | | | | 3.49 | |
| 25 | 1 | 24 | 25,700 | | | | 1 | | | | | | | |
| 26 | X | 24 | 26,233 | | 3.29 | | <u> </u> | | | | | | 2.17 | |
| 27 | | 24 | 26,233 | | | | Ī | | | | | | | |
| 28 | | 24 | 26,233 | | | | | | | | | | | |
| 29 | l x | 24 | 27,150 | | 1.78 | | | | | | | | 1.74 | |
| 30 | | 24 | 27,150 | | | | | | | | | | | |
| 31 | X | 24 | 25,650 | | 3.18 | | | | | | | | 1.86 | |
| Γotal | | | 810,747 | | | | | | | | | | | |



MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWS₈ THAT HAVE MULTIPLE PLANTS

| mmunit | nedWater Product v Water System (C er System (PWS)] | | ear of | February 2 Backwater I 609-0099 | | | | | | |
|-----------------|--|----------------------------|--------------|---------------------------------------|--------------|--------------|--------------|--------------|--|---------------------|
| | Plant 1 Name WTP 1 | Plant 2 Name WTP 2 | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plant 9 Name | Total |
| Day of Month | 100,000 | tem (PWS) Name: 100,000 | | | | | | | | |
| - | | tem (PWS) Name: | | | | | | | yeyerk - Berykessayasa | Significance of the |
| Day 1 | 700 | 25,650 | | | | | | | | 26,350 |
| Day 2 | 1,567 | 26,300 | | | | | | | | 27,867 |
| Day 3 | 1,567 | 26,300 | | | | | | | | 27,867 |
| Day 4 | 1,567 | 26,300 | | | | | | | | 27,867 |
| Day 5 | 200 | 24,900 | | | | | | | | 25,100 |
| Day 6 | 200 | 24,900 | | | | | | | | 25,100 |
| Day 7 | 350 | 25,750 | | | | | | | | 26,100 |
| Day 8 | 350 | 25,750 | | | | | | | - | 26,100 |
| Day 9 | 0 | 17,367 | | | | | | | | 17,367 |
| Day 10 | 0 | 17,367 | | | | | | | | 17,367 |
| Day 11 | 0 | 17,367 | 100 | | | - | | | | 17,367 |
| Day 12 | 0 | 16,850 | | 1 | | | | | | 16,850 |
| Day 13 | 0 | 16,850 | | | | | | | ig or time appears. | 16,850 |
| Day 14 | 0 | 17,800 | | | | | | | | 17,800 |
| Day 15 | 0 | 17,800 | | | | | | | | 17,800 |
| Day 16 | 0 | 17,400 | | | | | | | | 17,400 |
| Day 17 | 0 | 17,400 | | | | | | | The last of the la | 17,400 |
| Day 18 | 0 | 17,400 | | | | | | | | 17,400 |
| Day 19 | 0 | 17,400 | | | | | | | | 17,400 |
| Day 20 | 0 | 17,400 | 1 | - | _ | | | | | 17,400 |
| Day 21 | 0 | 19,000 | | | | | | | | 19,000 |
| Day 22 | 0 | 19,000 | | | | | | | | 19,000 |
| Day 23 | 33 | 18,400 | | | | | | | | 18,433 |
| Day 24 | 33 | 18,400 | | | 1 | + | - | | | 18,433 |
| Day 25 | 33 | 18,400 | | | | | | | | 18,433 |
| Day 26 | 260 | 16,450 | | | | | | | | 16,710 |
| Day 27 | 260 | 18,650 | | - | | | | | | 18,910 |
| Day 28 | 0 | 18,650 | | - | | | | | | 18,650 |
| Day 29 | 0 | 18,650 | | | | | - | | | 18,650 |
| Day 30 | · · | 10,030 | | | | | - | | - | 16,030 |
| Day 31 | | | | | - | | - | | | |
| Total | | | 1 | | | | | | | eng oei |
| | | | | | | | | | | 586,971 |
| Avg. | | | | | | | | | | 20,240 |
| Min | | | | | | | | | | 27,867 |





See Page 4 for instructions

Effective August 28, 2003

| I. General Information for t | | 2024 | | | |
|---|--|---|--|--|---|
| A. Public Water System (PW | | | | | |
| PWS Name: Backwa | ter Heights | | | PWS Ide | entification Number: 609-0099 |
| PWS Type: Commu | | | NonCommunity [] | Cons | secutive |
| | nections at End of Month: 107 | | Fotal Population Serve | d at End of Month: | 267 |
| PWS Owner: Citrus | Waterworks Inc. | | 7-744 604 | | |
| Contact Person: Share | on Purviance | C | ontact Person's Title: | Utility Manager | |
| Contact Person's Mailin | Address: 4939 Cross Bayou Bouleva | ard C | ity: New Port Richey | State: FL | Zip Code: 34652 |
| Contact Person's Teleph | ione Number: 866-753-8292 | C | ontact Person's Fax Nu | imber: 727-848-7701 | |
| Contact Person's Email | Address: spurviance@uswatercorp | o.net | <u>-</u> | | - |
| 3. Water Treatment Plant In | formation | | | | <u> </u> |
| Plant Name: WTP 1 | | MA. | | Plant Telepho | one Number: |
| Plant Address: 5335 W | est Blade Lane | C | ity: Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | Plant: [X] Raw Ground | Purchased Finished | | | |
| Permitted Maximum Da | ay Operating Capacity of Plant, gallons | • | | | |
| | section 62-699.310(4), F.A.C.): D | | lant Class (per subsecti | on 62-699.310(4). F./ | A.C.): V |
| Licensed Operators: | Name: | License (| 1000 | ber Day(s)/Shift(s) | ************************************** |
| Lead/Chief Operators: | Wendell Leigh | | | Day (o) Dimito) | TYOTROG |
| Other Operators: | Jeffrev Hines | À | | | |
| | Jessie Jose Hinojosa | | | | |
| | | | | | |
| | | | | | |
| the same of the same | | Water Control of the | | | |
| AT TO THE REAL PROPERTY. | | | | | |
| | | _ | | - | |
| | _ | | | | |
| II. Certification by Lead/Cl | ief Operator | | | | |
| I the undersigned water trea information provided in thi International Standard 60 o prepared each day that a lice applicable, appropriate trea | atment plant operator licensed in Florions is report is true and accurate to the best or other applicable standard referenced ensed operator staffed or visited this p | t of my knowledge and b l in subsection 62-555.32 lant during the month ind urther more, I agree to p | elief. I certify that all di 0(3), F.A.C. I also certi dicated above: (1) recorrovide these additional | rinking water treatment fly that the following a rds of amounts of che | in Part 1 of this report. I certify that the nt chemicals used at this plant conform to NSI additional operations records for this plant were micals used and chemical feed rate, and (2) if to the PWS owner so that the PWS owner can |
| Wendell Leigh | 3/5/2024 | Wendell Leigh | | | C 14711 |
| Signature and Date | | Printed or Type | ed Name | | License Number |
| DEP Form 62-555 900(300) | | | | | |

609-0099

Backwater Heights WTP 1

III. Daily Data for the Month/Year of:

Means of Achieving Four-Log Virus Inactivation/Removal * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)

| | | | | stribution System: | | Free Chlorine | | | e (Chloramines) | | | ne Dioxide | | |
|---------------------|---|-----------------------------|--|---------------------|---|---|----------------------------|----------------|-----------------------------|-------------------------------------|---|--|---|---|
| | | | | | | | IV Dose to Demonstrate Fou | r-Log Virus In | nactivation, if Applicable* | | 8.4 | | | |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in Operation | Net Quantity of Finished Water Produced, gai | Peak Flow Rate, gpd | Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L | Districtant Contact Time (1) at C Measurement Point During Peak Flow, minutes | Lowest CT Provided | Temp of | pH of Water, if Applicable | Minimum CT Required mg- min/L | Lowest Operating UV Dose, mW- sec/cm ² | Minimum UV Dose Required. mW-sec/cm ² | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L | Emergency or Absormal Operating Conditions, Repi or Maintenance Work tha Involves Taking Water System Components Out |
| 1 | 7 200 72 | 24 | 700 | I can I low Note: 1 | I DW, may to | Design Fear 1 DW, Illandes | mig-littaba. | waith C | Pitot water, a reputable | TORUL, | secrem | III W - SCLUCIII | EL DEGEMENT STREET, IND. | Орегација |
| 2 | X | 24 | 1,567 | | 1.36 | | | | | | | | 1.27 | |
| 3 | | 24 | 1,567 | | | | | | | | | | | |
| 4 | | 24 | 1,567 | | | | | | | | | | | |
| 5 | X | 24 | 200 | | 1.67 | | | | | | | | 1.76 | |
| 6 | | 24 | 200 | | | | | | | 1 | | | | |
| 7 | X | 24 | 350 | | 0.97 | | | | | | | | 1.87 | |
| 8 | | 24 | 350 | | | | | | | | | | | |
| 9 | X | 24 | 0 | | 2.00 | | | | | | | | 1.32 | |
| 10 | | 24 | 0 | | | | | İ | | | | | 2,02 | |
| 11 | | 24 | 0 | | 1 | | | | | | | | | |
| 12 | X | 24 | 0 | | 1.28 | | | | | | | | 0.89 | |
| 13 | | 24 | 0 | | 1 | | | | | | | | | |
| 14 | X | 24 | 0 | | 0.75 | | | | | | | | 1.25 | |
| 15 | | 24 | 0 | | | | | | | | | | | |
| 16 | X | 24 | 0 | | 1.36 | | | | | | | | 0.92 | |
| 17 | | 24 | 0 | | | | | | | | | | | |
| 18 | | 24 | 0 | | | | | | | | | | | |
| 19 | X | 24 | 0 | | 1.28 | | | | | | | | 1.01 | |
| 20 | | 24 | 0 | | | | | | | | | | | |
| 21 | X | 24 | 0 | | 1.00 | | | | | | | | 0.44 | |
| 22 | | 24 | 0 | | | | | | | | | | | |
| 23 | X | 24 | 33 | | 1.54 | | | | | | | | 1.21 | |
| 24 | | 24 | 33 | | | | | | | | | | | |
| 25 | | 24 | 33 | | | | | | | | | | | |
| 26 | X | 24 | 260 | | 1.58 | | | | | | | | 2.23 | |
| 27 | | 24 | 260 | | | | | | | | | | | |
| 28 | | 24 | 0 | | | | | ĺ | | | | | | |
| 29 | | 24 | 0 | | | | | | | | | | | |
| 30 | | ļ | | | | Ī | | | | | Ì | | | |
| 31 | | | | | | | | | | | | | | |
| | | | 7.100 | | | | | | | | | | | |

 Total
 7,120

 Average
 246

 Maximum
 1,567



See Page 4 for instructions

| A. Public Water System (PW) | | ry 2024 | | | |
|-------------------------------|--|-----------------------------------|--|---------------------|--|
| PWS Name: Backwat | er Heights | | | PWS Iden | tification Number: 609-0099 |
| | nity [X] NonTransitent | [] NonCo | mmunity [] | Conse | cutive |
| Number of Service Conr | nections at End of Month: 107 | Total P | opulation Served at | End of Month: 20 | 67 |
| PWS Owner: Citrus V | Vaterworks Inc. | | | | |
| Contact Person: Share | on Purviance | Contact | Person's Title: U | Itility Manager | |
| | Address: 4939 Cross Bayou Boule | vard City: No | w Port Richey | State: FL | Zip Code: 34652 |
| Contact Person's Teleph | one Number: 866-753-8292 | Contact | Person's Fax Numbe | er: 727-848-7701 | |
| Contact Person's Email A | Address: spurviance@uswaterco | rp.net | | | |
| . Water Treatment Plant Inf | ormation | | | | |
| Plant Name: WTP 2 | | | | Plant Telephor | ne Number: |
| Plant Address: 5335 We | est Blade Lane | City: 1 | Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | | Purchased Finished Water | | Suite, 12 | Elp Cotto. 07100 |
| | y Operating Capacity of Plant, gallor | -1 | | | - |
| | ection 62-699.310(4), F.A.C.): D | | ss (per subsection 6 | 9-600 210(A) F A | C)·V |
| Licensed Operators: | Name: | License Class | License Number | | |
| Lead/Chief Operators: | Wendell Leigh | C | 14711 | Day(s)/SIIII(s) | VOIReu |
| Other Operators: | Jeffrev Hines | A | 19837 | | |
| outer operators. | Jessie Jose Hinojosa | C | 28938 | - | |
| |) | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | - | |
| II. Certification by Lead/Chi | ef Operator | 1 | | | The Wall of Wall Town |
| 190 | | | Cal | 1 | Part 1 of this report. I certify that the |
| information provided in this | report is true and accurate to the be | ort of my knowledge and belief. I | ortifutbat all drinki | i piani idenuned ii | chemicals used at this plant conform to N |
| | | | | | ditional operations records for this plant w |
| | | | | | nicals used and chemical feed rate, and (2) |
| | | | | | the PWS owner so that the PWS owner ca |
| | opies of this report, at a convenient le | | and the state of t | | |
| | - 1 | | | | 0.1151 |
| Wendell Leigh | 3/5/2024 | Wendell Leigh | | | C 14711 |
| Signature and Date | | Printed or Typed Nam | e | | License Number |
| DEP Form 62-555 900(300) | | | | | |

DEP Form 62-555 900(300) Effective August 28, 2003

19,995

26,300

Average

Maximum

Backwater Heights WTP 2 III. Daily Data for the Month/Year of: February 2024
Means of Achieving Four-Log Virus Inactivation/Removal *

Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)
Type of Disinfectant Residual Maintained in Distribution System V. Form Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

| | 100 | | | | | OT Calabata | N D D | | | | | | | The Road |
|---------------------|---|----------------|--|---------------------|--|-----------------------|-------------------------------------|-------------------|-----------------------------|------------------------------------|--|--|--|--|
| | 70 - 1 | | | 11/5 | | CT Calculations, or U | IV Dose, to Demonstrate Foundations | r-Log Varus fr | nactivation, if Applicable* | 100 | | UV Dose | | |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced, gal | Peak Flow Rate, and | Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L | | Lowest CT Provided | Temp of Water, °C | pH of Water, of Applicable | Minimum CT Required mg- mm/L | Lowest Operating UV Dose, mW- sec/cm ² | Minimum UV Dose Required, mW-sec/cm ² | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L. | Emergency or Abnormal Operating Conditions, Repa or Maintenance Work that Involves Taking Water System Components Out of Operation |
| 1 | | 24 | 25,650 | | | | | | | | | | | |
| 2 | X | 24 | 26,300 | | 3.05 | | | | | | | | 1.36 | |
| 3 | | 24 | 26,300 | | | | | | | | | | | |
| _4 | | 24 | 26,300 | | | | | | | | | | | |
| 5 | X | 24 | 24,900 | | 3.06 | | | | | İ | | | 1.67 | |
| 6 | | 24 | 24.900 | | | | | | | 1 | | | | |
| 7_ | X | 24 | 25,750 | | 3.09 | | | <u> </u> | 1 | | | <u> </u> | 0.97 | |
| 8 | | 24 | 25,750 | | <u> </u> | |] | _ | | | | | | |
| 9 | X | 24 | 17,367 | | 2.56 | | | | | | | | 2.00 | |
| 10 | | 24 | 17,367 | | | | | | | | | | | |
| 11 | | 24 | 17,367 | | | | | İ | | | İ | | | |
| 12 | X | 24 | 16,850 | | 0.26 | | | | | | j | | 1.28 | |
| 13 | | 24 | 16,850 | | | | | | | | | | | 1 |
| 14 | <u> </u> | 24 | 17,800 | | 1.49 | | | | | | | | 0.75 | |
| 15_ | | 24 | 17,800 | | | | | | | | | | | 1 |
| 16 | <u>X</u> | 24 | 17,400 | | 0.97 | | | | | | | | 1.36 | |
| 17 | | 24 | 17,400 | | | | | | | | | | | <u> </u> |
| 18 | | 24 | 17,400 | | | | | | | | | | | J |
| 19 | X | 24 | 17,400 | | 1.35 | | | | | | | | 1.28 | |
| 20 | | 24 | 17.400 | | | | | | | | | | | |
| 21 | X | 24 | 19,000 | | 0.20 | | |] | | | [| | 1.00 | |
| 22 | | 24 | 19,000 | | | | | | | | | | | |
| 23 | X | 24 | 18,400 | | 3.70 | | | | | | | | 1.54 | |
| 24 | | 24 | 18,400 | | | | | | | | | | | |
| 25 | | 24 | 18,400 | | | 1 | | | | | Ì | | | |
| 26 | X | 24 | 16,450 | | 2.95 | | | | | | | | 1.58 | |
| 27 | | 24 | 18,650 | | | | | | | | | | | |
| 28 | | 24 | 18,650 | | | | | | | | | | | |
| 29 | | 24 | 18,650 | | | | | | | | | | | |
| 30 | | | | | | | | 1 | | | | | | |
| 31 | | | | | | | | 1 | | | | | | |
| Γotal | | | 579,851 | | | | | | | | | | | |



MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| nmunit die W at | w Water System (C er System (PWS) I | Name: | | Backwater 6090099 | Heights | | W-AV 1999 - | | | |
|---------------------------|--|-----------------------------|--------------|---------------------|--|--------------|--------------|--------------|--------------|---------|
| | Plant 1 Name WTP 1 | Plant 2 Name WTP 2 | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plaut 9 Name | Total |
| Day f Month | 100,000 | tem (PW'S) Name: 100,000 | | | | | | | | |
| | | tem (PWS) Name: | | 1 | | | | | | |
| Day 1 | 0 | 16,833 | | | _ | _ | | | | 16,833 |
| Day 2 | 0 | 16,833 | | | | | _ | | | 16,833 |
| Day 3 | 0 | 16,833 | | | | | | | | 16,833 |
| Day 4 | 50 | 16,750 | - | | | | | | | 16,800 |
| Day 5 | 50 | 16,750 | | | | | | | | 16,800 |
| Day 6 | 100 | 17,750 | | | | | | | | 17,850 |
| Day 7 | 100 | 17,750 | | | | | | | | 17,850 |
| Day 8 | 100 | 17,233 | | | | | | | | 17,333 |
| Day 9 | 100 | 17,233 | | | | | | | | 17,333 |
| Day 10 | 100 | 17,233 | | | | | | | | 17,333 |
| Day 11 | 0 | 19,900 | | | The state of the s | | | | | 19,900 |
| Day 12 | 0 | 19,900 | | | | | | | | 19,900 |
| Day 13 | 0 | 20,900 | | | | | | | | 20,900 |
| Day 14 | 0 | 20,900 | | | | | | | | 20,900 |
| Day 15 | 0 | 18,667 | | | | | | | | 18,667 |
| Day 16 | 0 | 18,667 | | | | | | | | 18,667 |
| Day 17 | 0 | 18,667 | | | | | | | | 18,667 |
| Day 18 | 0 | 19,700 | | | | | 1 | | - | 19,700 |
| Day 19 | 0 | 19,700 | | | | | 2 | | | 19,700 |
| Day 20 | 0 | 20,500 | | | | | | | | 20,500 |
| Day 21 | 0 | 20,500 | | | | | | | | 20,500 |
| Day 22 | 0 | 19,333 | | | | - | | | | 19,333 |
| Day 23 | 0 | 19,333 | | | | | | | | 19,333 |
| Day 24 | 0 | 19,333 | | | | | | | | 19,333 |
| Day 25 | 0 | 18,550 | | * | | | | | | 18,550 |
| Day 26 | 0 | 18,550 | | | | | | | | 18,550 |
| Day 27 | 0 | 18,500 | | | | | | | | 18,500 |
| Day 28 | 0 | 18,500 | | | | | | | | 18,500 |
| Day 29 | 0 | 22,433 | | | | | | | | 22,433 |
| Day 30 | 0 | 22,433 | | | | | | | | 22,433 |
| Day 31 | 0 | 22,433 | | | | | | | | 22,433 |
| Total | · · · · · · · · · · · · · · · · · · · | 22,700 | | | The second second | | | | | 589,197 |
| Avg. | | | | | | | | | | 19,006 |
| **** | - | | | | | | | | | 22,433 |





See Page 4 for instructions

Effective August 28, 2003

| I. General Information for | | 2024 | | | |
|--|--|--------------------------------|----------------------------|-----------------------|--|
| A. Public Water System (PW | | | | | |
| | ter Heights | | | | ntification Number: 6090099 |
| PWS Type: Commu | | | NonCommunity [] | | ecutive |
| | nections at End of Month: 107 | | Fotal Population Serve | d at End of Month: 2 | 267 |
| the state of the s | Waterworks Inc. | | | | |
| | on Purviance | | ontact Person's Title: | Utility Manager | |
| | g Address: 4939 Cross Bayou Boule | | ity: New Port Richey | State: FL | Zip Code: 34652 |
| _ | none Number: 866-753-8292 | | ontact Person's Fax Nu | mber: 727-848-7701 | |
| Contact Person's Email | Address: spurviance@uswaterco | rp.net | | | |
| 3. Water Treatment Plant In | formation | | | | |
| Plant Name: WTP 1 | | | | Plant Telepho | one Number: |
| Plant Address: 5335 W | est Blade Lane | C | ity: Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | | [] Purchased Finished | | Journal 12 | Elp Code, Criss |
| Permitted Maximum D | ay Operating Capacity of Plant, gallor | ns per day: 100000 | | | • |
| | section 62-699.310(4), F.A.C.): D | | lant Class (per subsection | on 62-699.310(4), F.A | L.C.): V |
| Licensed Operators: | Name: | License (| | ber Day(s)/Shift(s) | |
| Lead/Chief Operators: | Angela Covell | I I | | | |
| Other Operators: | Jessie Jose Hinojosa | | 28938 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| II. Certification by Lead/Cl | niel Operator | | | | |
| | | ride any the lead/shief and | writer of the senter treet | mont plant identified | in Part 1 of this report. I certify that the |
| | | | | | at chemicals used at this plant conform to NSF |
| | | | | | dditional operations records for this plant were |
| | | | | | micals used and chemical feed rate, and (2) if |
| | | | | | the PWS owner so that the PWS owner can |
| | opies of this report, at a convenient le | | | operations records to | The I was owner so that the I was owner can |
| realist dietti, together with e | opies of this report, at a convenient is | octation for the last ten year | | | |
| Angela Cavell | 4/2/2024 | Angela Covell | | | B 23535 |
| Signature and Date | | Printed or Type | ed Name | - | License Number |
| DEP Form 62-555 900(300) | | | | | |

Page 1

6090099

19

100

Backwater Heights

Average Maximum WTP 1

| Dackwater Heights | 11 11 |
|---------------------------------------|------------|
| III. Daily Data for the Morth/Year of | March 2024 |

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

| The second secon | in aicii | _ |
|--|----------|---|
| Means of Achieving Four-Log Virus Inactivation/Remo | val * | |
| UltraViolet Radiation Other (I | Discribe |) |
| | _ | |

Free Chlorine

| | | | | | | OT 0.1 | | | | | | | |
|---------------------|---|----------------|---|---------------------|---|-----------------------|----------------------------|--------------|-----------------------------|--------------------------------------|--|---|---|
| | | | | | | CT Calculations, or U | V Dosc, to Demonstrate Fou | r-Lo Vrus li | nactivation, if Applicable* | | UV Dose | | |
| Day of the Month | Days Plans Staffed or visited by operator Place "X" | Hours Plant in | Not Quantity of Finshed Water Produced, gal | Peak Flow Rate, gpd | Lowest Residual Dustrictant Concentration (C) Before or at First Customer During Peak Flow. rm/L | | Lowest CT Provided | Temp of | pH of Water, if Applicable | Minimum CT Required, mg- min/L | Mminum UV Dose Required, mW-sec/cm ² | Lowest Residual Damfectant Concentration at Remote Point in Distribution System, mark | Emergency or Abnormal Operating Conditions, Repea or Maintenance Work that Involves Taking Water System Components Out or Operation |
| _ 1 | X | 24 | 0 | | 1.58 | | | | | | | 1.25 | |
| 2 | | 24 | 0 | | | | | | | | | | |
| 3 | | 24 | 0 | | | | | | | | | | |
| 4 | X | 24 | 50 | | 1.53 | | | | | | | 1.24 | |
| 5 | | 24 | 50 | | | | | | | | | | |
| 6 | X | 24 | 100 | | 2.11 | | | | | | | 1.62 | |
| 7 | | 24 | 100 | | | | | | | | | | |
| 8 | X | 24 | 100 | | 1.80 | | | | | | | 1.32 | |
| 9 | | 24 | 100 | | | | | | | | | | |
| 10 | | 24 | 100 | | | | | | | | | | |
| 11 | X | 24 | 0 | | 1.58 | | | | | - | | 1.12 | |
| 12 | | 24 | 0 | | | | | | | | | | |
| 13 | X | 24 | 0 | | 2.45 | | | 1 | | | | 1.83 | |
| 14 | | 24 | 0 | | | | | | | | | | |
| 15 | X | 24 | 0 | | 2.65 | | | | | | | 1.95 | |
| 16 | | 24 | 0 | | | | | | | | | | |
| 17 | | 24 | 0 | | | | | 1 | | | | | |
| 18 | X | 24 | 0 | | 2.71 | | | | | | | 1.89 | |
| 19 | | 24 | 0 | | | | | | | | | | |
| 20 | X | 24 | Q | | 2.69 | | | | | | | 1.83 | |
| 21 | | 24 | 0 | | | | | | | | | | |
| 22 | X | 24 | 0 | | 2.71 | | | | | | | 1.92 | |
| 23 | | 24 | 0 | | | | | | | | | | |
| _ 24 | | 24 | 0 | | | | | | | | | | |
| 25 | X | 24 | 0 | | 1.59 | | | İ | | | | 1.21 | |
| 26 | | 24 | 01 | | | | | | | | | | |
| 27 | X | 24 | 0 | | 3.21 | | | | | | | 2.69 | |
| 28 | | 24 | 0 | | | | | | | | | | |
| 29 | X | 24 | 0 | | 1.88 | | | 1 | | | | 1.42 | |
| 30 | | 24 | 0 | | | | | | | | | | |
| 31 | L | 24 | 0 | | | | | | | | | | |
| Total | | | 600 | | | | | | | | | | |



| see Fage 4 for instructions | | | | | | |
|--------------------------------|--|---------------------------|--------------|-------------------------|--------------------|---|
| I. General Information for the | ne Month/Year of: March | 2024 | | | | |
| A. Public Water System (PW) | S) Information | | | | | |
| PWS Name: Backwate | er Heights | | | | PWS Ider | ntification Number: 6090099 |
| PWS Type: Commun | nity [X] NonTransitent | [] | NonCo | mmunity [] | Conse | ecutive |
| Number of Service Conr | nections at End of Month: 107 | | Total P | opulation Served at | End of Month: 2 | 267 |
| PWS Owner: Citrus V | Vaterworks Inc. | | | | | |
| Contact Person: Share | on Purviance | | Contact 1 | Person's Title: U | tility Manager | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Boulev | vard | City: Ne | | State: FL | Zip Code: 34652 |
| Contact Person's Telepho | one Number: 866-753-8292 | | Contact 1 | Person's Fax Numbe | r: 727-848-7701 | • |
| Contact Person's Email A | Address: spurviance@uswatercor | p.net | | | | |
| . Water Treatment Plant Inf | ormation | | | | | |
| Plant Name: WTP 2 | | | | | Plant Telephor | ne Number |
| Plant Address: 5335 We | est Blade Lane | | City: I | Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | | Purchased Finishe | | | State. 112 | 2.11 Code. 54400 |
| | y Operating Capacity of Plant, gallon | • • | u water | | | |
| | ection 62-699.310(4), F.A.C.): D | is per day: 100000 | Dlant Cl | (| 9 600 910/4\ E A | CAN |
| Licensed Operators: | Name: | T | | ass (per subsection 6) | | |
| Lead/Chief Operators: | - | Licens | e Class B | License Number 23535 | Day(s)/Shift(s) V | Vorked |
| Other Operators: | Angela Covell | <u></u> | C | 28938 | | |
| Other Operators: | Jessie Jose Hinojosa | | | 20900 | | |
| | _ | | | | | |
| | | | | | | |
| | | | | | | - |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| II. Certification by Lead/Chi | of Operator | | | | | |
| | | | | | | |
| | | | | | | n Part 1 of this report. I certify that the |
| | | | | | | t chemicals used at this plant conform to NS |
| | | | | | | ditional operations records for this plant we |
| | | | | | | nicals used and chemical feed rate, and (2) if the PWS owner so that the PWS owner can |
| | opies of this report, at a convenient lo | | | mese additional ope | rations records to | the PWS owner so that the PWS owner can |
| retain them, together with co | ples of this report, at a convenient to | ocadon for the last ten y | ears. | | | |
| Angela Coxell | 4/2/2024 | Angela Covel | .1 | | | B 23535 |
| Signature and Date | | Printed or Ty | ped Nam | ie | | License Number |
| DEP Form 62-555 900(300) | | | | | | |

Page 1

6090099

18,987

22,433

Average

Maximum

Backwater Heights W

WTP 2

III. Daily Data for the Month/Year of:

March 2024

Means of Achieving Four-Log Virus Inactivation/Removal *

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)

| 1 | ENT | 100 | | stribution System: | - Va 6 | Free Chlorine | | | e (Chloramines) | | DE PERSONAL PROPERTY. | ne Dioxide | | |
|------------------|---|----------------|--|---------------------|--|--|--|----------------|----------------------------|-------------------------------------|---|---|---|---|
| | 13-15 0 | | LOW | | | CT Calculations, or t | IV Dose, to Demonstrate Fou | r-Log Virus Ir | activation, if Applicable* | | 147 | | NEW P | |
| | | 150 | | CT Calculations | | | | | | | | UV Dose | | Emergency or Abnormal |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced, gal | Peak Flow Rate, and | Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Plow, mg/L | Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes | Lowest CT Provided Before or at First Customer During Peak Flow. | Temp of | pH of Water, «Applicable | Minimum CT Required, mg- mm/L | Lowest Operating UV Dose, mW- sec/cm ² | Minimum UV Dose Required, mW-sec/cm ² | Lowest Residual Disinfectant Concentration at Remote Point | Operating Conditions; Repa or Maintenance Work that Involves Taking Water |
| 1 | X | 24 | 16,833 | reak row Kaic, ipu | 2.20 | During Peak Plow, numules | ing-may. | water. C | pri of water, a Appacable | mivL | sec/cm | mw-sec/cm | in Distribution System, mg/L 1.58 | Operation |
| 2 | | 24 | 16,833 | | 2.20 | | | | | | | | 1.00 | |
| 3 | | 24 | 16,833 | | | | | | | | | | | |
| 4 | Х | 24 | 16,750 | | 2.40 | | | | | | | | 1.53 | |
| 5 | | 24 | 16,750 | | | | | | | | | | 1.00 | |
| 6 | X | 94 | 17.750 | | 2.50 | | | | | İ | | | 2.11 | |
| 7 | | 24 | 17,750 | | | | | | | | | | 2.1.1 | |
| 8 | X | 24 | 17,233 | | 2.70 | | | | | | | | 1.80 | |
| 9 | 1 | 24 | 17,233 | | | | | | | | | | | |
| 10 | | 24 | 17,233 | | | | | | | | | | | |
| 11 | X | 24 | 19,900 | | 1.70 | | | | | | | | 1.58 | |
| 12 | | 24 | 19,900 | | | | | | | | | | | |
| 13 | X | 24 | 20,900 | | 1.86 | | | 1 | | - | | | 2.45 | |
| 14 | | 24 | 20,900 | | | | | | | | | | | |
| 15 | X | 24 | 18,667 | | 2.10 | | | | | | | | 2.65 | |
| 16 | | 24 | 18,667 | | | | | 1 | | | | | | |
| 17 | | 24 | 18,667 | | | | | | | | | | | |
| 18 | X | 24 | 19,700 | | 2.69 | | | | | | | | 2.71 | |
| 19 | | 24 | 19,700 | | | | | | | | | | | |
| 20 | l x | 24 | 20,500 | | 3.32 | | | | | | | ĺ | 2.69 | |
| 21 | | 24 | 20,500 | | | | | | | ĺ | | | | |
| 22 | X | 24 | 19,333 | | 2.80 | | i | | | | | | 2,71 | |
| 23 | | 24 | 19,333 | | | | Ī. | | | 1 | | | | |
| 24 | | 24 | 19,333 | | | | | | | | | | | |
| 25 | X | 24 | 18,550 | | 1.72 | | | | | | | | 1.59 | |
| 26 | | 24 | 18,550 | | | | | | | | | | | |
| 27 | X | 24 | 18,500 | | 2.52 | | | | | | | | 3.21 | |
| 28 | | 24 | 18,500 | | | | | 1 | | | | | | |
| 29 | X | 24 | 22,433 | | 1.85 | | | | | | | | 1.88 | |
| 30 | | 24 | 22,433 | | | | | | | | | | | |
| 31 | | 24 | 22,433 | | | | | | | | | | | |
| Total | | | 588,597 | | | | | | | | | | | |
| | | | | | | | | | | | | | | |



MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| olic Wat | er System (PWS) | Name: | | Backwater I 6090099 | | | | | | |
|------------------|-----------------------|----------------------------|--------------|------------------------|--------------|--------------|--------------|--------------|--------------|---------|
| | Plant 1 Name WTP 1 | Plant 2 Name WTP 2 | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plant 9 Name | Total |
| Day Month | 100,000 | tem (PWS) Name: 100,000 | | | | | | | | |
| | | tem (PWS) Name: | | | | | | | | |
| Day 1 | 900 | 19,050 | | | | | | | | 19,950 |
| Day 2 | 900 | 19,050 | | | | | | | | 19,950 |
| Day 3 | 0 | 17,900 | | | | | | | | 17,900 |
| Day 4 | 0 | 17,900 | | | | | | | | 17,900 |
| Day 5 | 700 | 24,167 | | | | | | | | 24,867 |
| Day 6 | 0 | 24,167 | | | | | | | | 24,167 |
| Day 7 | 0 | 24,167 | | | | | | | | 24,167 |
| Day 8 | 450 | 20,550 | | | | | | | | 21,000 |
| Day 9 | 450 | 20,550 | | | | | | | | 21,000 |
| Day 10 | 0 | 19,850 | | | | | | | | 19,850 |
| Day 11 | 0 | 19,850 | | | | | | | | 19,850 |
| Day 12 | 0 | 22,867 | | | | | | | | 22,867 |
| Day 13 | 0 | 22,867 | | | | | | | | 22,867 |
| Day 14 | 0 | 22,867 | | | | | | | | 22,867 |
| Day 15 | 400 | 20,350 | | | | | | | | 20,750 |
| Day 16 | 400 | 20,350 | | | | | | | 1 | 20,750 |
| Day 17 | 450 | 22,050 | | 1 | | | | WATER BEAT | | 22,500 |
| Day 18 | 450 | 22,050 | | | | | | | | 22,500 |
| Day 19 | 933 | 21,600 | | | | | | | | 22,533 |
| Day 20 | 450 | 21,600 | | _ | | | | | | 22,050 |
| Day 21 | 450 | 21,600 | | | | | | | | 22,050 |
| Day 22 | 50 | 22,050 | | | | | | | | 22,100 |
| Day 23 | 50 | 22,050 | | | | | | | | 22,100 |
| Day 24 | 2,700 | 27,050 | | | | | | | | 29,750 |
| Day 25 | 2,700 | 27,050 | | | 1 | | | | | 29,750 |
| Day 26 | 3,433 | 23,900 | | | | | | | | 27,333 |
| Day 27 | 2,700 | 23,900 | | | | | | | | 26,600 |
| Day 28 | 2,700 | | | | | | | | | _ |
| Day 28 Day 29 | 600 | 23,900 | | | - | - | | | | 26,600 |
| | | 22,950 | - | | - | | | | | 23,550 |
| Day 30 | 600 | 22,950 | | | | - | | | | 23,550 |
| Day 31 | | | | | | | | | | 000 0 |
| Total Avg. | | | | | | | | | | 683,668 |
| A YMT | | | | | | | | | | 22,789 |





See Page 4 for instructions

Effective August 28, 2003

| I. General Information for t L. Public Water System (PW | | 24 | | | | | |
|---|---|---|---|--|---|---|---|
| | ter Heights | | | | DIVIC I do | ntification Number: | 6090099 |
| PWS Type: Commu | | | NonCo | mmunity [] | | nuncauon ivumber: ecutive | 0090099 |
| | nections at End of Month: 107 | 1.1 | | opulation Served at 1 | _ | | |
| PWS Owner: Citrus V | | | Total 1 | opination served at 1 | and of Morni. 2 | | |
| | on Purviance | | Contact | Person's Title: U | tility Manager | | |
| | Address: 4939 Cross Bayou Bouleva | ord | | | State: FL | Zip Code: 34 | 1652 |
| | none Number: 866-753-8292 | | | Person's Fax Numbe | | Zip code. o | |
| Contact Person's Email | | o.net | Tomace. | | | | |
| . Water Treatment Plant In | | | | | | | |
| Plant Name: WTP 1 | TOTH MICH. | | | | Diana Talanti - | | |
| Plant Address: 5335 W | aut Plada I ana | | Citro T | Dunnallan | Plant Telepho | | 14499 |
| Type of water treated by | | 1 D 1 D: 11 | | Dunnellon | State: FL | Zip Code: 3 | 4433 |
| | 1-1 | Purchased Finish | ed Water | | | | |
| | y Operating Capacity of Plant, gallons | per day: 100000 | | | | ~\ | |
| patterns on many was your | section 62-699.310(4), F.A.C.): D | | - | ass (per subsection 62 | | manager and the same | |
| Licensed Operators: | Name: | Licens | se Class | License Number | Day(s)/Shift(s) V | Worked | |
| Lead/Chief Operators: | Angela Covell | | В | 23535 | | | |
| Other Operators: | Jessie Jose Hinojosa | | С | 28938 | | | |
| | | | | _ | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| II. Certification by Lead/Ch | ief Operator | | | | | | |
| information provided in this International Standard 60 o prepared each day that a lic applicable, appropriate trea | atment plant operator licensed in Floric is report is true and accurate to the best in other applicable standard referenced ensed operator staffed or visited this p timent process performance records. For opies of this report, at a convenient local | t of my knowledge and in subsection 62-555 lant during the month further more, I agree to | d belief. I .320(3), F. indicated to provide | certify that all drinking. A.C. I also certify the labove: (1) records of | ng water treatmer at the following a f amounts of che | nt chemicals used at dditional operations micals used and che | this plant conform to NSFs records for this plant were emical feed rate, and (2) if |
| Angela Coxell | 5/7/2024 | Angela Cove | | | | | 23535 |
| Signature and Date | | Printed or T | yped Nan | ne | | Licen | se Number |
| DEP Form 62-555 900(300) | | | | | | | |

6090099

749

3,433

Average Maximum

Backwater Heights

WTP 1

III. Daily Dasa for the Month/Year of April 2024 Mean of Achieving Four-Log Virus Inactivation/Removal *

Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)

| | | | | | | | V Dose, to Demonstrate For | ar-Log Virus I | nactivation of Applicable* | | | | | |
|---------------------|---|----------------|---|---------------------|---|---|---|----------------|----------------------------|--------------------------------------|--|--|---|---|
| | Days Plant | | - | | 1 | CT Calc | lations | | | | | UV Dusc | 11.0 | Emergency or Abnormal |
| Day of the Month | Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced | Peak Flow Rate, and | Lowest Residual Dainfectant Concentration (C) Before or at First Customer During Peak Flow and L | Disinfectant Contact Time (T) at C Measurement Point During Peak Flow minutes | Lowest CT Provided Before or at First Customer During Peak Flow ting-min/L | Temp of | pH of Water. If Applicable | Minimum CT Required, nig- mm/L | Lowest Operating UV Dose, mW- sec/cm ² | Minmum UV Dose Required, mW-sec/cm ² | Lowest Residual Dismfectant Concentration at Remote Point in Distribution System. | Operating Conditions, Repa or Maintenance Work that Involves Taking Water System Components Out o Operation |
| 1 | X | 24 | 900 | | 1.20 | | | | | | | | 1.04 | |
| 2 | | 24 | 900 | | | | | | | | | | | |
| 3 | X | 24 | 0 | | 1.90 | | | | | | | | 1.54 | |
| 4 | | 24 | 0 | | | | | | | | | | | |
| 5 | X | 24 | 700 | | 1.57 | | | | | | | | 1.13 | |
| 6 | | 24 | 0 | | | | | | | | | | | |
| 7 | | 24 | 0 | | | | | | | | | | | |
| 8 | X | 24 | 450 | | 3.35 | | | | | | | | 0.59 | |
| 9 | | 24 | 450 | | | | | | | | | | | |
| 10 | X | 24 | 0 | | 2.25 | | | | | | | | 1.42 | |
| 11 | | 24 | 0 | | | | | | | | | | | |
| 12 | X | 24 | 0 | | 1.32 | | | | | | | | 0.81 | |
| 13_ | | 24 | 0 | | | | | | | | | | | |
| 14_ | | 24 | 0 | | | | | | | | | | | |
| 15 | X | 24 | 400 | | 1.39 | | | | | | | | 0.92 | |
| 16 | | 24 | 400 | | | | | | | | | | | |
| 17 | X | 24 | 450 | | 1.93 | | | | | | | | 1.40 | |
| 18 | | 24 | 450 | | | | | | | | | | | |
| 19 | X | 24 | 933 | | 1.65 | | | | | | | | 1.31 | |
| 20 | | 24 | 450 | | | | | | | | | | | |
| 21 | | 24 | 450 | | | | | | | | | | | |
| 22 | X | 24 | 50 | | 1.58 | | | | | | | | 1.19 | |
| 23 | | 24 | 50 | | | | | | | | | | | |
| 24 | X | 24 | 2,700 | | 1.40 | | | 1 | | | | | 0.92 | |
| 25 | | 24 | 2,700 | | | | | | | | | | | |
| 26 | X | 24 | 3,433 | | 1.59 | | | | | | | | 1.17 | |
| 27 | | 24 | 2,700 | | | | | | | | | | | 7 |
| 28 | | 24 | 2,700 | | | | | | | | | | | |
| 29 | X | 24 | 600 | | 1.94 | | | | | | | | 1.51 | |
| 30 | | 24 | 600 | | | 2 | | | | | | | | |
| 31 | | | | | | | | | | | | | | |
| Total | | | 22,466 | | | | | | | | | | | |



| ee rage 4 for histractions | | | | | |
|-------------------------------|---|---------------------------------|-------------------------|--------------------|---|
| I. General Information for t | | 024 | | | |
| Public Water System (PW | | | | | |
| | er Heights | | | PWS Ide | ntification Number: 6090099 |
| PWS Type: Commu | | [] NonC | ommunity [] | Conse | ecutive |
| | nections at End of Month: 107 | Total | Population Served at | End of Month: 2 | 267 |
| PWS Owner: Citrus V | Waterworks Inc. | | | | |
| Contact Person: Share | on Purviance | Contac | t Person's Title: U | Jtility Manager | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Boulev | ard City: I | New Port Richey | State: FL | Zip Code: 34652 |
| Contact Person's Teleph | one Number: 866-753-8292 | Contac | t Person's Fax Numbe | er: 727-848-7701 | |
| Contact Person's Email A | Address: spurviance@uswatercor | p.net | | | |
| . Water Treatment Plant Inf | formation | | | | |
| Plant Name: WTP 2 | | | | Plant Telepho | ne Number: |
| Plant Address: 5335 We | est Blade Lane | City: | Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | | Purchased Finished Water | | | |
| Permitted Maximum Da | y Operating Capacity of Plant, gallon | • | - | | |
| | ection 62-699.310(4), F.A.C.): D | | Class (per subsection 6 | 52-699 310(4). F.A | (C)· V |
| Licensed Operators: | Name: | License Class | License Number | | |
| Lead/Chief Operators: | Angela Covell | B | 23535 | Duy (o) Dim((o) | VVOIRCE |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | - |
| o mor o permore. | posite your ransjosa | | | | |
| | | | | | |
| | | | | | to rec |
| | AND THE RESERVE AND ADDRESS OF THE PARTY OF | 30 1 d 30 d 30 d 30 d | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| II. Certification by Lead/Ch | of Operator | | | | |
| | 16.6 | | | | |
| | | | | | in Part 1 of this report. I certify that the |
| | | | | | nt chemicals used at this plant conform to NSI |
| | | | | | dditional operations records for this plant were |
| | | | | | emicals used and chemical feed rate, and (2) if to the PWS owner so that the PWS owner can |
| | opies of this report, at a convenient lo | | ie uiese addiuonai op | eradons records to | o the F w 5 owner so that the F w 5 owner can |
| retain them, together with co | ppies of this report, at a convenient ic | ocation for the last ten years. | | | |
| Angela Covell | 5/7/2024 | Angela Covell | | | B 23535 |
| Signature and Date | | Printed or Typed Na | me | | License Number |
| DEP Form 62-555 900(300) | | | | | |
| Effective August 28, 2003 | | Page 1 | | | |

6090099

22,040

27,050

Backwater Heights

Average

Maximum

WTP 2

H. Daily F. ra. or the Month Year of:

Means of Achieving Four-Log Virus Inactivation/Removal *

April 2024

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

Other (Discribe) UltraViolet Radiation

| | - | 7 | | | | CT Calculations or t | IV Dose to Demonstrate For | r-Lon Vms fo | activation of Applicable* | | | | | |
|---------------------|---|-----------------------------|--|--------------------|---|---|--|--------------|----------------------------|------------------------------------|---|-------------------------|---|---|
| | | | | | | CT Calc | | | autimition, it represents | | UV Dose | | | Emergency or Abnormal |
| Day of the Month | Days Plant Staffed or visited by operator Place 'X" | Hours Plant in Operation | Net Quantity of Finished Water Produced 14 | Peak Flow Rate, 頭d | Lowest Resulual Disinfectant Concentration (C) Before or at First Customer During Peak Flow: http:// | Distribution Contact Time (T) at C Measurement Point Durant Peak Flow minutes | Lowest CT Provided Before or at First Customer During Peak Flow, m. mm/L | Temp of | pH of Water, if Applicable | Manmum CT Required, mg- mn/L | Lowest Operating UV Dose, mW- sec/cm ² | Mmmmm UV Dose Required, | Lowest Residual Disinfectant Concentration at Romote Point in Distribution System | Operating Conditions Repair or Mamtenance Work that Involves Taking Water |
| 1_ | X | 24 | 19,050 | | 1.42 | | | | | | | | 1.20 | |
| 2 | | 24 | 19,050 | | | | | | | | | | | |
| 3 | X | 24 | 17,900 | | 2.02 | | | | | | | | 1.90 | |
| 4 | | 24 | 17,900 | | | | | | | | | | | |
| 5 | X | 24 | 24,167 | | 1.85 | | | | | | | | 1.57 | |
| 6 | | 94 | 24.167 | | | | | | | | | | | |
| 7 | | 24 | 24.167 | | | | | | | | | | | |
| - 8 | X | 24 | 20,550 | | 1.80 | | | | | | | | 3.35 | |
| 9 | | 24 | 20,550 | | | | | | | | | | | |
| 10 | X | 24 | 19 850 | | 2.10 | | | | | | | | 2.25 | |
| 11 | | 24 | 19.850 | | | | | | | | | | | |
| 12 | X | 24 | 22.867 | | 1.98 | | | | | | | | 1.32 | |
| 13 | | 24 | 22,867 | | | | | | | | | | | |
| 14 | | 24 | 22,867 | | | | | | | | | | | |
| 15 | X | 24 | 20,350 | | 1.85 | | | | | | | | 1.39 | |
| 16 | | 24 | 20,350 | | | | | | | | | | | |
| 17 | X | 24 | 22,050 | | 1.94 | | | | | | | | 1.93 | |
| 18 | | 24 | 22,050 | | | | | | | | | | | |
| 19 | X | 24 | 21,600 | | 1.29 | | | | | | | | 1.65 | |
| 20_ | | 24 | 21,600 | | | | | | | | | | | |
| 21 | | 24 | 21,600 | | | | | | | | | | | |
| 22 | X | 24 | 22,050 | | 1.18 | | | | | | | | 1.58 | |
| 23 | | 24 | 22,050 | | | | | | | | | | | |
| 24 | X | 24 | 27,050 | | 1.58 | | | | | | | | 1.40 | |
| 25 | | 24 | 27,050 | | | | | | | | 1 | | | |
| 26 | X | 24 | 23,900 | | 1.19 | | | | | | | | 1.59 | |
| 27 | | 24 | 23,900 | | | | | | | | | | | |
| 28 | | 24 | 23,900 | | | | | | | | | | | |
| 29 | X | 24 | 22 950 | | 1.65 | | | | | | | | 1.94 | |
| 30 | | 24 | 22,950 | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | | |
| Total | | | 661,202 | | | | | | | | | | | |
| | | | | | | | | | | | | | | |



MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| mmunit | nedWater Producti Wa <u>ter System (C</u> er System (PWS) I | | ear of | May 2024 Backwater 6090099 | Heights | • | | | | |
|-----------------|---|---|--------------|----------------------------------|--------------|--------------|--------------|--------------|--|---------|
| | Plant 1 Name WTP 1 | Plant 2 Name WTP 2 | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plant 9 Name | Total |
| Day of Month | 100,000 | tem (PWS) Name: 100,000 tem (PWS) Name: | | T. | | | L | | | |
| Day 1 | 3,050 | 26,400 | T | _ | - | _ | | | With a control of the | 29,450 |
| Day 2 | 3,050 | 26,400 | | | _ | | - | | | 29,450 |
| Day 3 | 1,267 | 24,167 | | | | | | - | | 25,434 |
| Day 4 | 3,050 | 24,167 | | | | | | | | 27,217 |
| Day 5 | 3,050 | 24,167 | | | - | | | | | 27,217 |
| Day 6 | 400 | 25,050 | | i | | | | | | 25,450 |
| Day 7 | 400 | 25,050 | | | | | | | | 25,450 |
| Day 8 | 150 | 24,350 | | | | | | | | 24,500 |
| Day 9 | 150 | 24,350 | | | | | | | | 24,500 |
| Day 10 | 467 | 24,533 | | | | | | | | 25,000 |
| Day 11 | 150 | 24,533 | | | | - | | | | 24,683 |
| Day 12 | 150 | 24,533 | | | | | | | | 24,683 |
| Day 13 | 800 | 19,950 | | | 1 | + | | | | 20,750 |
| Day 14 | 800 | 19,950 | | | | | | | | 20,750 |
| Day 15 | 0 | 23,650 | | | | 1 | | | 1 | 23,650 |
| Day 16 | 0 | 23,650 | | | | | | | | 23,650 |
| Day 17 | 0 | 22,000 | | | | | | | | 22,000 |
| Day 18 | 0 | 22,000 | | | | | | | | 22,000 |
| Day 19 | 0 | 22,000 | | | | | | | | 22,000 |
| Day 20 | 1,000 | 25,700 | | | | | | han. | | 26,700 |
| Day 21 | 1,000 | 25,700 | | | | | | | | 26,700 |
| Day 22 | 150 | 21,000 | | | | | | | | 21,150 |
| Day 23 | 150 | 21,000 | | | | | | _ | | 21,150 |
| Day 24 | 667 | 24,433 | | | | | _ | | | 25,100 |
| Day 25 | 150 | 24,433 | | | | Terrorian (| | | | 24,583 |
| Day 26 | 150 | 24,433 | | | | | | | | 24,583 |
| Day 27 | 950 | 23,350 | | | | | | | | 24,300 |
| Day 28 | 950 | 23,350 | | | | | | | | 24,300 |
| Day 29 | 400 | 24,150 | | | | | | | | 24,550 |
| Day 30 | 400 | 24,150 | | | | | | | | 24,550 |
| Day 31 | 763 | 23,750 | | | | | | | | 24,513 |
| Total | | tro make | | | | | | | | 760,013 |
| Avg. | | | | | | | | | | 24,517 |
| Min | | | | | | | | | | 29,450 |





See Page 4 for instructions

| I. General Information for t | | | | | |
|--------------------------------------|--|----------------------|-----------------------------------|--------------------|---|
| A. Public Water System (PW | | | | DIFFCE | 15 1 N 1 0000000 |
| PWS Name: Backwat PWS Type: Commu | er Heights nity [X] NonTransitent [] | N. C | ·. [3 | | tification Number: 6090099 |
| | nections at End of Month: 107 | | mmunity [] Opulation Served at 1 | Consec | |
| | Vaterworks Inc. | 1 otal r | opulation Served at i | end of Month: 20 |)/ |
| | on Purviance | C + - | D I | L12. M | |
| | Address: 4939 Cross Bayou Boulevard | | | tility Manager | 7' 0 1 94659 |
| | one Number: 866-753-8292 | | Person's Fax Numbe | State: FL | Zip Code: 34652 |
| Contact Person's Email A | | Contact | Person's Fax Numbe | r: /2/-848-//01 | |
| | | | | | |
| . Water Treatment Plant Inf | ormation | | | | |
| Plant Name: WTP 1 | | | | Plant Telephon | |
| Plant Address: 5335 We | | | Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | Plant: [X] Raw Ground [] Purch | ased Finished Water | r | | |
| Permitted Maximum Da | y Operating Capacity of Plant, gallons per day: | 100000 | | | |
| Plant Category (per subs | ection 62-699.310(4), F.A.C.): D | Plant Cl | ass (per subsection 6 | 2-699.310(4), F.A. | C.): V |
| Licensed Operators: | Name: | License Class | License Number | | 119 1 |
| Lead/Chief Operators: | Angela Covell | B | 23535 | | |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | |
| | | | | | |
| | | | | | |
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| | | | | | |
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| | | | | | |
| | - | | | | |
| II. Certification by Lead/Ch | el Operator | | | | |
| 4-000-4 | | 1 1/1:0 | Cal | 1 | Data Cali and Taxical and |
| | tment plant operator licensed in Florida, am th | | | | |
| | report is true and accurate to the best of my keep other applicable standard referenced in subse | | | | |
| | ensed operator staffed or visited this plant duri | | | | |
| | ment process performance records. Further m | | | | |
| | opies of this report, at a convenient location for | | ulese additional ope | radons records to | ule 1 W 3 Owner so that the 1 W 3 Owner Can |
| ream alem, wgearer with co | pies of this report, at a convenient location for | the last tell years. | | | |
| Angela Coxell | | Angela Covell | | | B 23535 |
| Signature and Date | | Printed or Typed Nan | ne | | License Number |
| DEP Form 69-555 900(200) | | | | | |

DEP Form 62-555 900(300) Effective August 28, 2003

6090099

Backwater Heights WTP 1

III. Daily Data for the Month/Year of: May 2024

Means of Achieving Four-Log Virus Inactivation/Removal * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe) Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* CT Calculations UV Dose Emergency or Abnormal Days Plant perating Conditions, Repair Staffed or Lowest CT Provided Lowest Lowest Residual Disinfectant or Mantenance Work that visited by Concentration (C) Before or at Disinfectant Contact Time (T) Before or at First Customer Net Quantity of Minimum CT Operating UV Involves Taking Water Day of the operator Hours Plant in Finished Water First Customer During Peak at C Measurement Point During Peak Flow, Required mg-Dose, mW-Minimum UV Dose Required, Concentration at Remote Point System Components Out of Temp of Operation Month Place "X" Operation Produced, mi Peak Flow Rate, and Flow surf. During Peak Flow minutes Water, °C pH of Water, if Applicable mW-sec/cm2 in Distribution System, mg/L 1 X 24 3,050 2.42 1.81 2 24 3,050 3 X 24 1,267 2.36 1.74 4 24 3.050 5 24 3,050 6 24 400 1.53 0.92 7 24 400 8 X 24 150 1.57 0.87 9 24 150 10 X 24 467 1.31 0.75 11 24 150 12 24 150 13 X 24 800 1.35 0.81 14 24 800 15 X 0 24 1.51 1.42 16 24 0 17 X 24 0 1.27 1.18 18 24 0 19 24 0 20 X 24 1,000 1.02 0.65 21 24 1,000 22 X 24 150 0.81 1.11 23 150 24 24 667 X 24 0.93 1.14 150 2524 26 24 150 27 X 24 950 2.04 1.81 28 24 950 29 X 24 400 1.56 1.32 30 24 400 31 X 24 763 1.46 1.28

 Total
 23,664

 Average
 763

 Maximum
 3,050



See Page 4 for instructions

Effective August 28, 2003

| I. General Information for the | | 24 | | | | | | | |
|--------------------------------|--|---------------------------|---|-----------------------|---------------------------|--|--|--|--|
| . Public Water System (PW) | | | | | | | | | |
| | er Heights | ſ 1 | N. C | . (1 | | ntification Number: 6090099 | | | |
| | nity X NonTransitent nections at End of Month: 107 | 1.1 | NonCommunity [] Consecutive Total Population Served at End of Month: 267 | | | | | | |
| | Vaterworks Inc. | | I otal P | opulation Served at | End of Month: 2 | 307 | | | |
| | on Purviance | | 0 | D (CC) I | Tailian N. Communication | | | | |
| | Address: 4939 Cross Bayou Bouleva | | | | Itility Manager State: FL | 77. 0 1 94679 | | | |
| | one Number: 866-753-8292 | ura | the same of the same | Person's Fax Numbe | | Zip Code: 34652 | | | |
| Contact Person's Email A | | not | Comaci | reison's rax Numbe | r: /2/-040-//01 | | | | |
| | · _ · | o.Het | | | | | | | |
| . Water Treatment Plant Inf | ormation | | | | II. | | | | |
| Plant Name: WTP 2 | | | Ta | | Plant Telephor | | | | |
| Plant Address: 5335 We | | | * | Dunnellon | State: FL | Zip Code: 34433 | | | |
| Type of water treated by | [] |] Purchased Finishe | ed Water | | | | | | |
| | y Operating Capacity of Plant, gallons | per day: 100000 | | | | | | | |
| | ection 62-699.310(4), F.A.C.): D | | Plant Cla | ass (per subsection 6 | 2-699.310(4), F.A | .C.): V | | | |
| Licensed Operators: | Name: | Licens | e Class | License Number | Day(s)/Shift(s) V | Worked | | | |
| Lead/Chief Operators: | Angela Covell | | В | 23535 | | | | | |
| Other Operators: | Jessie Jose Hinojosa | | C | 28938 | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |
| I. Certification by Lead/Chi | ef Operator | | | | | | | | |
| the undersigned water trea | ment plant operator licensed in Florid | da, am the lead/chief o | perator o | f the water treatmen | t plant identified i | n Part 1 of this report. I certify that the | | | |
| | | | | | | t chemicals used at this plant conform to NS | | | |
| | | | | | | dditional operations records for this plant we | | | |
| | | | | | | micals used and chemical feed rate, and (2) i | | | |
| | | | | these additional ope | rations records to | the PWS owner so that the PWS owner can | | | |
| retain them, together with co | opies of this report, at a convenient loc | cation for the last ten y | ears. | | | | | | |
| Angela Covell | 6/1/2024 | Angela Cove | 11 | | | B 23535 | | | |
| Signature and Date | | Printed or Ty | yped Nan | ne | | License Number | | | |
| DEP Form 69-555 900(300) | | | | | | | | | |

31

Average Maximum

Total

X

24

23,750

736,349 23,753

26,400

1.30

6090099

Backwater Heights WTP 2

III. Daily Data for the Month/Year of: av 2024 Means of Achieving Four-Log Virus Inactivation/Removal Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) UltraViolet Radiation Other (Discribe) Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide CT Calculations, or UV Dose, to Demonstrate Four-Log Virus functivation, if Applicable* CT Calculations UV Dose Emergency or Abnormal Days Plant Operating Conditions, Repair Lowest CT Provided Staffed or Lowest Residual Disinfectant Lowest or Maintenance Work that visited by Net Quantity of Concentration (C) Before or at Disinfectant Contact Time (T) Before or at First Custome Operating UV Involves Taking Water Manamum CT Lowest Residual Dismfectant Day of the operator Hours Plant in Finshed Water at C Measurement Point During Peak Flow. Required, mg-Dose, mW- Minmum UV Dose Required, First Customer During Peak Temp of Concentration at Remote Point System Components Out of Place "X" Operation Produced mil Peak Flow Rate, god During Peak Flow, minutes mW-sec/cm2 Flow mg/L Water, °C PH of Water, of Applicable n Datribution System, mg/L X 24 26,400 1.50 1.10 2 24 26,400 3 X 24 24,167 1.70 1.05 4. 24 24,167 5 24 24,167 6 9/4 25:050 1.50 1.19 7 25.050 24 8 24 24.350 \mathbf{X} 1.50 1.21 9 24 24.350 10 24 X 24,533 1.50 1.07 11 24 24,533 12 24 24,533 13 X 24 19,950 1.30 0.86 14 24 19.950 15 \mathbf{X} 24 23,650 1.70 1.43 16 24 23,650 17 X 24 22.000 1.50 1.26 18 24 22,000 19 24 22.000 20 X 24 25,700 1.00 1.1521 24 25,700 22 \mathbf{X} 24 21,000 1.00 0.99 23 24 21,000 24 X 24 24,433 1.10 0.97 25 2424,433 26 24 24,433 27 X 24 23,350 2.10 1.91 28 24 23,350 29 X 24 24,150 1.50 1.38 30 24 24,150

0.99



MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| nununit | v Water System (C er System (PWS) I | ion for the Month Ye WS) Name: Name: | ear of | June 2024 Backwater 6090099 | | | | | | The state of the s |
|-----------------|--|--|--------------|-----------------------------------|--------------|--------------|--------------|--------------|--|--|
| | Plant 1 Name WTP 1 | Plant 2 Name WTP 2 | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plant 9 Name | Total |
| Day of Month | 100,000 | tem (PW/S) Name: 100,000 | | <u> </u> | | | | | | recognized fight character spaces page |
| | | tem (PWS) Name: | N. Carlotte | | | | | | | |
| Day 1 | 300 | 26,033 | | _ | | | | | | 26,333 |
| Day 2 | 300 | 26,033 | | | | | | | | 26,333 |
| Day 3 | 750 | 23,300 | | | | | | | | 24,050 |
| Day 4 | 750 | 23,300 | | | | | | | | 24,050 |
| Day 5 | 4,100 | 26,450 | | | | | | | | 30,550 |
| Day 6 | 4,100 | 26,450 | | | | | | | | 30,550 |
| Day 7 | 1,667 | 30,467 | | | | | | | | 32,134 |
| Day 8 | 1,667 | 30,467 | | | | | | | | 32,134 |
| Day 9 | 1,667 | 30,467 | | | | | | | | 32,134 |
| Day 10 | 0 | 23,400 | | | | | | | | 23,400 |
| Day 11 | 0 | 23,400 | | | | | | | | 23,400 |
| Day 12 | 650 | 23,150 | | | | | | | | 23,800 |
| Day 13 | 650 | 23,150 | | | | | | | | 23,800 |
| Day 14 | 733 | 25,000 | | | | | | | | 25,733 |
| Day 15 | 733 | 25,000 | | | | | | | | 25,733 |
| Day 16 | 733 | 25,000 | | | | | _ | | | 25,733 |
| Day 17 | 1,050 | 24,550 | | | | | | | | 25,600 |
| Day 18 | 1,050 | 24,550 | | | | | | | | 25,600 |
| Day 19 | 1,200 | 24,800 | | | | | | | | 26,000 |
| Day 20 | 1,200 | 24,800 | | | | | | | | 26,000 |
| Day 21 | 1,500 | 24,667 | | | | | - | | and the same of th | 26,167 |
| Day 22 | 1,500 | 24,667 | | | | | | | | 26,167 |
| Day 23 | 1,500 | 24,667 | | | | | | | | 26,167 |
| Day 24 | 300 | 20,950 | | | | | | | | 21,250 |
| Day 25 | 300 | 20,950 | | | | | | | | 21,250 |
| Day 26 | 0 | 21,850 | | | - | | | | | 21,850 |
| Day 27 | 0 | 21,850 | 'n | - | | | | | | 21,850 |
| Day 28 | 0 | 20,200 | | 1 | | | | | | 20,200 |
| Day 29 | 0 | 20,200 | | | | | | | | 20,200 |
| Day 30 | 0 | 20,200 | | | | | | | | 20,200 |
| Day 31 | | | | | | | | | | 2.,2.00 |
| Total | | | | ب | | | | | | 758,368 |
| Avg. | | | | | | | | | | 25,279 |
| Min | | | | | | | | | | 32,134 |





See Page 4 for instructions

| I. General Information for t | ne Month/Year of: June 20 | 24 | | | | | |
|--|--|--|---|---|---|--|--|
| . Public Water System (PW | | | | | | | |
| PWS Name: Backwat | er Heights | | | PWS Iden | tification Number: 6090099 | | |
| PWS Type: Commu | nity [X] NonTransitent | 1] N | onCommunity [] | Conse | cutive | | |
| Number of Service Com | nections at End of Month: 107 | T | otal Population Served | at End of Month: 26 | 67 | | |
| PWS Owner: Citrus V | Vaterworks Inc. | | | | | | |
| Contact Person: Share | on Purviance | Co | ntact Person's Title: | Utility Manager | | | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Boulev | ard Cit | y: New Port Richey | State: FL | Zip Code: 34652 | | |
| Contact Person's Teleph | one Number: 866-753-8292 | Co | ntact Person's Fax Nu | mber: 727-848-7701 | | | |
| Contact Person's Email | Address: spurviance@uswatercorp | p.net | | | , | | |
| . Water Treatment Plant In | formation | | | | | | |
| Plant Name: WTP 1 | | | | Plant Telephon | ne Number: | | |
| Plant Address: 5335 We | est Blade Lane | Ci | y: Dunnellon | State: FL | Zip Code: 34433 | | |
| Type of water treated by | | Purchased Finished | | | 1 | | |
| Permitted Maximum Da | y Operating Capacity of Plant, gallons | • | | | | | |
| | ection 62-699.310(4), F.A.C.): D | | ant Class (per subsection | n 62-699.310(4). F.A. | C.): V | | |
| Licensed Operators: | Name: | License C | | per Dav(s)/Shift(s) W | 10 10 | | |
| Lead/Chief Operators: | Angela Covell | B | 23535 | ACT DAVIS/OFFICE | TOTACC | | |
| Other Operators: | Jessie Jose Hinojosa | C | | | | | |
| | 5 | | | | | | |
| | | | | | | | |
| | | | | 1 | | | |
| | | | | | | | |
| | | | | | | | |
| | | and the second s | | i i | | | |
| | | | | | | | |
| II. Certification by Lead/Ch | ief Operator | The state of the s | | | | | |
| information provided in this International Standard 60 or prepared each day that a lice applicable, appropriate treat | report is true and accurate to the best other applicable standard referenced ensed operator staffed or visited this part of the part of th | st of my knowledge and be d in subsection 62-555.320 plant during the month ind Further more, I agree to pr | lief. I certify that all dri (3), F.A.C. I also certificated above: (1) recor- ovide these additional | nking water treatment y that the following ad ds of amounts of chem | n Part 1 of this report. I certify that the chemicals used at this plant conform to NSI ditional operations records for this plant wer nicals used and chemical feed rate, and (2) if the PWS owner so that the PWS owner can | | |
| Angela Covell | 7/8/2024 | Angela Covell | | | B 23535 | | |
| Signature and Date Printed or Typed Nar | | | | ame License Number | | | |

DEP Form 62-555 900(300) Effective August 28, 2003

| PWS | Iden | tifica | tion | Num | her: |
|-----|------|--------|------|-----|------|
| | | | | | |

6090099

Backwater Heights WTP 1

III. Daily Data for the Month/Year of: June 2024

Means of Achieving Four-Log Virus Inactivation/Removal *

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)
Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

| vpe of L | Disinlectan | Residual | Maintained in Di | stribution System: | | (Free Chlorine | Combine | d Chlorin | e (Chloramines) | | Chlori | ne Dioxide | | |
|---------------------|---|----------------|--|---------------------|--|-----------------------|-----------------------------|--|-----------------------------|--------------------------------------|--|---|--|--|
| | | | 1-1-1-1 | | | 07011 | | | | | | | | |
| | | | | | | CT Calculations, or C | IV Dose, to Demonstrate Fou | E-LOS VIRUS IS | nactivation, if Applicable* | | UV Dose | | | |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced, | Peak Flow Rate, and | Lowest Residual Desirfectant Concentration (C) Before or at First Customer During Peak Flow | | Lowest CT Provided | Temp of | pH of Water, if Applicable | Minimum CT Required ing- min/L | Lowest Operating UV Dose, mW- sec/cm ² | Minimum UV Dose Required mW-sec/cm ² | Lowest Residual Disinfectant Concentration at Remote Poss in Distribution System, mg/L | Emergency or Abnormal Operating Conditions; Rep or Maintenasice Work the Involves Taking Water System Components Out Operation |
| 1 | | 24 | 300 | | | | | | | | | | | |
| 2 | | 24 | 300 | | | | | | | | | | | |
| 3 | X | 24 | 750 | | 1.49 | | | | | | | | 1.31 | |
| 4 | | 24 | 750 | | | Ī | | | | | | | | |
| 5 | X | 24 | 4,100 | | 2.05 | | | | | | | | 0.67 | |
| 6 | | 24 | 4.100 | | | | | | | | | | | |
| 7 | X | 24 | 1,667 | | 1.57 | | | | | Ì | | | 1.29 | |
| 8 | | 24 | 1,667 | | | | | 1 | | | | | | |
| 9 | | 24 | 1,667 | | | | | | | | | | | |
| 10 | X | 24 | 0 | | 1.48 | | | | | | | | 1.16 | |
| 11 | | 24 | 0 | | | | | } | | | | | | |
| 12 | X | 24 | 650 | | 1.69 | | 1 | | | | | | 1.41 | |
| 13 | | 24 | 650 | | | | | | | | I | | | |
| 14 | X | 24 | 733 | | 1.26 | | | | | | 1 | | 1.10 | |
| 15 | | 24 | 733 | | | | |] | | | | | | |
| 16 | | 24 | 733 | | | | | | | Ĭ | | | | |
| 17 | X | 24 | 1,050 | | 1.14 | | | | | | | | 0.96 | |
| 18 | | 24 | 1,050 | | | | | | | | | | | |
| 19 | X | 24 | 1,200 | | 1.75 | | | | | | | | 1.42 | |
| 20 | | 24 | 1.200 | | | | | | | 1 | 1 | | | |
| 21 | X | 24 | 1,500 | | 1.49 | | | | | 1 | 1 | | 1.28 | |
| 22 | | 24 | 1,500 | | | | <u> </u> | <u>] </u> | | 1 | | | 1 | |
| 23 | | 24 | 1,500 | | | | | | | | | | | |
| 24 | X | 24 | 300 | | 1.51 | | | | | | | | 0.42 | |
| 25 | 1 | 24 | 300 | | | | | | | | | | | |
| 26 | X | 24 | 0 | | 1.67 | | | | | | | | 1.38 | |
| 27 | | 24 | 0 | | | | | | | | | | | |
| 28 | X | 24 | 0 | | 2.34 | | | | | | | | 2.18 | |
| 29 | | 24 | 0 | | | | | | | | | | | |
| 30 | 1 | 24 | 0 | | | | | | | | | | | |
| 31 | 1 | | 1 | | | | | | | | | | | |
| otal | | | 28,400 | | | | | | | | | | | |

 Total
 28,400

 Average
 947

 Maximum
 4,100



See Page 4 for instructions

Effective August 28, 2003

| occ rage 4 for monthermons | | | | | |
|--------------------------------|--|---------------------------------|------------------------|------------------|---|
| I. General Information for the | | 24 | | | |
| A. Public Water System (PW | S) Information | | | | |
| PWS Name: Backwat | er Heights | | | PWS Iden | ntification Number: 6090099 |
| PWS Type: Commu | Company To At a | [] NonCo | mmunity [] | Conse | cutive |
| Number of Service Conr | nections at End of Month: 107 | Total I | Population Served at I | End of Month: 2 | 67 |
| PWS Owner: Citrus V | Waterworks Inc. | | | | |
| - | on Purviance | | Person's Title: U | tility Manager | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Bouleva | ord City: N | ew Port Richey | State: FL | Zip Code: 34652 |
| Contact Person's Teleph | one Number: 866-753-8292 | Contact | Person's Fax Number | r: 727-848-7701 | |
| Contact Person's Email A | Address: spurviance@uswatercorp | o.net | | | |
| B. Water Treatment Plant Inf | ormation | | | | |
| Plant Name: WTP 2 | | | | Plant Telephor | ne Number: |
| Plant Address: 5335 We | est Blade Lane | City: | Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | | Purchased Finished Wate | | 20000 | 2100 |
| , | y Operating Capacity of Plant, gallons | | | | |
| | ection 62-699.310(4), F.A.C.): D | 7 | ass (per subsection 62 | 2-699 310(4) F A | C). V |
| Licensed Operators: | Name: | License Class | - 14v | | |
| Lead/Chief Operators: | Angela Covell | B | 23535 | Jay(s)/Smit(s) v | vorked |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | |
| Outer Operators. | Jessie Jose Hillojosa | - | 20300 | | |
| | | | | | |
| | | | | | - |
| | The same of the sa | | | - | |
| | | | | | ·- |
| | | | - | | |
| | - | | | | |
| II. Certification by Lead/Ch | of Operator | 100 | | | |
| | | | | | |
| | | | | | n Part 1 of this report. I certify that the |
| | | | | | chemicals used at this plant conform to NS |
| | | | | | Iditional operations records for this plant we |
| | | | | | nicals used and chemical feed rate, and (2) if the PWS owner so that the PWS owner can |
| | opies of this report, at a convenient loc | | mese additional oper | anons records to | the FWS owner so that the FWS owner can |
| retain them, together with et | ples of this report, at a convenient loc | Lation for the last tell years. | • | | |
| Angela Covell | 7/8/2024 | Angela Covell | | | B 23535 |
| Signature and Date | | Printed or Typed Nar | ne | | License Number |
| DEP Form 62-555 900(300) | | | | | |

6090099

24,332

30,467

Average Maximum

Backwater Heights

WTP 2

HI. Daily Data for Le Month/Year of June 2024

Means of Achieving Four-Log Virus Inactivation/Removal *

Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)

| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced | CT Calculations, or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable* | | | | | | | | | | |
|---------------------|---|----------------|---|--|--|--|--|---------|----------------------------|--------------------------------------|--|---|---|--|
| | | | | CT Calculations UV Dose | | | | | | | UV Dose | | Emergency or Abnormal | |
| | | | | Peak Flow Rate and | Lowest Residual Deinfectant Concentration (C) Before or at First Customer During Peak Flow. me/l. | | Lowest CT Provided Before or at First Customer During Peak Flow. | Temp of | oH of Water, it Applicable | Minimum CT Required, mg- min/L | Lowest Operating UV Dose, mW- sec/cm ² | Minimum UV Dose Required, mW-sec/cm ² | Lowest Residual Disinfectant Concentration at Remote Point in Distribution States and | Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation |
| 1 | | 24 | 26,033 | | | | | | | | | | | |
| 2 | | 24 | 26,033 | | | | | | | | | | | |
| 3 | X | 24 | 23,300 | | 1.32 | | | | | | | | 1.49 | |
| 4 | | 24 | 23,300 | | | | | | | | | | | |
| 5 | X | 24 | 26,450 | | 1.48 | | | | | | | | 2.05 | |
| 6 | | 24 | 26,450 | | | | | | | | | | | |
| 7 | X | 24 | 30,467 | | 1.65 | | | | | | | | 1.57 | |
| 8 | | 24 | 30,467 | | | | | | | | | | | |
| 9 | | 24 | 30,467 | | | | | | | | | | | |
| 10 | X | 24 | 23,400 | | 1.41 | | | | | | | | 1.48 | |
| 11 | | 24 | 23,400 | | | | | | | | | | | |
| 12 | X | 24 | 23.150 | | 1.72 | | | | | | | | 1.69 | 1 |
| 13 | | 24 | 23,150 | | | | | | | | | | | |
| 14 | X | 24 | 25,000 | | 0.95 | | | | | _ | | | 1.26 | |
| 15 | | 24 | 25,000 | | | | | 1 | | | | | | |
| 16 | | 24 | 25,000 | | | | | | | | | | | |
| 17 | X | 24 | 24,550 | | 0.93 | | | | | | | | 1.14 | |
| 18 | 1 | 24 | 24,550 | | | | | | | | | | | |
| 19 | X | 24 | 24,800 | | 1.63 | | | | | | | | 1.75 | |
| 20 | | 24 | 24.800 | | | | | | | | | | | |
| 21 | X | 24 | 24,667 | | 1.11 | | | 1 | | | | | 1.49 | |
| 22 | | 24 | 24,667 | | | | | | | | | | | |
| 23 | | 24 | 24.667 | | | | | | | | | | | |
| 24 | X | 24 | 20,950 | | 0.99 | | | | | | | | 1.51 | |
| 25 | | 24 | 20.950 | | | | | | | | | | | |
| 26 | X | 24 | 21,850 | | 1.50 | | | | | | | | 1.67 | |
| 27 | | 24 | 21,850 | | | | | | | | | | | |
| 28 | X | 24 | 20,200 | | 1.80 | | | | 1 | | | | 2.34 | |
| 29 | | 24 | 20,200 | | | | | | | | | | | |
| 30 | | 24 | 20,200 | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | | |
| Cotal | otal | | 729,968 | | | | | | | | | | | |



MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| mmunit | hedWater Producti v Water System (C ter System (PWS) I | on for the Month Ye WS) Name: Name: | ear of | July 2024 Backwater 6090099 | Heights | | | | | _ |
|-----------------|--|---|--------------|-----------------------------------|--------------|--------------|--------------|--------------|--------------|---------|
| | Plant 1 Name WTP 1 | Plant 2 Name WTP 2 | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plant 9 Name | Total |
| Day of Month | Public Water Syst | tem (PWS) Name: | | | | | | | | - |
| | | tem (PWS) Name: | | | - | | | | | |
| Day 1 | 0 | 26,000 | | | | | | | | 26,000 |
| Day 2 | 0 | 26,000 | | | | | | | | 26,000 |
| Day 3 | 50 | 30,300 | | | | | | | | 30,350 |
| Day 4 | 50 | 30,300 | | | | | | 1 | | 30,350 |
| Day 5 | 1,567 | 28,267 | | | | | | | | 29,834 |
| Day 6 | 50 | 28,267 | | | | | | 1 | | 28,317 |
| Day 7 | 50 | 28,267 | | | | | | | | 28,317 |
| Day 8 | 0 | 28,000 | | | | | | | | 28,000 |
| Day 9 | 0 | 28,000 | _ | | | - | | | | 28,000 |
| Day 10 | 800 | 30,450 | | | | | | | | 31,250 |
| Day 11 | 800 | 30,450 | | - | | | | | | 31,250 |
| Day 12 | 1,900 | 32,267 | | | | | | | | 34,167 |
| Day 13 | 800 | 32,267 | | | | | | | | 33,067 |
| Day 14 | 800 | 32,267 | | | | - | | | | 33,067 |
| Day 15 | 0 | 25,100 | | | | | | | | 25,100 |
| Day 16 | . 0 | 25,100 | | | | | | | | 25,100 |
| Day 17 | 750 | 27,550 | - | | | | | | | 28,300 |
| Day 18 | 750 | 27,550 | | | | | | | | 28,300 |
| Day 19 | 1,500 | 28,733 | | | | | | | | 30,233 |
| Day 20 | 750 | 28,733 | | | | | | | | 29,483 |
| Day 21 | 750 | 28,733 | | | | | | | | 29,483 |
| Day 22 | 600 | 26,750 | | | | 1 | | | | 27,350 |
| Day 23 | 600 | 26,750 | | | | | | | | 27,350 |
| Day 24 | 650 | 26,450 | | | | | | | | 27,100 |
| Day 25 | 650 | 26,450 | | | | | | - | | 27,100 |
| Day 26 | 833 | 28,333 | | - | | | | | | 29,166 |
| Day 27 | 650 | 28,333 | | | | | | | | 28,983 |
| Day 28 | 650 | 28,333 | 1 | | | - | | | | 28,983 |
| Day 29 | 1,000 | 27,750 | | | | | | | | 28,750 |
| Day 30 | 1,000 | 27,750 | | | | - | | | | 28,750 |
| Day 31 | 850 | 29,750 | | | | | | - | _ | 30,600 |
| Total | - 0.70 | 25,150 | | | | | | | | 898,100 |
| Avg. | | | | | | | | | | 28,971 |
| Min | | | | | | | | | | 34,167 |





See Page 4 for instructions

Effective August 28, 2003

| I. General Information for t A. Public Water System (PW | | 24 | | | |
|---|--|--|---|---|---|
| | ter Heights | | | DWC 14 | ntification Number: 6090099 |
| PWS Type: Commu | | [] NonC | ommunity [] | | ecutive |
| 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 | nections at End of Month: 107 | | Population Served at | | |
| | Waterworks Inc. | Totat | Topinadon Served at | Liid of Molidi. 2 | 507 |
| | on Purviance | Contac | t Person's Title: | Itility Manager | |
| | Address: 4939 Cross Bayou Boule | | | State: FL | Zip Code: 34652 |
| | one Number: 866-753-8292 | | t Person's Fax Number | | Zap code. o rooz |
| Contact Person's Email | | | V V V V V V V V V V V V V V V V V V V | | |
| B. Water Treatment Plant In | <u> </u> | | | | |
| Plant Name: WTP 1 | · · · · · · · · · · · · · · · · · · · | | | Diant Tals - 4 | ma Nīsamahama |
| Plant Address: 5335 W | est Blade Lane | 0: | Dunnellon | Plant Telepho State: FL | Zip Code: 34433 |
| Type of water treated by | | | | State: FL | Zip Code: 54455 |
| | (· ·) - · · · · · · · · · · · · · · · · | [] Purchased Finished Water | er | | |
| | y Operating Capacity of Plant, gallor | | 0 / 1 / 0 | 0.000.010(4) 17.4 | C) W |
| | section 62-699.310(4), F.A.C.): D | | class (per subsection 6 | | 14 (T) T T T T T T T T T T T T T T T T T |
| Licensed Operators: | Name: | License Class | License Number | Day(s)/Shift(s) | Worked |
| Lead/Chief Operators: | Angela Covell | B | 23535 | | |
| Other Operators: | Jessie Jose Hinojosa | | 28938 | | |
| | <u></u> | | | | |
| 3 3 8 15 1 | - | | | | |
| | The state of the s | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| II. Certification by Lead/Ch | iaf Operator | | | | |
| | | | | | |
| information provided in this International Standard 60 of prepared each day that a lice applicable, appropriate trea | s report is true and accurate to the be r other applicable standard reference ensed operator staffed or visited this | est of my knowledge and belief. ed in subsection 62-555.320(3), I plant during the month indicate Further more, I agree to provid | I certify that all drinki F.A.C. I also certify th d above: (1) records o | ng water treatment at the following a of amounts of che | in Part 1 of this report. I certify that the at chemicals used at this plant conform to NSF dditional operations records for this plant were micals used and chemical feed rate, and (2) if the PWS owner so that the PWS owner can |
| Angela Covell | 8/7/2024 | Angela Covell | | | В 23535 |
| Signature and Date | | Printed or Typed Na | me | | License Number |
| DEP Form 62-555 900(300) | | | | | |

Page 1

6090099

Backwater Heights WTP 1
III. Daily Data for the Month/Year of: Inly 2024

Means of Achieving Four-Log Virus Inactivation/Removal * Free Chlorine Chlorine Dioxide Ozonc Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)

Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* CT Calculations UV Dose Emergency or Abnormal Days Plant perating Conditions, Repair Staffed or Lowest CT Provided Lowest Residual Disinfectant or Maintenance Work that Concentration (C) Before or at Disinfectant Contact Time (T) Before or at First Custome visited by Operating UV Net Quantity of Lowest Residual Disinfectant Involves Taking Water Minimum CT operator During Peak Flow, Dose, mW-Minimum UV Dose Required. Day of the Hours Plant m Finished Water First Customer During Peak at C Measurement Point Required, mg-Concentration at Remote Point System Components Out of Operation Produced gal Peak Flow Rate, and Flow, mg/L During Peak Flow, minutes me-mm/L Water, *C pH of Water, if Applicable in Distribution System, mg/L Operation mm/L X 24 0 1.92 1.55 24 2 0 3 X 24 50 1.85 1.70 50 4 24 5 X 24 1,567 2.00 1.50 6 24 50 7 24 50 8 0 X 24 1.42 1.31 9 24 0 10 X 24 800 1.94 1.76 11 24 800 12 24 1.900 X 1.42 1.31 13 24 800 14 24 800 15 X 24 0 1.39 1.28 16 24 0 17 X 24 750 1.67 1.49 18 24 750 19 24 1,500 1.48 1.32 20 24 750 21 24 750 22 X 24 600 1,22 0.61 23 24 600 24 24 650 1.16 1.34 25 24 650 26 833 1.21 X 24 1.36 27 24 650 28 24 650 1.36 29 X 24 1.000 1.52 30 1.000 24 1.19 1.35

 31
 X
 24
 850

 Total
 18,850

 Average
 608

 Maximum
 1,900



See Page 4 for instructions

| I. General Information for the | ne Month/Year of: July 2024 | | | | | |
|---|--|--|------------------------------------|---|--|--|
| A. Public Water System (PWS | | | | | | |
| | er Heights | | | | PWS Iden | ntification Number: 6090099 |
| PWS Type: Commun | | | NonCo | mmunity [] | Conse | and the same of th |
| | ections at End of Month: 107 | | | opulation Served at I | | |
| | Vaterworks Inc. | _ | 12 0002 2 | opinadon del ved ne i | Sitt of Mortan 2 | • |
| Contact Person: Sharo | n Purviance | 1 | Contact 1 | Person's Title: U | tility Manager | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Boulevard | | | | State: FL | Zip Code: 34652 |
| | one Number: 866-753-8292 | | | Person's Fax Number | | |
| Contact Person's Email A | | | | | | |
| B. Water Treatment Plant Inf | | | | | | |
| Plant Name: WTP 2 | | | | | Plant Telephor | ne Number |
| Plant Address: 5335 We | st Blade Lane | 1, | City: I | Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | | Purchased Finished | | dimenon | State. Th | Zap code. 04400 |
| - 11 | y Operating Capacity of Plant, gallons pe | | 1 Walci | | | |
| | ection 62-699.310(4), F.A.C.): D | | Di Cl. | | 0.600.910(4) E.A. | CVV |
| Licensed Operators: | Name: | | | ss (per subsection 62 | | |
| Lead/Chief Operators: | | License | | License Number 23535 | Day(s)/Shift(s) V | Vorked |
| Other Operators: | Angela Covell Jessie Jose Hinojosa | | B C | 28938 | | |
| odici Operators. | Jessie Jose Timojosa | | 0 | 20300 | | |
| | Promise and promise apply of the control of the con | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| II. Certification by Lead/Chi | ef Operator | | | | | |
| information provided in this International Standard 60 or prepared each day that a lice | other applicable standard referenced in used operator staffed or visited this plant | Fmy knowledge and l subsection 62-555.3. t during the month in | belief. I 20(3), F. ndicated | certify that all drinking. A.C. I also certify the above: (1) records of | ng water treatment at the following ad f amounts of chen | t chemicals used at this plant conform to No Iditional operations records for this plant we nicals used and chemical feed rate, and (2) |
| applicable, appropriate treati retain them, together with co | ment process performance records. Furth pies of this report, at a convenient location | her more, I agree to on for the last ten ye | provide ars. | these additional oper | rations records to | the PWS owner so that the PWS owner ca |
| Angela Covell | 8/7/2024 | Angela Covell | | | | B 23535 |
| Signature and Date | | Printed or Typ | oed Nam | c | | License Number |
| DED E 60 555 000(200) | | | | | | |

6090099

28,363

32,267

Average

Maximum

Backwater Heights WTP 2

| III. Daily Means of | Data for t Achieving | he Month/ Four-Log V | Year of: Virus Inactivation | July 2024 n/Removal * | Free Chlorin | e Chlo | rine Dioxide | | Ozone | Combined | Chlorine (0 | Chloramines) | | |
|------------------------|---|-------------------------|--|--------------------------|--|--|---|-------------------|-----------------------------|--|--|---------------------------|---|--|
| UltraViole | et Radiatio | n | 0 | ther (Discribe) | | | | | | | | | | |
| Type of L | Disinfectan I | Residual M | Maintained in Di | istribution System: | <u> </u> | Free Chlorine | Combine | d Chlorir | ne (Chloramines) | | Chlorii | ne Dioxide | | |
| | 100 | | | | | | V Dose, to Demonstrate Fou | r-Log Virus I | nactivation, if Applicable* | | 4-4- | | | |
| | Days Plant | 1 | | | | CT Calc | lations | _ | | | | UV Dose | | Emergency or Abnormal |
| Day of the Month | Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced, gal | Peak Flow Rate, and | Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, ma/L | Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes | Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L | Temp of Water, °C | pH of Water, if Applicable | Minimum CT Required, mg- min/L | Lowest Operating UV Dose, mW- sec/cm ² | Minimum UV Dose Required, | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L | Operating Conditions; Repail or Maintenance Work that Involves Taking Water System Components Out of Operation |
| 1 | X | 24 | 26,000 | | 1.90 | | | | | | | | 1.41 | |
| 2 | | 24 | 26,000 | | | | | | Ì | | | | | |
| 3 | X | 24 | 30,300 | | 1.70 | | | | | | | | 1.45 | |
| 4 | | 24 | 30,300 | | | | | | | | | | | |
| 5 | X | 24 | 28,267 | | 1.65 | | | | | | | | 1.00 | |
| 6 | | 24 | 28.267 | | | | | i | | ĺ | | | | |
| 7 | | 24 | 28,267 | | | | | Ì | | | | | | |
| 8 | X | 24 | 28,000 | | 3.00 | | | Ì | | i i | | | 2.41 | |
| 9 | | 24 | 28,000 | | | ĺ | | | | | | | | |
| 10 | X | 24 | 30,450 | | 2.10 | 1 | | 1 | 1 | | | | 1.86 | |
| 11_ | 1 | 24 | 30,450 | | 2.10 | | | | | | | | 1.00 | |
| 12 | X | 24 | 32,267 | | 1.60 | | | 1 | | | 1 | | 1.39 | |
| 13 | 11 | 24 | 32,267 | | 1.00 | | | | | 1 | 1 | | 1.03 | l e |
| 14 | | 24 | 32,267 | | | | | i | 1 | 1 | | | | |
| 15 | X | 24 | 25,100 | | 1.50 | | | | | 1 | 1 | | 1.29 | |
| 16 | 1 | 24 | 25,100 | | 1.50 | | | | 1 | | 1 | | 1.23 | |
| 17 | X | 24 | 27,550 | | 1.70 | | | <u> </u> | | <u>, </u> | 1 | | 1.59 | |
| 18_ | | 24 | 27,550 | | 1.70 | | <u> </u> | 1 | | 1 | | | 1.00 | |
| 19 | X | 24 | 28,733 | | 1.50 | 1 | | 1 | | | | | 1.41 | |
| 20 | A | 24 | 28,733 | | 1.00 | <u> </u> | Ì | 1 | Ì | | | | 1.41 | |
| 21 | | 24 | 28,733 | | | 1 | | i | | | | | | |
| 22 | X | 24 | 26,750 | | 0.30 | | | 1 | | | 1 | | 0.61 | |
| 23 | | 24 | 26,750 | | 0.30 | 1 | Ī | | <u> </u> | İ | | | 0.01 | <u> </u> |
| 24 | v | 24 | 26,450 | | 1.01 | 1 | 1 | i - | 1 | 1 | | 1 | 1.09 | |
| 24_ 25 | X | | | | 1.21 | 1 | | 1 | | | 1 | | 1.09 | |
| | 1 37 | 24 | 26,450 | | 1.50 | 1 | | 1 | 1 | | | 1 | 1.90 | |
| 26 | X | 24 | 28,333 | | 1.56 | 1 | | 1 | | | | | 1.32 | 1 |
| 27 | | 24 | 28,333 | | | 1 | 1 | 1 | | | | | 1 | |
| 28 | - | 24 | 28,333 | | 1 10 | | 1 | <u> </u> | 1 | 1 | | | 1.00 | l . |
| 29 | X | 24 | 27,750 | | 1.43 | | | <u> </u> | 1 | | | | 1.29 | |
| 30 | 1 | 24 | 27,750 | | | | | 1 | 1 | | 1 | | | |
| 31 | X | 24 | 29,750 | | 1.50 | | | ! | | | L | | 1.36 | |
| Total | | | 879,250 | | | | | | | | | | | |



MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| munit | ne <u>Wat ir Producti</u> Water <u>System (C'</u> er System (PWS) 1 | on for the Month Ye WS) Name: Vame: | ear of | August 209 Backwater 6090099 | 24 Heights | | | | | |
|--------------|---|---|--------------|------------------------------------|---------------|--|--------------|----------------------------|--------------------------|---------|
| | Plant 1 Name WTP 1 | Plant 2 Name WTP 2 | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plant 9 Name | Total |
| Day Month | 100,000 | em (PWS) Name: 100,000 | | | | | | | | |
| | Public Water Syst | | | | | Amendada da la companya de la compan | | Page-gg-Property State Law | and the pattern makes at | |
| Day 1 | 850 | 29,750 | | | | | | | | 30,600 |
| Day 2 | 1,233 | 25,300 | | | | | | | | 26,533 |
| Day 3 | 1,233 | 25,300 | | | | | | | | 26,533 |
| Day 4 | 1,233 | 25,300 | | | | | | | | 26,533 |
| Day 5 | 550 | 28,900 | | | | | | | | 29,450 |
| Day 6 | 550 | 28,900 | | | | | | | | 29,450 |
| Day 7 | 1,950 | 25,650 | | | | | | | | 27,600 |
| Day 8 | 1,950 | 25,650 | | | | | | | | 27,600 |
| Day 9 | 2,500 | 30,300 | | | | | | | | 32,800 |
| Day 10 | 2,500 | 30,300 | | | | | | | | 32,800 |
| Day 11 | 2,500 | 30,300 | | | | | 1 | | | 32,800 |
| Day 12 | 2,850 | 31,300 | | | | | | | | 34,150 |
| Day 13 | 2,850 | 31,300 | | | | | | | | 34,150 |
| Day 14 | 4,550 | 31,050 | | | | 1 | | | | 35,600 |
| Day 15 | 4,550 | 31,050 | | - | | | İ | | | 35,600 |
| Day 16 | 2,900 | 30,633 | | | | | | | | 33,533 |
| Day 17 | 2,900 | 30,633 | | | | | | | | 33,533 |
| Day 18 | 2,900 | 30,633 | | | | | | | | 33,533 |
| Day 19 | 1,900 | 28,000 | | | | | | | | 29,900 |
| Day 20 | 1,900 | 28,000 | | | | | - | | | 29,900 |
| Day 21 | 2,050 | 28,950 | | | | | | | | 31,000 |
| Day 22 | 2,050 | 28,950 | | | | | | | | 31,000 |
| Day 23 | 2,167 | 29,767 | | | | | | | | 31,934 |
| Day 24 | 2,167 | 29,767 | | | | | | | | 31,934 |
| Day 25 | 2,167 | 29,767 | | | | | | | | 31,934 |
| Day 26 | 2,850 | 30,400 | | | | | | 1 | | 33,250 |
| Day 27 | 2,850 | 30,400 | | | | | | | | 33,250 |
| Day 28 | † 0 | 30,750 | | | | | | | | 30,750 |
| Day 29 | 0 | 30,750 | - | | - | | - | | | 30,750 |
| Day 30 | 5,067 | 33,000 | - | | | | | | | 38,067 |
| Day 31 | 5,067 | 33,000 | | | | - | | | | 38,067 |
| Total | 0,000 | 30,000 | | | 1 | | | | | 984,534 |
| Avg. | | | | | | | | | | 31,759 |
| ravg. | | | | | | | | | | 31,/59 |





See Page 4 for instructions

| I. General Information for t A. Public Water System (PW | | t 2024 | | | | |
|--|--|---|--|---|---|--|
| | er Heights | | | | PWS Iden | tification Number: 6090099 |
| | nity [X] NonTransitent | | NonCo | mmunity [] | Consec | |
| | nections at End of Month: 107 | . , | | Population Served at 1 | | |
| PWS Owner: Citrus V | Waterworks Inc. | | | -1 | | |
| Contact Person: Share | on Purviance | | Contact | Person's Title: U | tility Manager | |
| | Address: 4939 Cross Bayou Boul | evard | | | State: FL | Zip Code: 34652 |
| | one Number: 866-753-8292 | | | Person's Fax Numbe | V 7 | 2.5 6040. |
| Contact Person's Email | | orp.net | 0 | | | |
| B. Water Treatment Plant In | | | | | | |
| Plant Name: WTP 1 | | | | | Plant Talankan | a Numbau |
| Plant Address: 5335 We | est Rlade I and | | City. 1 | Dunnellon | Plant Telephon State: FL | Zip Code: 34433 |
| Type of water treated by | | Purchased Finis | | | State: FL | Zip Code: 04400 |
| | [] | | ned water | | | |
| | y Operating Capacity of Plant, gallo | ons per day: 100000 | DI . CI | () | 3 COO 010/0 E A | 0. ¥7 |
| | ection 62-699.310(4), F.A.C.): D | 0.7 | | ass (per subsection 6) | | |
| Licensed Operators: | Name: | Lice | nse Class | License Number | Day(s)/Shift(s) W | orked |
| Lead/Chief Operators: | Angela Covell | | В | 23535 | | |
| Other Operators: | Jessie Jose Hinojosa | | С | 28938 | | |
| | | | | | | |
| | | | | | | V |
| | | | | | | |
| | | | | - | | |
| | | | | | | |
| | | | | | | |
| TV (2) 26 1 1 1 1/23 | | | | | | |
| II. Certification by Lead/Ch | el Operator | | | - 1 K | | |
| information provided in this International Standard 60 or prepared each day that a lice applicable, appropriate treat | report is true and accurate to the b rother applicable standard reference ensed operator staffed or visited this | pest of my knowledge a ced in subsection 62-55 s plant during the mon s. Further more, I agree | nd belief. I 55.320(3), F th indicated to provide | certify that all drinking. A.C. I also certify the above: (1) records o | ng water treatment at the following add f amounts of chem | Part 1 of this report. I certify that the chemicals used at this plant conform to NSF ditional operations records for this plant were licals used and chemical feed rate, and (2) if the PWS owner so that the PWS owner can |
| Angela Covell | 9/5/2024 | Angela Co | | | | B 23535 |
| Signature and Date | | Printed or | Typed Nan | ne | | License Number |
| DEP Form 62-555 900(300) | | | | | | |

Page 1

Effective August 28, 2003

| Backwate III. Daily Means of | Data for t | the Month/ F ur-Log V | Virus Inactivation | WTP 1 August 20 | 24 Free Chlorin | ne Chlo | orine Dioxide | | Ozone | Combined | Chlorine (C | Chloramines) | | |
|------------------------------------|---|--------------------------|---|---------------------|---|-----------------|----------------------------|-----------------|-----------------------------|-------------------------------------|-------------|--------------------------|---|--|
| Type of I | Disinfectan | t Residual I | Maintained in Di | stribution System: | X | K Free Chlorine | Combine | d Chlorin | e (Chloramines) | | Chlorin | ne Dioxide | | |
| | | | | | | | iV Dose to Demonstrate Fou | ar-Log Virus Is | nactivation, if Applicable* | | | | | |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in Operation | Net Quantity of Finished Water Produced | Peak Flow Rate, ppd | Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, 1987L | | Lowest CT Provided | Temp of | pH of Water, if Applicable | Manamam CT Required, mg- mm/L | | Minimum UV Dose Required | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System. mark | Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation |
| 1 | | 24 | 850 | | | | | | | | | | | |
| 2 | X | 24 | 1,233 | | 1.07 | | | | | | | | 0.96 | |
| 3 | 1 | 24 | 1,233 | | | | | | | | | | | |
| 4 | | 24 | 1,233 | | | | | | | | | | | |
| 5 | X | 24 | 550 | | 1.45 | | | | | | | | 1.06 | |
| 6 | | 24 | 550 | | | | | | | | | | | |
| 7 | X | 24 | 1,950 | | 1.06 | | | | | | | | 1.01 | |
| - 8 | | 24 | 1,950 | | | | | | | | | | | |
| 9 | X | 24 | 2,500 | | 1.31 | | | | | | | | 1.15 | |
| 10 | | 24 | 2,500 | | | | | | | | | | | |
| 11 | | 24 | 2,500 | | | | | | | | | | | |
| 12 | X | 24 | 2,850 | | 0.91 | | | | | | | | 0.68 | |
| 13 | | 24 | 2,850 | | | | | | | | | | | |
| 14 | X | 24 | 4,550 | | 0.73 | | | | | | | | 0.46 | |
| 15 | | 24 | 4,5 50 | | | | | | | | | | | |
| 16 | X | 24 | 2,900 | | 0.98 | | | | | | | | 0.67 | |
| 17 | | 24 | 2,900 | | | | | | | | | | | |
| 18 | | 24 | 2,900 | | | | | | | | | | | |
| 19 | X | 24 | 1,900 | | 2.31 | | | | | | | | 0.40 | |
| 20 | | 24 | 1,900 | | | | | | | | | | | |
| 21 | X | 24 | 2,050 | | 0.91 | | 1 | <u> </u> | | | | | 0.76 | |
| 22 | | 24 | 2,050 | | | | 1 | | | | | | | |
| 23 | X | 24 | 2,167 | | 1.42 | | | | | | | | 1.21 | |
| 24 | | 24 | 2,167 | | | | 1 | | | | | | | |
| 25 | | 24 | 2,167 | | | | | | | | | | | |
| 26 | X | 24 | 2,850 | | 1.11 | 1 | | | | | | | 0.89 | |
| 27 | | 24 | 2,850 | | | | | | | | } | <u> </u> | | |

1.19

0.53

31 24 5.067 Total 70,784 2,283 Average Maximum 5,067

24

24

24

0

0

5,067

1.41

0.81

X

X

28

29 30



Effective August 28, 2003

| bee Page 4 for instructions | | | | | | |
|--------------------------------|--|--------------------------|-------------|--------------------------|----------------------|--|
| I. General Information for the | | 2024 | | | | |
| A. Public Water System (PW | | | | | | |
| | er Heights | | | | PWS Ident | ification Number: 6090099 |
| PWS Type: Commu | | | ~ , - | mmunity [] | Consec | |
| | nections at End of Month: 107 | | Total P | opulation Served at l | End of Month: 26 | 7 |
| and the second second second | Waterworks Inc. | | | | | |
| | on Purviance | | | | Itility Manager | |
| | Address: 4939 Cross Bayou Boulev | vard | | | State: FL | Zip Code: 34652 |
| | one Number: 866-753-8292 | | Contact | Person's Fax Numbe | r: 727-848-7701 | |
| Contact Person's Email A | Address: spurviance@uswatercor | p.net | | | - | |
| 3. Water Treatment Plant Inf | ormation | | | | | |
| Plant Name: WTP 2 | | | | | Plant Telephone | e Number: |
| Plant Address: 5335 We | est Blade Lane | | City: I | Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | _ | Purchased Finish | - | | Journal Lab | <u> </u> |
| | y Operating Capacity of Plant, gallon | | ca maici | | | ·• |
| | ection 62-699.310(4), F.A.C.): D | is per day. Toooo | Plant Cl | ass (per subsection 69 | 9 600 210(A) F A (| 7). V |
| Licensed Operators: | Name: | Linan | se Class | License Number | | |
| Lead/Chief Operators: | Angela Covell | Licens | B | 23535 | Day(s)/Shirt(s) W | orked |
| Other Operators: | Jessie Jose Hinojosa | | C | 28938 | | |
| Odici Operators. | Jessie Jose Timojosa | _ | | 20300 | | |
| | | | ·- | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| II. Certification by Lead/Chi | of Operator | | | | - | |
| | | | | | | |
| | | | | | | Part 1 of this report. I certify that the |
| Information provided in this | report is true and accurate to the be | st of my knowledge and | d belief. I | certify that all drinkin | ng water treatment | chemicals used at this plant conform to NS |
| | | | | | | litional operations records for this plant we icals used and chemical feed rate, and (2) i |
| | | | | | | he PWS owner so that the PWS owner car |
| | opies of this report, at a convenient lo | | | mese additional ope | rations records to t | HE I WYS OWNER SO THAT THE I WYS OWNER CA. |
| retain them, together with et | pies of this report, at a convenient to | cadon for the last terry | cais. | | | |
| Angela Covell | 9/5/2024 | Angela Cove | 11 | | | B 23535 |
| Signature and Date | | Printed or T | yped Nan | ne | | License Number |
| DEP Form 62-555 900(300) | | | | | | |

Page 1

6090099

Backwater Heights WTP 2

III. Daily Data for the Month Year of:

Means of Achieving Four-Log Virus Inactivation/Removal * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe)

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

| 1 7 3 5 | | | | stribution System: | Company of the | Free Chlorine | | | ne (Chloramines) | | | ne Dioxide | | |
|---------------------|---|----------------|--|---------------------|--|--|--|---------------|----------------------------|--------------------------------------|---------------------------------------|---|---|---|
| | | 100 | 53 | | | CT Calculations on I | JV Dosc, to Demonstrate Fou | u Las Vina I | mention of Amelocklet | | | | and the same | |
| | | | | | Mark Barrier | CT Calc | | u-Log value p | activation, if Applicable | | | UV Dose | | Emergency or Abnormal |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced, gal | Peak Flow Rate, and | Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L | Disinfectant Contact Time (1) at C Measurement Point During Peak Flow, minutes | Lowest CT Provided Before or at First Customer During Peak Flow, mg-mm/L | Temp of | pH of Water, at Applicable | Minimum CT Required, mg- min/L | Lowest Operating UV Dose, mW- sec/cm² | Minimum UV Dose Required, mW-sec/cm ² | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L | Operating Conditions Rep or Maintenance Work the Involves Taking Water System Components Out |
| 1_ | | 24 | 29,750 | | | | | | | | | | | |
| 2 | X | 24 | 25,300 | | 1.06 | | | | | | | | 1.07 | |
| _3 | | 24 | 25,300 | | | | | | | | | | | |
| 4 | | 24 | 25,300 | | | | | | | | | | | |
| 5 | <u> </u> | 24 | 28,900 | | 1.51 | | | | | | | | 1.45 | |
| 6 | 1 | 24 | 28,900 | | | | | |] | | | | | |
| 7 | <u> </u> | 24 | 25,650 | | 1.16 | | |] | | | | | 1.06 | |
| 8 | | 24 | 25,650 | | | | | | | | | | | |
| 9 | X | 24 | 30,300 | | 1.20 | | | | | | | | 1.31 | |
| 10 | | 24 | 30,300 | | | | | j | | | | | | |
| 11 | | 24 | 30,300 | | | | | | 1 | | <u> </u> | | | |
| 12 | X | 24 | 31,300 | | 1.25 | | | | | | | | 0.91 | |
| 13 | | 24 | 31,300 | | | | | ļ | | | 1 | ļ | | |
| 14 | X | 24 | 31,050 | | 1.12 | | | _ | | , | J | | 0.73 | |
| 15_ | | 24 | 31,050 | | | | |] | | | | | | |
| 16 | X | 24 | 30,633 | | 1.32 | | | | | | j | Ī | 0.98 | |
| 17 |] | 24 | 30,633 | | | | | | | | | Ì | | |
| 18 | | 24 | 30,633 | | | | | | | | ļ | | | |
| 19 | X | 24 | 28,000 | | 1.15 | | | 1 | | | | | 2.31 | |
| 20 | | 24 | 28,000 | | | | | Ì | | | | <u></u> | | |
| 21 | X | 24 | 28,950 | | 1.28 | | | | | | | | 0.91 | |
| 22 | | 24 | 28,950 | | | | | | 1 | | | | | ļ |
| 23 | X | 24 | 29,767 | | 1.25 | | | | | | | | 1.42 | |
| 24 | | 24 | 29,767 | | | 1 | | | | | | | | |
| 25 | İ | 24 | 29,767 | | | | | | 1 | | | | | |
| 26 | X | 24 | 30,400 | | 1.41 | | | | | 1 | | | 1,11 | |
| 27 | | 24 | 30,400 | | | | | | |] | | | |] |
| 28 | X | 24 | 30,750 | | 1.31 | | | | | | | | 1.41 | |
| 29 | - | 24 | 30,750 | | 1 | | | | | | | | | |
| 30 | X | 24 | 33,000 | | 2.11 | | | | | | | | 0.81 | İ |
| 31 | | 24 | 33,000 | | | | | | | | | | | Î |
| Fotal | | | 913,750 | | | | | | | | | | | |

 Total
 913,750

 Average
 29,476

 Maximum
 33,000



MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| mmunit | redWater Producti V Water System (C er System (PWS) I | | ear of | September Backwater 6090099 | | | | | | |
|-----------------|---|---|--------------|-----------------------------------|--------------|--------------|--------------|--------------|--------------|-----------|
| | Plant 1 Name WTP 1 | Plant 2 Name WTP 2 | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plaut 9 Name | Total |
| Day of Month | 100,000 | tem (PWS) Name: 100,000 tem (PWS) Name: | | I | T | | | | | |
| Day I | 5,066 | 33,000 | | | 1 | | | | | 38,066 |
| Day 2 | 4,400 | 28,000 | | | | | | | | 32,400 |
| Day 3 | 4,400 | 28,000 | | | | | - | - | | 32,400 |
| Day 4 | 700 | 32,750 | | | | | | - | | 33,450 |
| Day 5 | 700 | 32,750 | | | + | | - | + | | 33,450 |
| Day 6 | 367 | 29,967 | | | | | | | | 30,334 |
| Day 7 | 700 | 29,967 | | | | | | | | 30,667 |
| Day 8 | 700 | 29,967 | | | | | | | | 30,667 |
| Day 9 | 650 | 28,400 | | | | | 1 | | | 29,050 |
| Day 10 | 650 | 28,400 | | | | | - | 1 | | 29,050 |
| Day 11 | 0 | 29,100 | | | | | - | - 1 | | 29,100 |
| Day 12 | 0 | 29,100 | | | | | | | | 29,100 |
| Day 13 | 2,800 | 34,233 | | | 1 | | | 1 | | 37,033 |
| Day 14 | 2,800 | 34,233 | 1 | | | | _ | | | 37,033 |
| Day 15 | 2,800 | 34,233 | | | 1 | | | | | 37,033 |
| Day 16 | 7,666 | 26,300 | | | | | | | | 33,966 |
| Day 17 | 7,666 | 26,300 | - | | | | | 1 | | 33,966 |
| Day 18 | 1,150 | 28,100 | | | | | | 1 | | 29,250 |
| Day 19 | 1,150 | 28,100 | | | | | | | | 29,250 |
| Day 20 | 1,833 | 30,600 | | | | | | | | 32,433 |
| Day 21 | 1,833 | 30,600 | | | | | | | | 32,433 |
| Day 22 | 1,833 | 30,600 | | | 1 | | | | | 32,433 |
| Day 23 | 2,433 | 28,450 | | | | | | | | 30,883 |
| Day 24 | 2,433 | 28,450 | | | | | | | | 30,883 |
| Day 25 | 1,000 | 20,150 | | | _ | | | | | 21,150 |
| Day 26 | 1,000 | 20,150 | | | | | | | | 21,150 |
| Day 27 | 8,600 | 92,200 | | | | | | | | 100,800 |
| Day 28 | 1,950 | 30,350 | | | | | | | | 32,300 |
| Day 29 | 1,950 | 30,350 | | | | | | | | 32,300 |
| Day 30 | 500 | 27,950 | | | | | | | | 28,450 |
| Day 31 | 1 | 2. 10.00 | | | | | | | | 20,100 |
| Total | | | | | | | 1 | | | 1,010,480 |
| Avg. | | | | | | | | | | 33,683 |
| Min | | | | | | | | | | 100,800 |





See Page 4 for instructions

Effective August 28, 2003

| I. General Information for t A. Public Water System (PW | the Month/Year of: Septemb | per 2024 | | | | |
|--|--|--|--|---|---|--|
| | ter Heights | | | DWC Identif | fication Number: | 6090099 |
| PWS Type: Commu | | [] NonCo | mmunity [] | Consecu | | 0090099 |
| | nections at End of Month: 107 | | opulation Served at 3 | | | |
| | Waterworks Inc. | Total I | opination served at | and of Month. 207 | | |
| | on Purviance | Contact | Person's Title: U | tility Manager | | |
| 2 | g Address: 4939 Cross Bayou Boulev | | | State: FL | Zip Code: 3465 | 59 |
| | none Number: 866-753-8292 | The second of th | Person's Fax Number | | zip Code. o roo | |
| Contact Person's Email | 7.5 | | cibolis kak i valiloc | 1. 727 010 7701 | | |
| b. Water Treatment Plant In | | | | | | |
| Plant Name: WTP 1 | Iormadon | | | Di .m.i.al | NT 1 | |
| Plant Address: 5335 W | , D1 1 1 | 0 | . 11 | Plant Telephone | | 00 |
| | 700 | | Dunnellon | State: FL | Zip Code: 344 | 33 |
| Type of water treated by | [, |] Purchased Finished Water | • | | | |
| | ay Operating Capacity of Plant, gallons | T | | | | |
| | section 62-699.310(4), F.A.C.): D | | ass (per subsection 6 | | | |
| Licensed Operators: | Name: | License Class | | Day(s)/Shift(s) Wo | orked | |
| Lead/Chief Operators: | Angela Covell | В | 23535 | | | |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| The state of the s | | | | | | |
| I make and the sails | | | | | | |
| II. Certification by Lead/Cl | ief Operator | | 1 | | | |
| information provided in thi International Standard 60 o prepared each day that a lic applicable, appropriate trea | atment plant operator licensed in Flori is report is true and accurate to the best or other applicable standard referenced ensed operator staffed or visited this p tment process performance records. For opies of this report, at a convenient lo | at of my knowledge and belief. I I in subsection 62-555.320(3), F. Islant during the month indicated Further more, I agree to provide | certify that all drinking. A.C. I also certify the above: (1) records o | ng water treatment cl at the following addi f amounts of chemic | hemicals used at this itional operations re cals used and chemi | s plant conform to NSF cords for this plant were cal feed rate, and (2) if |
| Angela Covell | 10/7/2024 | Angela Covell | _ | | B 23 | |
| Signature and Date | | Printed or Typed Nan | ne | | License | Number |
| DEP Form 62-555 900(300) | | | | | | |

6090099

| Backwater | | | | WTP 1 | | | | | | | | | | |
|-------------------------|--------------------------|-----------------------------|-----------------------------|---------------------------------------|--|---|-----------------------------------|---------------------|----------------------------|-----------------------|---------------------|------------------------|---|---|
| | | | | September | | | | | • | | ent 1 | | | |
| | | | Virus Inactivation | | Free Chlorin | e Chlo | orin e Dioxide | | Ozone | Combined | Chlorine (| Chloramines) | | |
| UltraViole Type of D | | | O Maintained in Di | ther (Discribe) stribution System: | 3 | K Free Chlorine | Combine | d Chlorir | ie (Chloramines) | | Chlori | ne Dioxide | | |
| | | | | MINIOTO DI MOITI | | rree emonae | CAMBA | u chian | e (Canonaliano) | | CIMAI | ic Divilide | | |
| | | | | | | cm c l l . | W.D | | | | | | | |
| | | | | | | CT Calculations, or C | V Dose to Demonstrate Foundations | I-TOL ALIRE | мецианов, в Аррасабе | | | UV Dose | | Emergency or Abnormal |
| | Days Plant Staffed or | | | | | | Lowest CT Provided | | | | Lowest | | | Operating Conditions, Repair |
| | visited by | | Net Quantity of | | Lowest Residual Dumfectant Concentration (C) Before or at | Disinfectant Contact Time (T) | Before or at First Customer | | | Minimum CT | Operating UV | | Lowest Residual Disinfectant | or Maintenance Work that Involves Taking Water |
| Day of the Month | operator Place "X" | Hours Plant in Operation | Frished Water Produce #1 | Peak Flow Rate, and | First Customer During Peak Flow mg/L | at C Measurement Point During Peak Flow, minutes | During Peak Flow | Temp of Water °C | pH of Water, if Applicable | Required mg- min/L | seciem ² | mW-sec/cm ² | Concentration at Remote Point in Distribution S stem | System Components Out of Operation |
| 1 | | 24 | 5,066 | | | | | | | | | | | |
| 2 | X | 24 | 4,400 | | 1.04 | | | | | | | | 1.63 | |
| 3 | | 24 | 4,400 | | | | | | | | | | | |
| 4 | X | 24 | 700 | | 1.00 | | | | | | | | 0.87 | |
| 5 | | 24 | 700 | | | | | | | | | | | |
| 6 | X | 24 | 367 | | 0.76 | | | | | | | | 0.71 | |
| 7 | | 24 | 700 | | | | | | | | | | | |
| 8 | | 24 | 700 | | | | | | | | | | | |
| 9 | X | 24 | 650 | | 1.42 | | | 1 | | | | | 1.29 | |
| 10 | | 24 | 650 | | | | | | | | | | | |
| 11 | X | 24 | 0 | | 1.62 | | | | | | | | 1.46 | |
| 12 | | 24 | 0 | | | | | | | | | | | |
| 13 | X | 24 | 2,800 | | 1.44 | | | | | | | | 1.36 | |
| 14 | | 24 | 2,800 | | | | | | | | | | | |
| 15 | | 24 | 2,800 | | | | | | | | | | | |
| 16 | X | 24 | 7,666 | | 1.47 | | | | | | | | 1.39 | |
| 17 | | 24 | 7,666 | | | | | | | | | | | |
| 18 | X | 24 | 1,150 | | 1.36 | | | | | | | | 1.27 | |
| 19 | | 24 | 1,150 | | | | | | | | | | | |
| 20 | X | 24 | 1,833 | | 1.52 | | | | | | | | 1.41 | |
| 21 | | 24 | 1,833 | | | | | | | | | | | |
| 22 | ĺ | 24 | 1,833 | | | | | | | | | | | |
| 23 | X | 24 | 2,433 | | 1.34 | | | | | | | | 1.21 | |
| 24 | | 24 | 2,433 | | | | | | | | | | | |
| 25 | X | 24 | 1,000 | | 1.42 | Î | | | | | | | 1.33 | |
| 26 | 1 | 24 | 1,000 | | | | | | | | | | | |
| 27 | | 24 | 8,600 | | | 1 | | | | | | | | |
| 28 | X | 24 | 1.950 | | 1.11 | İ | | İ | | | Ì | | 0.92 | |
| 29 | 1 | 24 | 1,950 | | | | | | | | | | | |
| 30_ | X | 24 | 500 | | 1.69 | | | | | | | | 1.43 | |
| 31 | | | | | | | | | | | | | | |

69,730 Total 2,324 Average Maximum 8,600



Effective August 28, 2003

| hief Operator catment plant operator licensed in Florida, am the his report is true and accurate to the best of my kr or other applicable standard referenced in subsect censed operator staffed or visited this plant durin | nowledge and belief. I etion 62-555.320(3), F. | certify that all drinking. A.C. I also certify the | ng water treatment at the following ad | t chemicals used at this plant conform to NSI Iditional operations records for this plant were |
|--|--|--|--|--|
| | e lead/chief operator o | f the water treatment | plant identified in | n Part 1 of this report. I certify that the |
| lief Operator | | | | |
| | | | | |
| | | | | |
| | | | - | |
| | | | | |
| | | | | |
| Jessie Jose Hinojosa | C | 28938 | | |
| · · · · · · · · · · · · · · · · · · · | | | | |
| Name: | License Class | | Day(s)/Shift(s) V | Vorked |
| osection 62-699.310(4), F.A.C.): D | Plant Cla | ass (per subsection 69 | 2-699.310(4), F.A. | .C.): V |
| | 100000 | | | |
| ~ . | | 4 | , | |
| Vest Blade Lane | City: I | Dunnellon | State: FL | Zip Code: 34433 |
| | - | | Plant Telephor | ne Number: |
| nformation | | - | | _ |
| | | | | |
| | | | | 21p code. 01002 |
| _ | | | Terraneous Communication Commu | Zip Code: 34652 |
| The state of the s | Contact | Parson's Titler II | tility Manager | |
| | I otal P | opulation Served at I | and of Month: 2 | 0/ |
| | | | | |
| | | | | ntification Number: 6090099 |
| | Vest Blade Lane by Plant: [X] Raw Ground [] Purcha Day Operating Capacity of Plant, gallons per day: bsection 62-699.310(4), F.A.C.): D Name: | rater Heights nunity [X] NonTransitent [] NonCo nnections at End of Month: 107 Total P S Waterworks Inc. Iron Purviance Contact Information City: Ne Total P Separate Medical Separate Separ | Tater Heights Thunity [X] NonTransitent [] NonCommunity [] The nections at End of Month: 107 Total Population Served at 1 and 2 and 2 and 3 an | PWS Identify [X] NonTransitent [] NonCommunity [] Consequence of Month: 107 Total Population Served at End of Month: 2 Swaterworks Inc. Waterworks Inc. Waterworks Inc. Waterworks Inc. Waterworks Inc. Waterworks Inc. Waterworks Inc. Waterworks Inc. Waterworks Inc. Waterworks Inc. Waterworks Inc. Waterworks Inc. Waterworks Inc. Contact Person's Title: Utility Manager State: FL Contact Person's Fax Number: 727-848-7701 Address: spurviance@uswatercorp.net Information Plant Telephor West Blade Lane City: Dunnellon State: FL Oy Plant: [X] Raw Ground Plant Telephor Oy Plant: [X] Raw Ground Plant Class (per subsection 62-699.310(4), F.A Name: Angela Covell B 23535 |

Maximum

6090099

92,200

Backwater Heights WTP 2

| | et Radiatio | - | Virus Inactivation O | ther (Discribe) | Free Chlorin | Cino | orine Dioxide | | Ozone | Combinett | Cinorine (| Chloramines) | | |
|---------------------|---|--------------------------|--|---------------------|--|-----------------------|-----------------------------|----------------|-----------------------------|-------------------------------------|--|--------------|--|---|
| ype of I | Disinfectan | t Residual N | Maintained in Dis | stribution System: | | K Free Chlorine | Combine | d Chlorin | e (Chloramines) | | Chlori | ne Dioxide | | |
| | | | | | | CT Calculations, or U | JV Dose, to Demonstrate For | ur-Log Virus I | nactivation, if Applicable* | | | UV Dose | | |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in Operation | Net Quantity of Finished Water Produced, gal | Peak Flow Rate, and | Lowest Residual Disarfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L | | Lowest CT Provided | Temp of | pH of Water, if Applicable | Minimum CT Required mg- min/L | Lowest Operating UV Dose, mW- sec/cm ² | | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L. | Emergency or Abnorma Operating Conditions, Rep or Maintenance Work th Involves Taking Water System Components Out |
| 1 | | 24 | 33,000 | | | | | | | | | | | |
| 2 | X | 24 | 28,000 | | 2.04 | | | | | | | | 1.04 | |
| 3 | | 24 | 28,000 | | | | | | | | | | | |
| 4 | X | 24 | 32,750 | | 1.45 | | | | | | | | 1.00 | |
| 5 | | 24 | 32,750 | | | | | | | | | | | |
| 6 | X | 24 | 29,967 | | 1.78 | | | - | | | | | 0.76 | |
| 7 | | 24 | 29,967 | | | | | | | | | | | |
| 8 | | 24 | 29,967 | | | | | | | | | | | |
| 9 | X | 24 | 28,400 | | 1.76 | | | | | | | | 1.42 | |
| 10 | | 24 | 28,400 | | | | | | | | | | | |
| 11 | X | 24 | 29,100 | | 2.24 | | | | | | | | 1.62 | |
| 12 | | 24 | 29,100 | | | | | | | | | | | |
| 13 | X | 24 | 34.233 | | 1.82 | | | | | | | | 1.44 | |
| 14 | | 24 | 34,233 | | | | | | | | | | | |
| 15 | | 24 | 34,233 | | | | | | | | | | | |
| 16 | X | 24 | 26,300 | | 1.54 | | | 1 | | | | | 1.47 | |
| 17 | | 24 | 26.300 | | | | | | | | | | | |
| 18 | X | 24 | 28,100 | | 1.36 | | | | | | | | 1.36 | |
| 19 | | 24 | 28,100 | | | | | | | | | | | |
| 20 | X | 24 | 30,600 | | 1.55 | | | | | | | | 1.52 | |
| 21 | | 24 | 30,600 | | | | | | 1 | | | | | |
| 22 | | 24 | 30,600 | | | | | | | | Ī | | | |
| 23 | X | 24 | 28,450 | | 1.57 | | | | | | | | 1.34 | |
| 24 | | 24 | 28,450 | | | | | | | | | | | |
| 25 | X | 24 | 20,150 | | 1.81 | | 1 | Ì | | | 1 | | 1.42 | |
| 26 | | 24 | 20,150 | | | | | | 1 | | | | | |
| 27 | | 24 | 92,200 | | | | | | | Ì | Ĭ | | | |
| 28 | X | 24 | 30,350 | | 1.43 | | | | | | Ì | | 1.11 | |
| 29 | | 24 | 30,350 | | 1 | | | | | | Ì | | | |
| 30 | X | 24 | 27,950 | | 1.70 | | i – | 1 | | | ĺ | İ | 1.69 | Ī |
| 31 | | | | | | | | i | | 1 | | | | |
| Γotal | | | 940,750 | | | | | | | | : | | | |
| verage | | | 31,358 | | | | | | | | | | | |
| , resuge | | | 02,000 | | | | | | | | | | | |



MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| alv Finish mmunit | for instructions nedWater Production Water System (CV er System (PWS) N | | ear of | October 20 Backwater 6090099 | | | | | | |
|----------------------|--|-----------------------|--------------|--|--------------|--|--|--------------------|--------------|---------|
| | Plant 1 Name WTP 1 | Plant 2 Name WTP 2 | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plant.9 Name | Total |
| Day of Month | Public Water Syst 100,000 | 100,000 | | | | 1 | | T | | |
| - | Public Water Syst | | | The state of the s | | | The second consideration of th | ð m | | |
| Day 1 | 500 | 27,950 | | | | | | | | 28,450 |
| Day 2 | 150 | 26,350 | | | | | | | | 26,500 |
| Day 3 | 150 | 26,350 | | | | | | | | 26,500 |
| Day 4 | 967 | 28,900 | | | | | | | | 29,867 |
| Day 5 | 967 | 28,900 | | | | | | | | 29,867 |
| Day 6 | 967 | 28,900 | | | | | | | | 29,867 |
| Day 7 | 1,200 | 27,750 | | | | | | | | 28,950 |
| Day 8 | 1,200 | 27,750 | | | | | | | | 28,950 |
| Day 9 | 1,100 | 32,600 | | | | | | | | 33,700 |
| Day 10 | 0 | 33,300 | | | | | | | | 33,300 |
| Day 11 | 700 · | 28,800 | | | | | | | | 29,500 |
| Day 12 | 700 | 28,800 | _ | | | | | | | 29,500 |
| Day 13 | 700 | 28,800 | | | | | | Walter To Addition | | 29,500 |
| Day 14 | 1,500 | 29,350 | | | | | | | | 30,850 |
| Day 15 | 1,500 | 29,350 | | | | | | | | 30,850 |
| Day 16 | 700 | 29,300 | | | | | | | | 30,000 |
| Day 17 | 700 | 29,300 | | | | | | | | 30,000 |
| Day 18 | 2,267 | 31,333 | | | | | | - | | 33,600 |
| Day 19 | 2,267 | 31,333 | | | | | | | | 33,600 |
| Day 20 | 2,267 | 31,333 | | | | | The Property of the Property o | | | 33,600 |
| Day 21 | 350 | 31,000 | | | | | | | | 31,350 |
| Day 22 | 350 | 31,000 | | | | | | | | 31,350 |
| Day 23 | 1,000 | 28,350 | | | | | | | | 29,350 |
| Day 24 | 1,000 | 28,350 | | | | | | | | 29,350 |
| Day 25 | 1,500 | 30,000 | | | | | | | | 31,500 |
| Day 26 | 1,500 | 30,000 | | | | | | - | | 31,500 |
| Day 27 | 1,500 | 30,000 | | | | | | | | 31,500 |
| Day 28 | 700 | 28,050 | | | | | | | | 28,750 |
| Day 29 | 700 | 28,050 | | | | | | | | 28,750 |
| Day 30 | 1,200 | 25,800 | - | | | | | | | 27,000 |
| Day 31 | 1,200 | 25,800 | | | | | | | | 27,000 |
| Total | 1,2 | | | | | A STATE OF THE PARTY OF THE PAR | | 1 | | 934,351 |
| Avg. | | | | | | | | | | 30,140 |
| Min | | | | | | | | | | ov,140 |





See Page 4 for instructions

| I. General Information for t A. Public Water System (PW | | 024 | | | |
|--|--|-------------------------|---------------------------|-----------------------|---|
| | er Heights | | | DVICTI | |
| PWS Type: Commu | | 1 N | NonCommunity [] | Conse | tification Number: 6090099 |
| | nections at End of Month: 107 | | Total Population Served | | |
| | Waterworks Inc. | | otal i optilation served | rat End of Month: 20 | 07 |
| | on Purviance | C | ontact Person's Title: | Utility Manager | |
| | Address: 4939 Cross Bayou Boulevard | | ty: New Port Richey | State: FL | Zip Code: 34652 |
| | one Number: 866-753-8292 | | ontact Person's Fax Nur | | Zip Code: 04032 |
| Contact Person's Email | | | omacci Cisons Pax Ivui | HUCI. 727-040-7701 | |
| B. Water Treatment Plant In | | | | | |
| Plant Name: WTP 1 | ioimauon | | | n m i i | |
| | . D1 1 Y | 0. | - D II | Plant Telephor | |
| Plant Address: 5335 War Type of water treated by | | Purchased Finished | ty: Dunnellon | State: FL | Zip Code: 34433 |
| | [] | | vv ater | | |
| | w Operating Capacity of Plant, gallons pection 62-699.310(4), F.A.C.): D | | | - CO COO 210(4) E A | C) V |
| | Name: | | ant Class (per subsection | | |
| Licensed Operators: | | License C | | per Day(s)/Shift(s) V | Vorked |
| Lead/Chief Operators: Other Operators: | Angela Covell | B | | | |
| Other Operators: | Jessie Jose Hinojosa | - | 20930 | | |
| | | | | | |
| | | | | - | |
| | | Andread and Address | | | |
| | | | | | |
| | - | | | | |
| | | | | | |
| II. Certification by Lead/Ch | ief Operator | | | | |
| | tment plant operator licensed in Florida | 4h - l | | | Done 1 (Calcia con one Torrest Card and |
| | | | | | chemicals used at this plant conform to NSF |
| | | | | | ditional operations records for this plant were |
| prepared each day that a lice | ensed operator staffed or visited this plan | nt during the month inc | licated above: (1) record | ds of amounts of chem | nicals used and chemical feed rate, and (2) if |
| | | | | | the PWS owner so that the PWS owner can |
| | opies of this report, at a convenient locat | | | 1 | |
| Angela Covell | 11/4/2024 | Angela Covell | | | B 23535 |
| Signature and Date | | Printed or Type | d Name | | License Number |
| DED F 69 555 000/2000 | | | | | |

DEP Form 62-555 900(300) Effective August 28, 2003

6090099

Backwater Heights

WTP 1

III. Daily Data for the Month/Year of:

October 2024

Free Chlorine

1.25

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

Emergency or Abnormal

perating Conditions Repair

or Maintenance Work that

Involves Taking Water

System Components Out of

Operation

Lowest Residual Disinfectant

Concentration at Remote Point

in Distribution System, mg/L

1.47

1.52

0.98

1.36

1.31

1.23

1.48

1.49

1.03

1.36

1.13

1.10

1.09

1.12

Means of Achieving Four-Log Virus Inactivation/Removal * UltraViolet Radiation Other (Discribe) Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* CT Calculations UV Dose Days Plant Staffed or Lowest CT Provided Lowest Lowest Residual Disinfectant Concentration (C) Before or at Disinfectant Contact Time (1) Before or at First Customer visited by Operating UV Net Quantity of Minimum CT During Peak Flow, Dose, mW-Maumam UV Dose Required Day of the operator Hours Plant in at C Measurement Point Finished Water First Customer During Peak Temp of Required, mgmW-sec/cm2 Operation Produced, gal Peak Flow Rate, and Flow, mg/L During Peak Flow, minutes mu-min/L Water, °C pH of Water, d'Applicable 1 24 500 2 X 24 150 1.64 3 24 150 X 24 967 4 1.66 5 24 967 6 24 967 7 X 1,200 24 1.24 8 24 1,200 9 1,100 1.52 X 24 10 X 24 0 1.54 11 X 24 700 1.44 12 24 700 700 13 24 14 X 24 1.500 1.53 15 24 1,500 16 X 24 700 1.65 17 24 700 18 X 24 2,267 1.21 19 24 2,267 20 24 2.267 21 X 24 350 1.52 22 24 350 23 X 1,000 24 1.28 24 24 1,000 25X 24 1.500 1.26 1,500 26 24 27 24 1,500 28 700 1.33 X 24

31 1,200 2431,502 Total 1,016 Average 2,267 Maximum

24

24

700

1.200

29

30



| I. General Information for th | | 2024 | | | |
|--|---|--|--|--|--|
| Public Water System (PWS | | | | DTTTO T 1 | |
| PWS Name: Backwate | | F.1. NI | ommunity [] | | ntification Number: 6090099 ecutive |
| PWS Type: Commun | nity [X] NonTransitent ections at End of Month: 107 | | Population Served at 1 | | |
| - | Vaterworks Inc. | 1 Otal | ropulation served at | Elig of Monui: 2 | 207 |
| to the second se | n Purviance | Control | t Person's Title: U | Itility Manager | |
| the second secon | Address: 4939 Cross Bayou Bouleva | | | State: FL | Zip Code: 34652 |
| | one Number: 866-753-8292 | | t Person's Fax Number | | Zip Code. 04002 |
| Contact Person's Email A | | | | 21.2.01002 | |
| Water Treatment Plant Infe | ormation | | | | |
| Plant Name: WTP 2 | | | | Plant Telepho | one Number: |
| Plant Address: 5335 We | st Blade Lane | City: | Dunnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | Plant: [X] Raw Ground [| Purchased Finished Wat | er | | |
| Permitted Maximum Day | Operating Capacity of Plant, gallons | s per day: 100000 | | | W. |
| | ection 62-699.310(4), F.A.C.): D | | lass (per subsection 6 | 2-699.310(4), F.A | A.C.): V |
| Licensed Operators: | Name: | License Class | License Number | Day(s)/Shift(s) | Worked |
| Lead/Chief Operators: | Angela Covell | В | 23535 | | |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | |
| | | | | | |
| | | | | | |
| | - | | | | |
| | | | | - | |
| | | | | | |
| | | | | - | |
| | | | | - | |
| | | | | | |
| information provided in this International Standard 60 or prepared each day that a lice applicable, appropriate treats | ment plant operator licensed in Flori report is true and accurate to the best other applicable standard referenced used operator staffed or visited this p | at of my knowledge and belief. If in subsection 62-555.320(3), Isolant during the month indicate Further more, I agree to provide | I certify that all drinki F.A.C. I also certify the d above: (1) records o | ng water treatmer at the following a of amounts of che | in Part 1 of this report. I certify that the nt chemicals used at this plant conform to additional operations records for this plant micals used and chemical feed rate, and to the PWS owner so that the PWS owner. |
| | 11/4/2024 | Angela Covell | | | В 23535 |
| Angela Covell | 11/4/2024 | | | | |
| Signature and Date | | Printed or Typed Na | me | | License Number |
| DED E 69 555 000/200\ | | | | | |

DEP Form 62-555 900(300) Effective August 28, 2003

6090099

29,124

33,300

Average Maximum

Backwater Heights WTP 2

October 2024

Means of Achieving Four-Log Virus Inactivation/Removal *

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

Other (Discribe) UltraViolet Radiation

| | | | | | | CT Calculations, or U | JV Dose to Demonstrate Fou | r-Log Virus Ir | activation if Applicable* | | | UV Dose | | |
|---------------------|---|----------------|--|---------------------|---|-----------------------|----------------------------|----------------|----------------------------|--------------------------------------|---|---------|---|--|
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produce | Peak Flow Rate, and | Lowest Residual Distributant Concentration (C) Before or at First Customer During Peak Flow mark | | Lowest CT Provided | Temp of | pH of Water, it Applicable | Manimum CT Required, mg- mis/L | Lowest Operating UV Dose, mW- sec/cm ² | | Lowest Residual Damfectant Concentration at Remote Point in Distribution System, mall | Emergency or Abnormal Operating Conditions, Repe or Maintenance Work that Involves Taking Water System Components Out of Operation |
| 1 | | 24 | 27,950 | | | | | | | | | | | |
| 2 | X | 24 | 26,350 | | 1.69 | | | | | | | | 1.64 | |
| 3 | - | 24 | 26,350 | | | | | | | | | | | |
| 4 | X | 24 | 28,900 | | 1.64 | | | | | | | | 1.66 | |
| 5 | | 24 | 28,900 | | | | | | | | | | | |
| 6 | | 24 | 28,900 | | | | | | | | | | | |
| 7 | X | 24 | 27,750 | | 1.59 | | | | | | | | 1.24 | |
| 8 | | 24 | 27,750 | | | | | 1 | | | | | | |
| 9 | X | 24 | 32,600 | | 1.62 | | | | | | | | 1.52 | |
| 10 | X | 24 | 33,300 | | 1.58 | | | | | | | | 1.54 | |
| 11 | X | 24 | 28,800 | | 1.38 | | | | | | | | 1.44 | |
| 12 | | 24 | 28,800 | | Ì | | | | | | 1 | | | |
| 13 | | 24 | 28,800 | w 1000 | | | | | | | | | | |
| 14 | X | 24 | 29,350 | | 1.75 | | | | | | | | 1.53 | |
| 15 | | 24 | 29,350 | | | | | Ì | | | | | | |
| 16 | X | 24 | 29,300 | | 1.82 | | | | | | | | 1.65 | |
| 17 | | 24 | 29.300 | | | | | | | | | | | |
| 18 | X | 24 | 31,333 | | 1.76 | | | | | | | | 1.21 | |
| 19 | | 24 | 31,333 | | | | | | | | | | | |
| 20 | 1 | 24 | 31.333 | | | | | | | | | | | |
| 21 | X | 24 | 31,000 | | 1.53 | | | | | | | | 1.52 | |
| 22 | | 24 | 31,000 | | | | | | | | | | | |
| 23 | X | 24 | 28,350 | | 1.32 | | | | | | | | 1.28 | |
| 24 | | 24 | 28,350 | | | | | | | | | | | |
| 25 | X | 24 | 30,000 | | 1.29 | | | | | 1 | | | 1.26 | |
| 26 | | 24 | 30,000 | | | | | | | | | | | |
| 27 | | 24 | 30,000 | | | | | | | | | | | |
| 28 | X | 24 | 28,050 | | 1.18 | | | 1 | | | | | 1.33 | |
| 29 | | 24 | 28,050 | | | | | | | | | | | |
| 30 | X | 24 | 25,800 | | 1.03 | | | | | | | | 1.25 | |
| 31 | | 24 | 25 800 | | | | | | | | | | | |
| Total | | | 902,849 | | | | | | | | | | | |



MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| aily Finish | for instructions nedWater Product Water System (C | ion for the Month Ye | ear of | November Backwater | 2024 Heights | | | | a makk W | |
|-----------------|---|-----------------------|--------------|-----------------------|-----------------|--------------|--------------|--------------|--------------|---------|
| ıblic Wat | er System (PWS) | Name: | | 6090099 | | | | | | |
| | Plant 1 Name WTP 1 | Plant 2 Name WTP 2 | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plant 9 Name | Total |
| Day of Month | Public Water Sys | tem (PWS) Name: | | | | | | | | |
| | Public Water Sys | tem (PWS) Name: | | * 1 | | | | | | |
| Day 1 | 550 | 28,550 | | | | | | | | 29,100 |
| Day 2 | 550 | 28,550 | | | | | | | | 29,100 |
| Day 3 | 1,233 | 28,000 | | | | | | | | 29,233 |
| Day 4 | 1,233 | 28,000 | | | | | | | | 29,233 |
| Day 5 | 1,233 | 28,000 | | | | | | | | 29,233 |
| Day 6 | 2,750 | 30,050 | | | | | | | | 32,800 |
| Day 7 | 2,750 | 30,050 | | | | | | | | 32,800 |
| Day 8 | 2,767 | 28,867 | | | | | | | | 31,634 |
| Day 9 | 2,767 | 28,867 | | | | | | | | 31,634 |
| Day 10 | 2,767 | 28,867 | | | | 1 | | | | 31,634 |
| Day 11 | 2,500 | 28,500 | | | | | | | | 31,000 |
| Day 12 | 2,500 | 28,500 | | | | | | | | 31,000 |
| Day 13 | 2,700 | 28,500 | | | | | | | | 31,200 |
| Day 14 | 2,700 | 28,500 | | | | | | | | 31,200 |
| Day 15 | 2,667 | 27,900 | | | | | | | | 30,567 |
| Day 16 | 2,667 | 27,900 | | | | | | | | 30,567 |
| Day 17 | 2,667 | 27,900 | | | | | | | | 30,567 |
| Day 18 | 800 | 28,100 | | | | | | | | 28,900 |
| Day 19 | 800 | 28,100 | | | | | | | | 28,900 |
| Day 20 | 850 | 25,850 | | | | | | | | 26,700 |
| Day 21 | 850 | 25,850 | | | | | | | | 26,700 |
| Day 22 | 967 | 28,300 | | | | - | | | | 29,267 |
| Day 23 | 967 | 28,300 | | | | | | | | 29,267 |
| Day 24 | 967 | 28,300 | | | | | | | | 29,267 |
| Day 25 | . 0 | 22,200 | | | | | | | | 22,200 |
| Day 26 | 0 | 22,200 | | | | | | | | 22,200 |
| Day 27 | 200 | 21,050 | | | | | | | | 21,250 |
| Day 28 | 200 | 21,050 | | | | | | | | 21,250 |
| Day 29 | 0 | 19,050 | 100 | | | | | | | 19,050 |
| Day 30 | 0 | 19,050 | | | | | | | | 19,050 |
| Day 31 | | | - | | 1 | · | | | | |
| Total | | | | | | | | | | 846,503 |
| Avg. | 1 | | | | | | | | | 28,217 |
| Min | | | | | | | | | | 32,800 |





See Page 4 for instructions

| I. General Information for the | | er 2024 | | | | |
|--|--|---|-----------------------------|--|--|---|
| A. Public Water System (PW PWS Name: Backwat | er Heights | | | | DWS Iden | tification Number: 6090099 |
| PWS Type: Commu | | | NonCom | munity [] | Conse | |
| h | nections at End of Month: 107 | | | | End of Month: 26 | |
| | Waterworks Inc. | | road rop | diminori per rea ac | End of Money | ,, |
| COST TO A 12 YOUR DESIGNATION OF THE PARTY O | on Purviance | - | Contact Pe | rson's Title: U | Itility Manager | |
| | Address: 4939 Cross Bayou Bouleva | | | | State: FL | Zip Code: 34652 |
| | one Number: 866-753-8292 | | | rson's Fax Numbe | | |
| Contact Person's Email | | o.net | | | | |
| 3. Water Treatment Plant In | | | | | | |
| Plant Name: WTP 1 | | | | | Plant Telephon | e Number: |
| Plant Address: 5335 We | est Blade Lane | | City: Du | nnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | | Purchased Finished | | | | |
| Permitted Maximum Da | y Operating Capacity of Plant, gallons | | - | | | |
| | ection 62-699.310(4), F.A.C.): D | | Plant Class | (per subsection 6 | 2-699.310(4), F.A. | C.): V |
| Licensed Operators: | Name: | License | | | Day(s)/Shift(s) V | |
| Lead/Chief Operators: | Angela Covell | | В | 23535 | | |
| Other Operators: | Jessie Jose Hinojosa | | C | 28938 | | |
| | | | | | | |
| | <u> </u> | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| II. Certification by Lead/Ch | | | | | | |
| information provided in this International Standard 60 o | s report is true and accurate to the best or other applicable standard referenced | t of my kn <mark>owledge</mark> and l in subsection 62-555.3 | belief. I ce 320(3), F.A | rtify that all drinki .C. I also certify th | ng water treatm <mark>e</mark> nt at the following ad | n Part 1 of this report. I certify that the chemicals used at this plant conform to NSF ditional operations records for this plant were |
| prepared each day that a lic | ensed operator staffed or visited this p | lant during the month i | indicated al | bove: (1) records of | of amounts of chen | nicals used and chemical feed rate, and (2) if |
| | | | | iese additional ope | erations records to | the PWS owner so that the PWS owner can |
| retain them, together with o | opies of this report, at a convenient lo | cauon for the last ten ye | ears. | | | |
| Angela Coxell | 12/3/2024 | Angela Covell | | | | B 23535 |
| Signature and Date | | Printed or Ty | ped Name | | | License Number |
| DED E 60 555 000/900 | | | | | | |

DEP Form 62-555 900(800) Effective August 28, 2003

6090099

1,453

2,767

Average Maximum

Backwater Heights WTP 1

| Means of | Achieving | Four-Log V | rear of: Firus Inactivation | November A/Removal * | Free Chlorin | ne Chlo | orine Dioxide | | Ozone | Combined | Chlorine (| Chloramines) | | |
|------------------|---|-------------------|--|---------------------------------------|--|---|---|-----------------|----------------------------|-------------------------------------|--------------------------------------|---|---|---|
| JltraViole | et Radiatio | n Dominion I N | | ther (Discribe) stribution System: | • | K Free Chlorine | Combine | ما الما الما | ne (Chloramines) | | Chlorie | ne Dioxide | | |
| Type of L | Jisimecian | Residual | viaintained in Di | sumuon System: | | rree Chlorine | Combine | d Chiom. | ie (Cinoramules) | - 1/2 | Cinorii | ie Dioxide | | |
| | | | | | | CT Calculations of I | IV Dose, to Demonstrate Fou | m I as Vine I | nametical of Australia | | | | | |
| | 11 | | | | | CT Calc | | 4-12/2 41 (8 1) | activation, il Applicate | | | UV Dose | | Emergency or Abnormal |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced, gal | Peak Flow Rate, and | Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L | Districtant Contact Time (T) at C Measurement Point During Peak Flow, minutes | Lowest CT Provided Before or at First Customer During Peak Flow | Temp of | pH of Water, tf Applicable | Minimum CT Required mg- min/L | Lowest Operating UV Dose mW- sec/cm² | Minimum UV Dose Required, mW-sec/cm ² | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L | Operating Conditions, Repa or Maintenance Work that Involves Taking Water |
| 1 | X | 24 | 550 | | 1.38 | | | 1 | | | | | 1.24 | |
| 2 | | 24 | 550 | | | | | | | | | | | |
| 3 | X | 24 | 1,233 | | 1.21 | | | | | | | | 1.09 | |
| 4 | | 24 | 1,233 | | | | | | | | | | | |
| _5_ | | 24 | 1,233 | | | | | | | | | | | |
| 6 | X | .24 | 2.750 | | 1.28 | | | <u> </u> | | <u> </u> | | ļ | 1.16 | |
| 7 | 1 | 24 | 2,750 | | | | | <u> </u> | | | | | | |
| - 8 | X | 24 | 2,767 | | 1.73 | | | <u> </u> | | | | | 1.62 | |
| 9 | 1 | 24 | 2,767 | | 7 | | | | | | | | | |
| 10 | | 24 | 2,767 | | | | | | ļ | | | | | |
| 11 | X | 24 | 2,500 | | 1.15 | | | | | | | | 0.97 | |
| 12 | 1 | 24 | 2,500 | | 1 | | | | | | | | | |
| 13 | <u> X </u> | 24 | 2,700 | | 1.07 | | | | 1 | | | | 0.88 | |
| 14 | ļ | 24 | 2,700 | | | | | | 1 | | | | 0.55 | |
| 15 | <u>X</u> | 24 | 2,667 | | 0.74 | | 1 | 1 | | | | | 0.55 | |
| 16 | | 24 | 2,667 | | | 1 | - | 1 | | <u> </u> | | | 1 | 1 |
| 17 | | 24 | 2,667 | | 1.05 | | 1 | | | 1 | | | 1.00 | |
| 18 | X | 24 | 800 | | 1.65 | 1 | | - | | 1 | 1 | | 1.36 | |
| 19 | | 24 | 800 | | | 1 | 1 | 1 | | | | | 1.40 | |
| 20 | X | 24 | 850 | | 1.74 | 1 | | | | 1 | | | 1.48 | |
| 21 | N/ | 24 | 850 | | 1.05 | | | | | 1 | | | 1.17 | |
| 22 23 | X | 24 | 967 | | 1.35 | | | | | | | | 1.1/ | |
| 23 | I | 24 | 967 | | 1 | 1 | | 1 | 1 | 1 | | | | |
| 25 | X | 24 | 967 | | 1.46 | | | 1 | | + | 1 | | 1.23 | 1 |
| 26 | Α | 24 | 0 | | 1.40 | | | | 1 | | | | 1.20 | |
| 27 | X | 24 | 200 | | 1.82 | 1 | | | | | <u> </u> | | 1.67 | |
| 28 | Α | 24 | 200 | | 1.02 | | | | | | | | 1.07 | |
| 29 | X | 24 | 0 | | 1.61 | 1 | | | | | | | 1.39 | |
| 30 | <u>, A</u> | 24 | 0 | | 1.01 | | | | | | _ | | 1.00 | |
| 31 | 1 | 1 | . 01 | _ | | 1 | 1 | i - | | Ì | | | | |
| Total | | | 43,602 | | 1 | | | | , | | | | | |
| T 1/180 | | | 10,002 | | | | | | | | | | | |



See Page 4 for instructions

Effective August 28, 2003

| see rage 4 for instituctions | | | | | |
|------------------------------|---|----------------------------------|---------------------------|---|--|
| I. General Information for | the Month/Year of: Novemb | per 2024 | | | |
| A. Public Water System (PW | S) Information | | | | |
| PWS Name: Backwa | ter Heights | | | PWS Iden | ntification Number: 6090099 |
| PWS Type: Commu | mity [X] NonTransitent | [] NonCo | mmunity [] | Conse | ecutive |
| Number of Service Con | nections at End of Month: 107 | Total P | opulation Served at | End of Month: 2 | 67 |
| PWS Owner: Citrus | Waterworks Inc. | | | | |
| Contact Person: Shar | on Purviance | Contact : | Person's Title: U | Itility Manager | |
| Contact Person's Mailin | g Address: 4939 Cross Bayou Boulev | ard City: No | w Port Richey | State: FL | Zip Code: 34652 |
| Contact Person's Teleph | none Number: 866-753-8292 | Contact. | Person's Fax Numbe | r: 727-848-7701 | |
| Contact Person's Email | Address: spurviance@uswatercor | p.net | | | |
| B. Water Treatment Plant In | formation | | | | |
| Plant Name: WTP 2 | | | | Plant Telephor | ne Number: |
| Plant Address: 5335 W | est Blade Lane | City: I | Ounnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | - Common | Purchased Finished Water | | | - |
| | ay Operating Capacity of Plant, gallon | • | | | |
| | section 62-699.310(4), F.A.C.): D | | ass (per subsection 6 | 2-699.310(4), F.A | .C.): V |
| Licensed Operators: | Name: | License Class | License Number | C 1 150 | na time that it the management is |
| Lead/Chief Operators: | Angela Covell | В | 23535 | | |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | |
| | Jessey 3000 121120 Jessey | | | | |
| | | 1 | | | |
| | | | | | |
| | | | | | _ |
| | | | | | |
| | | - | | | ************************************** |
| | | | | | |
| II. Certification by Lead/Cl | nief Operator | 64 - 7 | SV P V S | | |
| | | ide on the lead/abief or or the | f the rentum transfer are | t plant identified i | n Part 1 of this report. I certify that the |
| information provided in this | atment plant operator needed in Flor | at of my knowledge and belief. I | ortify that all drinki | i piani idenuned i ng water treatmen | it chemicals used at this plant conform to NS |
| International Standard 60 | s report is true and accurate to the be- | d in subsection 69-555 390(3) F | A C Lalso certify th | at the following a | dditional operations records for this plant we |
| prepared each day that a lie | rensed operator staffed or visited this t | plant during the month indicated | above: (1) records of | f amounts of cher | micals used and chemical feed rate, and (2) it |
| applicable, appropriate trea | tment process performance records. | Further more. I agree to provide | these additional ope | rations records to | the PWS owner so that the PWS owner car |
| | copies of this report, at a convenient lo | | | | |
| , , , , | | | | | 7 00505 |
| Angela Covell | 12/3/2024 | Angela Covell | | | B 23535 |
| Signature and Date | | Printed or Typed Nan | ne | | License Number |
| DEP Form 69.555 900(300) | | | | | |

Page 1

6090099

| | November 2024 | | | | | |
|--|---------------|---------------|-------------------|--------------------|---------------------------------|--|
| Means of Achieving Four-Log Virus Inactivation/Rer | noval * I | Free Chlorine | Chlorine Dioxide | Ozone | Combined Chlorine (Chloramines) | |
| UltraViolet Radiation Other Type of Disinfectant Residual Maintained in Distribu | (Discribe) | X Free Chlori | ine Combined Chlo | rine (Chloramines) | Chlorine Dioxide | |

| | | | | | | | V Dose, to Demonstrate Fou | r-Loe Veus la | nactivation, if Applicable* | | | UV Dose | | |
|---------------------|---|----------------|---|---------------------|---|--|----------------------------|---------------------|-----------------------------|-------------------------------------|---|---------|---|---|
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Firmshed Water Produc | Peak Flow Rate, and | Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, and L | Disinfectant Contact Time (F) at C Measurement Point During Peak Flow, minutes | Lowest CT Provided | Temp of Water °C | pH of Water, # Applicable | Minumum CT Required, mg- mm/L | Lowest Operating UV Dose, mW- sec/cm ² | | Lowest Residual Dismiscrant Concentration at Remote Point in Distribution S | Emergency or Abnormal Operating Conditions. Repail or Maintenance Work that Involves Taking Water System Components Out of Operation |
| 1 | X | 24 | 28,550 | | 2.02 | | | | | | | | 1.38 | |
| 2 | | 24 | 28,550 | | | | | | | | | | | |
| 3 | X | 24 | 28,000 | | 1.32 | | | | | | | | 1.21 | |
| 4 | | 24 | 28,000 | | | | | | | | | | | |
| 5 | <u> </u> | 24 | 28,000 | | | | | | | | | | | |
| 6 | X | 24 | 30,050 | | 0.87 | | | | | | | | 1.28 | |
| 7 | | 24 | 30,050 | | | | | | | | | | | |
| 8 | X | 24 | 28,867 | | 1.61 | | | | | | | | 1.73 | |
| 9 | | 24 | 28,867 | | | | | | | | | | | |
| 10 | | 24 | 28.867 | | | | | | | | | | | |
| 11 | X | 24 | 28,500 | | 1.26 | | | | | | | | 1.15 | |
| 12 | | 24 | 28,500 | | | | | | | | | | | |
| 13 | X | 24 | 28,500 | | 1.22 | | | | | | | | 1.07 | |
| 14 | | 24 | 28.500 | | | | | | | | | | | |
| 15 | X | 24 | 27,900 | | 1.04 | | | | | | | | 0.74 | |
| 16 | | 24 | 27,900 | | | | | | | | | | | |
| 17 | | 24 | 27,900 | | | | | | | | | | | |
| 18 | X | 24 | 28,100 | | 1.63 | | | | | | | | 1.65 | |
| 19 | | 24 | 28,100 | | | | | | | | | | | |
| 20 | X | 24 | 25,850 | | 1.65 | | |] | | | | | 1.74 | |
| 21 | | 24 | 25,850 | | | | | | | | | | | |
| 22 | X | 24 | 28,300 | | 1.57 | | | | | | | | 1.35 | |
| 23 | | 24 | 28,300 | | | | | | | | | | | |
| 24 | | 24 | 28,300 | | | | | | | | | | | |
| 25 | X | 24 | 22,200 | | 1.02 | | | | | | | | 1.46 | |
| 26 | | 24 | 22,200 | | | | | | | | | | | |
| 27 | X | 24 | 21,050 | | 1.65 | | | | | 1 | | | 1.82 | |
| 28 | | 24 | 21,050 | | | | | | | | | | | |
| 29 | X | 24 | 19,050 | | 1.63 | | | | | | | 1 | 1.61 | |
| 30 | | 24 | 19.050 | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | | |
| Cotal | | - | 802.901 | | | | | | | | | | | |

802,901 Total 26,763 Average 30,050 Maximum



MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| | v Water System (C | | | Backwater | Heights | | | | | _ |
|----------------|-----------------------|---|--------------|--------------|--------------|--------------|--------------|---------------|---------------|---------|
| blic Wat | er System (PWS) | | | 6090099 | | f | | les see | los ass | |
| | Plant 1 Name WTP 1 | Plant 2 Name WTP 2 | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8_Name_ | Plant 9. Name | Total |
| Day f Month | Public Water Sys | tem (PWS) Name: 100,000 tem (PWS) Name: | | | | T | | | | |
| Day 1 | 0 | 22,333 | | | | _ | - | 1 | | 22,333 |
| Day 2 | 0 | 22,333 | - | 1 | - | | | | - | 22,333 |
| Day 3 | 0 | 22,333 | | | - | | + | | | 22,333 |
| Day 4 | 0 | 21,100 | | | _ | 1 | | | | 21,100 |
| | 0 | 21,100 | | | _ | | - | - LAAA- | | 21,100 |
| Day 5 | | | - | | - | - | | - | | 21,500 |
| Day 6 | 167 | 21,333 | | - | | - | | | | 21,500 |
| Day 7 | 167 | 21,333 | | | | | | | | |
| Day 8 | 167 | 21,333 | | _ | | | | | | 21,500 |
| Day 9 | 150 | 20,650 | | | | | | | | 20,800 |
| Day 10 | 150 | 20,650 | | | | | | | | 20,800 |
| Day 11 | 0 | 20,450 | | | | | - | | | 20,450 |
| Day 12 | 0 | 20,450 | | | | | | | | 20,450 |
| Day 13 | 0 | 21,600 | | | | | | | | 21,600 |
| Day 14 | 0 | 21,600 | | | | | | | | 21,600 |
| Day 15 | 0 | 21,600 | | | | | | | | 21,600 |
| Day 16 | 0 | 19,800 | | | | | | | | 19,800 |
| Day 17 | 0 | 19,800 | | | | | | | | 19,800 |
| Day 18 | 150 | 22,600 | | | | | | | | 22,750 |
| Day 19 | 150 | 22,600 | | | | | | | | 22,750 |
| Day 20 | 0 | 22,267 | | | | | | | | 22,267 |
| Day 21 | 0 | 22,267 | | | | | | | | 22,267 |
| Day 22 | 0 | 22,267 | | | 1 | | | | | 22,267 |
| Day 23 | 0 | 17,600 | | | | | | | | 17,600 |
| Day 24 | 0 | 17,600 | | | | | | | | 17,600 |
| Day 25 | 150 | 25,050 | | | | - | | | | 25,200 |
| Day 26 | 150 | 25,050 | ì | | | | | | | 25,200 |
| Day 27 | 0 | 21,500 | | | | | | | | 21,500 |
| Day 28 | 0 | 21,500 | | - | | | - | | | 21,500 |
| Day 29 | 0 | 21,500 | | | | | | | | 21,500 |
| Day 30 | 0 | 19,750 | | | | | | | | 19,750 |
| Day 31 | 0 | 19,750 | | | | | | | _ | 19,750 |
| Total | T T | 13,700 | | | | | | | | 662,500 |
| Avg. | | | | | | | | | | 21,371 |
| Min | | | | | | | | | | 25,200 |



See Page 4 for instructions

Effective August 28, 2003

| I. General Information for th | | r 2024 | | | |
|-------------------------------|--|---------------------------------|------------------------|-------------------|---|
| Public Water System (PWS | | | | | |
| PWS Name: Backwate | | | | | entification Number: 6090099 |
| PWS Type: Commun | | | mmunity [] | | secutive |
| | ections at End of Month: 107 | Total P | opulation Served at I | End of Month: | 267 |
| | Vaterworks Inc. | | | | |
| | n Purviance | | | tility Manager | |
| | Address: 4939 Cross Bayou Boulevan | | | State: FL | Zip Code: 34652 |
| · | one Number: 866-753-8292 | | Person's Fax Numbe | r: 727-848-7701 | |
| Contact Person's Email A | ddress: spurviance@uswatercorp. | net | | | |
| . Water Treatment Plant Inf | ormation | | | | |
| Plant Name: WTP 1 | | | | Plant Teleph | one Number: |
| Plant Address: 5335 We | st Blade Lane | City: I | Ounnellon | State: FL | Zip Code: 34433 |
| Type of water treated by | Plant: [X] Raw Ground | Purchased Finished Water | | | |
| Permitted Maximum Da | y Operating Capacity of Plant, gallons | | | | |
| | ection 62-699.310(4), F.A.C.): D | | ass (per subsection 65 | 2-699.310(4), F. | A.C.): V |
| Licensed Operators: | Name: | License Class | License Number | | |
| Lead/Chief Operators: | Angela Covell | В | 23535 | | |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| II. Certification by Lead/Chi | ef Operator | | 2 | | |
| | | n am the lead/chief operator of | of the unter treatment | plant identified | l in Part 1 of this report. I certify that the |
| | | | | | ent chemicals used at this plant conform to NS |
| | | | | | additional operations records for this plant we |
| prepared each day that a lice | ensed operator staffed or visited this pla | ant during the month indicated | above: (1) records o | f amounts of ch | emicals used and chemical feed rate, and (2) if |
| applicable, appropriate treat | ment process performance records. Fr | uther more. I agree to provide | these additional ope | rations records t | to the PWS owner so that the PWS owner can |
| | opies of this report, at a convenient loca | | | | |
| | | | | | 72 00505 |
| Angela Covell | 1/6/2025 | Angela Covell | | | B 23535 |
| Signature and Date | | Printed or Typed Nan | ne | | License Number |
| DEP Form 62-555 900(300) | | | | | |

Page 1

| WS | Identification Number: | 6090099 | Plant Name: | Backwater Heights | WTP 1 | | | | |
|--|---|--|----------------------------|--------------------------|---|--|--|--|--|
| : Si | ummary of Use of Polyme | r Containing Acrylamide, Po | olymer Containing Epi | chlorohydrin, and Iron c | or Manganese Sequestrant for the Year: * | | | | |
| A. | Is any polymer containing the | he monomer acrylamide used a | at the water treatment pla | nt? [X] No [] Yes, and | d the polymer dose and the acrylamide level in the polymer are as fol | | | | |
| | Polymer Dose, ppm = | | | Acrylamide Level, %† | | | | | |
| В. | Is any polymer containing the polymer are as follows: | ng the monomer epichlorohydrin used at the water treatment plant? [X] No [] Yes and the polymer dose and the epichlorohydrin level in the | | | | | | | |
| | Polymer Dose, ppm = | | | Epichlorohydrin Level, % | † - | | | | |
| C. | Is any iron or manganese see | questrant used at the water trea | tment plant?[X] No [|] Yes and the type of s | equestrant, sequestrant dose, etc., are as follows: | | | | |
| | Type of Sequestrant (polyphosphate or sodium silicate): | | | | | | | | |
| | Sequestrant Dose, mg/L of | Sequestrant Dose, mg/L of phosphate as PO4 or mg/L of silicate as SiO2 = | | | | | | | |
| If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO2 = | | | | | | | | | |

^{*}Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.
†Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

6090099

45

167

Average

Maximum

WTP 1

December 2024

Backwater Heights WT.

III. Daily Data for the Month Year of:

Means of Achieving Four-Log Virus Inactivation/Removal

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

540

UltraViolet Radiation Other (Discribe)

| | | 11 8 15 | | The state of the state of | Total Total | CT Calculations or L | IV Dose, to Domonstrate Fou | r-Log Virus In | activation, if Applicable* | | | | | 124 |
|---------------------|---|----------------|--|---------------------------|--|--|--|----------------------|----------------------------|-------------------------------------|--|---|--|---|
| | | 11 3 4 | 5. 100 | | | CT Calc | alations | | | | | UV Dose | | Emergency or Abnormal |
| Day of the Month | Days Plant Staffed or visited by operator Place "X" | Hours Plant in | Net Quantity of Finished Water Produced, ==1 | Peak Flow Rate, and | Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, ma/L | Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes | Lowest CT Provided Before or at First Customer During Peak Flow, | Temp of Water, °C | pH of Water, if Applicable | Minimum CT Required, mg- mm/L | Lowest Operating UV Dose, mW- sec/cm ² | Minimum UV Dose Required. mW-sec/cm ² | Lowest Residual Dismfectant Concentration at Remote Point in Distribution System, mg/L | Operating Conditions, Repair or Maintenance Work that Involves Taking Water |
| 1 | X | 24 | 0 | | 2.12 | | <u> </u> | | | | | | 1.41 | |
| 2 | | 24 | 0] | | | | | | | | | | | |
| 3 | | 24 | 0 | | | | | | | | | | | |
| 4 | X | 24 | 0 | | 1.90 | | | | | | | | 1.52 | |
| 5 | 1 | 24 | 0 | | | | | , | | | | | | |
| 6 | X | 24 | 167 | | 2.11 | | | | | | 1 | | 1.73 | |
| 7 | | 24 | 167 | | | | | | | | | | | |
| 8 | | 24 | 167 | | | | | | | | | | | |
| 9 | X | 24 | 150 | | 1.63 | | | | | | | | 1.49 | |
| 10 | | 24 | 150 | | | | | | | | | | | |
| 11 | X | 24 | 0 | | 1.67 | | | | | | | | 1.48 | |
| 12 | | 24 | 0 | | | | | | | | | | | |
| 13 | X | 24 | 0 | | 1.45 | <u> </u> | | | | | | | 1.29 | |
| 14 | | 24 | 0 | | <u>i</u> | | | 1 | | | | | | |
| 15 | | 24 | 0 | | | 1 | | [| | |] | | | |
| 16 | X | 24 | 0 | | 1.65 | | | | | | | | 1.39 | |
| 17 | | 24 | 0 | | | | | 1 | | |] | | | |
| 18 | X | 24 | 150 | | 1.40 | | } | | | | 1 | | 1.11 | |
| 19 | | 24 | 150 | | } | | | | | | | | | |
| 20 | X | 24 | 0 | | 1.48 | | | | | | | | 1.32 | |
| 21 | ļ | 24 | 0 | | | | | | | | | | | |
| 22 | <u> </u> | 24 | 0 | | | | | | <u></u> | | _ | | | |
| 23 | X | 24 | 0 | | 1.72 | | | | | | | | 1.19 | |
| 24 | | 24 | 0 | | | <u> </u> | 1 | | | | | | | |
| 25 | X | 24 | 150 | | 1.53 | | 1 | | | | <u> </u> | | 1.37 | |
| 26 | | 24 | 150 | | | | | | | | | | | |
| 27 | X | 24 | 0 | | 1.73 | | | | | | | | 1.55 | |
| 28 | | 24 | 0 | | | | | | | | | | | |
| 29 | | 24 | 0 | | | | | | | | | | | 1 |
| 30 | X | 24 | 0 | | 1.81 | | 1 | | | | | | 1.63 | |
| 31 | | 24 | 0 | | | | | | | | | | | |
| | | | 1,401 | | | | | | | | | | | |



Effective August 28, 2003

| See Page 4 for instructions | | | | | | | |
|-------------------------------|---|---------------------------------|---|-----------------------|---|--|--|
| I. General Information for t | ne Month/Year of: December | r 2024 | | | | | |
| A. Public Water System (PW | | | | | | | |
| | er Heights | | | PWS Iden | tification Number: 6090099 | | |
| PWS Type: Commu | nity [X] NonTransitent | [] NonCo | mmunity [] | Consec | cutive | | |
| Number of Service Conr | nections at End of Month: 107 | Total P | opulation Served at 1 | End of Month: 26 | 57 | | |
| PWS Owner: Citrus V | Waterworks Inc. | | | | | | |
| Contact Person: Share | on Purviance | Contact | Person's Title: U | tility Manager | | | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Boulevan | rd City: No | ew Port Richey | State: FL | Zip Code: 34652 | | |
| Contact Person's Teleph | one Number: 866-753-8292 | Contact | Person's Fax Numbe | r: 727-848-7701 | | | |
| Contact Person's Email A | Address: spurviance@uswatercorp. | .net | | | | | |
| B. Water Treatment Plant In | ormation | | | | | | |
| Plant Name: WTP 2 | | | | Plant Telephon | e Number: | | |
| Plant Address: 5335 We | est Blade Lane | City: 1 | Dunnellon | State: FL | Zip Code: 34433 | | |
| Type of water treated by | | Purchased Finished Water | • | | - | | |
| Permitted Maximum Da | y Operating Capacity of Plant, gallons | | | | | | |
| - | ection 62-699.310(4), F.A.C.): D | | Plant Class (per subsection 62-699.310(4), F.A.C.): V | | | | |
| Licensed Operators: | Name: | License Class | License Number | | 12 | | |
| Lead/Chief Operators: | Angela Covell | В | 23535 | - 17 (27) | | | |
| Other Operators: | Jessie Jose Hinojosa | C | 28938 | | | | |
| | | | | | | | |
| | | | | | | | |
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| | | | | | • | | |
| | | | | | | | |
| | - | | | | | | |
| II. Certification by Lead/Ch | ief Operator | | | 102 | | | |
| | tment plant operator licensed in Floric | ta am the lead/chief operator | of the water treatmen | t plant identified in | Part Lof this report. Logrify that the | | |
| information provided in this | report is true and accurate to the best | of my knowledge and belief. I | certify that all drinki | ng water treatment | chemicals used at this plant conform to NSF | | |
| International Standard 60 o | r other applicable standard referenced | in subsection 62-555.320(3), F | A.C. I also certify th | at the following ad | ditional operations records for this plant were | | |
| prepared each day that a lice | ensed operator staffed or visited this pl | ant during the month indicated | l above: (1) records o | f amounts of chen | nicals used and chemical feed rate, and (2) if | | |
| applicable, appropriate treat | ment process performance records. Fr | urther more, I agree to provide | these additional ope | rations records to | the PWS owner so that the PWS owner can | | |
| | opies of this report, at a convenient loc | | - | | | | |
| 1 . 0 | 1/6/2025 | Angela Covell | | | B 23535 | | |
| Angela Covell | 1/0/2023 | | | | | | |
| Signature and Date | | Printed or Typed Nan | ne | | License Number | | |
| DEP Form 69-555 900(300) | | | | | | | |

Page 1

| WS | Identification Number: | 6090099 | Plant Name: | Backwater Heights | WTP 2 | | |
|----|--|--|---------------------|---------------------------|---|--|--|
| S | ummary of Use of Polyme | r Containing Acrylamide, Polymer G | Containing Epic | chlorohydrin, and Iron o | r Manganese Sequestrant for the Year: * | | |
| A. | Is any polymer containing the | ne monomer acrylamide used at the wat | ter treatment plai | nt? [X] No [] Yes, and | the polymer dose and the acrylamide level in the polymer are as fol | | |
| | Polymer Dose, ppm = | | | Acrylamide Level, %† | | | |
| В. | 3. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? [X] No [] Yes and the polymer dose and the epichlorohydrin level in the polymer are as follows: | | | | | | |
| | Polymer Dose, ppm = | | | Epichlorohydrin Level, %† | - | | |
| C. | Is any iron or manganese see | questrant used at the water treatment pl | ant?[X] No [|] Yes and the type of se | equestrant, sequestrant dose, etc., are as follows: | | |
| | Type of Sequestrant (polypl | nosphate or sodium silicate): | | | | | |
| | Sequestrant Dose, mg/L of 1 | phosphate as PO4 or mg/L of silicate as | SiO2 = | | | | |
| | If sodium silicate is used, the | e amount of added plus naturally occur | ring silicate, in m | g/L as SiO2 = | | | |

^{*}Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.
†Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

6090099

WTP 2 Backwater Heights

JM. Daily Data for the Month Year of: December 2024

Means of Achieving F ur-Log Virus Inactivation/Removal * Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide Ozone Other (Discribe) UltraViolet Radiation Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* UV Dose CT Calculations Emergency or Abnormal Days Plant Operating Conditions, Repair Lowest CT Provided Lowest Staffed or Lowest Residual Disinfectant or Markenance Work that Operating UV visited by Concentration (C) Before or at Disinfectant Contact Time (T) Refore or at First Custome Minimum CT Lowest Residual Disinfectant Involves Taking Water Net Quantity of Menmum UV Dose Required, Day of the operator Hours Plant in Finished Water First Customer During Peak at C Measurement Point During Peak Flow, Temp. of Required, mg-Dose, mW-Concentration at Remote Point System Components Out of During Peak Flow, minutes Water, °C PH of Water, if Applicable mW-sec/cm² in Distribution System, mg/L Operation Place "X" Operation Produced, gal Peak Flow Rate, and Flow, mg/L me mm/L X 24 22,333 2.02 2.12 1 2 24 22,333 3 24 22,333 1 X 24 21,100 1.92 1.90 5 24 21,100 6 24 21.333 2.11 1.86 7 24 21,333 8 24 21.333 9 1.63 24 20.650 1.71 10 24 20,650 11 \mathbf{X} 24 20,450 1.65 1.67 12 24 20,450 13 1.45 X 24 21,600 1.39 14 24 21,600 15 24 21,600 1.62 1.65 16 24 19,800 17 24 19.800 1.40 18 X 24 22,600 1.68 19 24 22.600 1.48 20 24 22.267 1.38 21 24 22,267 22 24 22,267 1.72 23 X 24 17,600 1.42 24 24 17,600 1.53 25 1.46 24 25,050 26 24 25,050 1.73 27 X 24 21,500 1.43 28 24 21,500 29 24 21,500 1.81 30 24 19,750 1.63 31 24 19.750

Total 661,099 21,326 Average 25,050 Maximum

| Account | Route | Label | Comment | Date | Resolution |
|----------|---------------------|---|--|---------------------|---|
| 54826133 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPdsawyer 05/02/2022: TARRA C/I TO REPORT NO WATER FOR DUNELLEN: NO WATER IN DUNNELLON. TECH SHOULD BE ON SCENE INSPECTING NO WATER ISSUE. NO UPDATES FOR WHEN WATER WILL BE RESTORED. NFAN | 05/02/2022 04:17 PM | Hydro tank exploded due to tree falling. Tank eventually replaced. |
| 54828770 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPIdrost 10/26/2022: GEORGE CALLED IN - LOW TO NO WATER PRESSURE FOR LAST HR. CALLED JGONZALEZ, WILL HAVE SOMEONE HEAD OVER TO INSPECT. SUBMITTED S/O. INFORMED GEORGE. NFAN | 10/26/2022 01:17 PM | Lost system pressure yesterday evening due to a bad breaker and wire underground going to our well. Had system PSI back up to normal around 2100. Lost system pressure yesterday evening due to a bad breaker |
| 54826534 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPdjohnson 10/26/2022: JANILEE CI BECAUSE NO WATER. I ADV WILL CALL TECHS, NFAN | 10/26/2022 01:50 PM | and wire underground going to our well. Had system PSI back up to normal around 2100. Lost system pressure yesterday evening due to a bad breaker |
| 54826136 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPdjohnson 10/26/2022; CUST LMOM ABOUR NO WATER AND BILL NOT DUE YET. I CALLED. NO ANSWER. LMOM. I ADV TECHS RESONDING TO REPORTS OF NO WATER IN THE AREA. NO UPDATES YET. I ADV CAN CALL BACK IF HAS QU | 10/26/2022 02:00 PM | and wire underground going to our well. Had system PSI back |
| 54826162 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPdsawyer 10/26/2022: MISS L C/I NO WATER. ADV JUST RCVD INFO THAT TECHS ARE INVESTIGATING PROBLEM. ALSO, SHE ASKED FOR BAL. PROVIDED INFO. NFAN | 10/26/2022 02:22 PM | and wire underground going to our well. Had system PSI back up to normal around 2100 Lost system pressure yesterday evening due to a bad breaker |
| 54826625 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPdjohnson 10/26/2022: MEGAN LMOM ABOUT NO WATER, I CALLED, I ADV OUTAGE IN ARE NO ETA YET, NFAN | 10/26/2022 03:37 PM | and wire underground going to our well. Had system PSI back up to normal around 2100. Lost system pressure yesterday evening due to a bad breaker |
| 54826097 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPdsawyer 10/26/2022: CUST C/I REPORTING NO WATER. ADV THAT TECHS ARE ON IT. A WELL MOTOR SHORTED CAUSING LOSS OF WATER PRESSURE/NO WATER. THERE IS A BWN. NFAN | 10/26/2022 03:55 PM | and wire underground going to our well. Had system PSI back up to normal around 2100. Lost system pressure yesterday evening due to a bad breaker and wire underground going to our well. Had system PSI back |
| 54826112 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPdjohnson 10/26/2022: ROSE LMOM ABOUT NO WATER, I CALLED, IA DV OUTAGE IN AREA NO ETA, NFAN | 10/26/2022 04:14 PM | up to normal around 2100. System lost pressure due to a bad breaker and wire at the well. |
| 54826146 | Citrus Waterworks | F 5.1 Pressure Issue | OPdjohnson 10/26/2022: BETH CI ABOUT LOW PRESURE I ADV WILL CHECK WITH TECHS SUBMITTED SO TO INSPECT. NFAN | 10/26/2022 01:39 PM | System PSI was restored yesterday evening by 2100. |
| 54826061 | . Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPIVeldhouse 02/06/2023: LINDA CI STATING HER WATER WAS WORKING AND THEN SHUT OFF. SHE HAD A LITTLE LEAK OUT. SO FILLED OUT TO CHECK WATER. | 02/06/2023 09:44 AM | HAD A 2 INCH LEAK WHICH CAUSED PRESSURE LOSS. SPOKE WITH CUSTOMER, |
| | | | OPacarter 02/06/2023: LINDA CI HAS NO WATER NOW. I ADV WE HAVE A SO OUT FOR HER. AN ON ONE ELSE HAS CI ABOUT IT | | HAD A 2 INCH LEAK WHICH CAUSED PRESSURE LOSS. SPOKE |
| | | F 5.0 No Water - Sewer / Service Interruption | YET. NFAN | 02/06/2023 11:36 AM | |
| 54828278 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPacarter 02/06/2023: LUCIE CI ABOUT LOW PRESSURE/ NO WATER. I ADV TECHS WERE WORKING ON IT. NFAN OPacarter 07/26/2023: LL CI TO LET US KNOW THEY ARE EXPERIANCING A LACK OF WATER PRESSURE THEN WATER LOSS | 02/06/2023 11:57 AM | HAD A 2 INCH LEAK WHICH CAUSED PRESSURE LOSS. pipe was repaired and leak was fixed completed by Jason Losch |
| 54826370 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | COMPLETELY. NFAN . | 07/26/2023 12:07 PM | USWealicea 08/09/2023: OWNER OANH TRAN CALLED STATING NO WATER AT THE PROPERTY - I CALLED FIELD TECH TO CONFIRM WHY THE CUSTOMER IS WITHOUT WATER-SPOKE WITH JUAN GONZALES REGARDING THE SITUATION THERE IS A METER TO THE ADDRESS PIPE HAS BEEN SEVERED ON THE CUSTOMERS SIDE TECHS HAVE BEEN TO THIS PROPERTY TWICE TO INFORM OWNER THEY NEED A PLUMBER WHEN THE METER IS TURNED ON IT WILL SPIN VERY FAST. I |
| 54831393 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | USWealicea 08/09/2023; OWNER OANH TRAN CALLED STATING NO WATER AT THE PROPERTY - I CALLED FIELD TECH TO CONFIRM WHY THE CUSTOMER IS WITHOUT WATER- SPOKE WITH JUAN GONZALES REGARDING THE SITUATION THER | 08/09/2023 01:51 PM | TRIED CALLING THE OWNER AT 727-226-7245 NO ANSWER VM IS FULL. |
| | | | OPdsawyer 09/27/2024; ALLEN C/B 3RD TIME COMPLAINING OF BEING DIRTY, NO WATER, ETC. ADV AGAIN, POWER OUTAGE AT PLANT - HE WILL BE ON BWN. ARGUED HOW LCAN HE BE ON BWN WHEN HE HAS NO WATER AND TECHS SHLD HAVE GENERATORS AT PLANT AS HE LIVES ACROSS STREET FROM PLANT AND ON SAME POWER GRID AS PLANT. ADV THAT TECHS HAVE BEEN CONTACTED. CONTINUED TO ARGUE DON'T WE KNOW HOW IMPORTANT WATER IS AND HE'S TRIED TO CONTACT EMERGENCY PH# NO ONE ANSWERS. ADV I UNDERSTAND AND HAVE BEEN IN SAME SITUATION - BUT HE CONTINUED TO ARGUE | | Hurricane Helene caused power outage at plant. Water |
| | | F 5.0 No Water - Sewer / Service Interruption | AND ADV HIM WILL END CALL. ENDED CALL. NFAN OPaochoa 09/27/2024: DONNA CI ADV SHE STILL HAS NO WATER. ADV THEY ARE WORKING ON GETTING GENERATORS OUT | 09/27/2024 07:55 AM | restored after power was restored. Hurricane Helene caused power outage at plant. Water |
| | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | THERE AND SHOULD BE ON IN A COUPLE HOURS. NFAN. | | restored after power was restored. Hurricane Helene caused power outage at plant. Water |
| 54826046 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPacarter 09/27/2024: GARY CI TO LET US KNOW OF A TREE DOWN ON THE WATER PLANT. NFAN | 09/27/2024 12:00 PM | restored after power was restored. Hurricane Helene caused power outage at plant. Water |
| 54826141 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPacarter 09/27/2024: LESLIE CITO SEE IF THERE IS ANY UPDATE ON THE WATER OUTAGE. NFAN OPdsawyer 09/27/2024: CUST C/I NO WATER. ADV STORM TOOK OUT POWER WHICH AFFECTS WATER PLANT. TECHS ARE | 09/27/2024 12:31 PM | restored after power was restored. Hurricane Helene caused power outage at plant. Water |
| 54826178 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | WORKING ON IT AND IT IS WIDE-SPREAD. BWN WHEN WATER RESTORED. NFAN | 09/27/2024 01:43 PM | restored after power was restored. Hurricane Helene caused power outage at plant. Water |
| 54826103 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPacarter 09/27/2024: KATHYLEE CI TO SEE WHEN WATER WILL BE RESTORED. NFAN OPdsawyer 09/27/2024: HOLLY C/I STILL NO WATER. ADV STORM KNOCKED OUT POWER IN PLANT. WAITING FOR POWER | 09/27/2024 01:58 PM | restored after power was restored. Hurricane Helene caused power outage at plant. Water |
| 54826391 | . Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | AND/OR INSTALLING GENERATOR. NO ETA AT THIS TIME. NFAN | 09/27/2024 02:10 PM | restored after power was restored. Hurricane Helene caused power outage at plant. Water |
| 54826117 | Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPacarter 09/27/2024: ROY CLTO MAKE SURE WE KNEW ABOUT THE OUTAGE, NFAN | 09/27/2024 02:12 PM | restored after power was restored. |

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|--|--|--|---|--|
| | 550M W | OPdjohnson 09/27/2024: DONNA CI ABOUT NO WATER. I ADV TECHS ARE WORKING ON RESTORING WATER IT IS THIER HIGHEST | | Hurricane Helene caused power outage at plant. Water |
| 54826066 Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | PRIORITY. NFAN | 09/27/2024 02:54 PM | |
| 54830857 Citrus Waterworks | FF ON- Marcon Company of the Company | | | Hurricane Helene caused power outage at plant, Water |
| 54650657 Citius Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPacarter 09/27/2024: JAYMEE CI FOR UPDATE OF WHEN WATER WILL BE RESTORED. NFAN | 09/27/2024 03:17 PM | · |
| 54826141 Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPacarter 09/27/2024: LESLIE CI TO SEE IF THERE IS ANY UPDATE ON THE WATER OUTAGE. NFAN | 00/27/2024 02:05 214 | Hurricane Helene caused power outage at plant. Water |
| 54626141 Citius Waterworks | r 5.0 No Water - Sewer / Service Interruption | OPBCBREF 09/2/1/2024: LESLIE OF TO SEE IF THERE IS ANY OPDIALE ON THE WATER OUTAGE, NEAN | 09/27/2024 03:35 PM | restored after power was restored. Hurricane Helene caused power outage at plant. Water |
| 54926129 Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPacarter 09/27/2024: BETTY CLTO SEE IF THERE IS ANY UPDATE ON THE WATER OUTAGE. NFAN | 00/27/2024 p2:40 BM | restored after power was restored. |
| 0402012B Citius Waterworks | r 5.0 No water - Sewer / Service Interruption | OPACATER 09/27/2024: BETTY CTO SEE IF THERE IS ANY OPDATE ON THE WATER OUTAGE. NEAN OPACATER 09/27/2024: WILLIAM CTUPSET THEY STILL HAVE NO WATER. LADV WE HAVE NO UPDATES ON THE REPAIRS. HE WAS | 09/2/12024 03:40 PM | Hurricane Helene caused power outage at plant, Water |
| 54826182 Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | ANGRY AND WANTING A NUMBER WHERE HE CAN GET ANSWERS, I GAVE HIM THE EMERGANCY # THAT HE | 09/27/2024 06:43 PM | · · · · · · · · · · · · · · · · · · · |
| | i sis its tracer outlet a cervine interruption | ANOTHER PROPERTY OF THE PROPER | 03/2//2024 04.44 114 | Tollet problem. Advised customer to contact plumber to |
| 54832958 Citrus Waterworks | F 5.0 No Water - Sewer / Service Interruption | OPacarter 02/20/2025: GABRIELLA CI BC SHE HAS NO WATER, SUBMITTED SO, NFAN | 02/20/2025 04:21 PM | inspect the toilet. Read is 0140460. |
| | Total Tatal | OPIdrost 01/25/2021: GARY CALLED IN - VERY LOW WATER PRESSURE, CAN'T EVEN TAKE A SHOWER, FOR OVER 24 HRS NOW. | 02/20/2023 04,21 / 11 | spoke with customer he said the water pressure seemed to be |
| 54826046 Citrus Waterworks | F.5.1 Pressure Issue | HAPPENED LAST WEEK AS WELL BUT CORRECTED ITSELF. SUBMITTED 5/0, NFAN | 01/25/2021 08:59 AM | working , i did a flow test and it was 42Jennifer l. |
| | | OPcbrann 06/29/2021: SPK TO LINDA MINOR @352-489-3240:SHE WAS CALLING TO SAY THE WATER PRESSURE IS ONLY A | 01120/2022 00:00 / 11 / | there low pressure is something in the house its just in the |
| 54826178 Citrus Waterworks | F 5.1 Pressure Issue | TRICKLE SINCE 6-26-21;S/O CREATED;NFAN | 06/29/2021 05:30 PM | |
| [| | | | Pressure is 35psi at well, customer wasn't home, talked to |
| i | | | | brother, he said the pressure is good at the moment. Jessie |
| 54826122 Citrus Waterworks | F 5.1 Pressure Issue | OPmrodgers 09/02/2021: KATHLEEN CALLED VERY LOW PRESSURE; OPmrodgers 09/02/2021: S/O COMPLETE | 09/02/2021 09:56 AM | Hinojosa 09/07/21XXXX |
| 1 | | | | Pressure is 35psi at well, customer wasn't home, talked to |
| i | | OPobrann 09/02/2021: RTRN VM TO KATHLEEN COLLINS @352-489-1280; SHE WAS CALLING ON LOW PRESSURE; J ADV S/O | | brother, he said the pressure is good at the moment. Jessie |
| 54826122 Citrus Waterworks | F 5.1 Pressure Issue | SUBMITTED FOR 9-3-21;ADV I ALSO LEFT THE TECH JEFF HINES A MSG @352-549-0226; | 09/02/2021 04:37 PM | Hinojosa 09/07/21XXXX |
| | | | | |
| | | | | pressure is normal, the system is running temporally on backup |
| 54826120 Citrus Waterworks | F 5.1 Pressure Issue | OPmrodgers 09/07/2021: SIDNEY CALLED LOW PRESSURE S/O COMPLETE | 09/07/2021 08:54 AM | well until repairs can be made at primary well. Read- 0091150 |
| | | | | |
| | | OPIdrost 09/09/2021: SIDNEY CALLED IN FOR RESULTS OF S/O. NO NOTES YET. CALLED JHINES - WILL MAKE SURE SOMEONE IS | | pressure is normal, the system is running temporally on backup |
| 54826120 Citrus Waterworks | F 5.1 Pressure Issue | OUT W/IN THE NEXT 1-2 HRS TO COMPLETE. ASKED JHINES TO HAVE SOMEONE NOTIFY SIDNEY WHEN | 09/09/2021 10:37 AM | well until repairs can be made at primary well. Read- 0091150 |
| | | OPdjohnson 05/02/2022: CUST REPORTED LOW PRESSURE. I ADV HAVE GOTTEN SOME CALLS OF NO WATER, CONFIREM JUST | | the plant went down it was not from nothing at there house we |
| 54826142 Citrus Waterworks | F 5.1 Pressure Issue | LOW PRESSURE. I ADV WIL SUBTI SO TO INSPECT PRESSURE. NFAN | 05/02/2022 03:46 PM | are on back plant wtp we are working on plant |
| | | OPdjohnson 06/28/2022: LUCIE CI. STATED PRESSUR ONLY AT ABOUT 20PSI. HE STATED IS NORMALLY AROUN 45PSI. I ADV | | |
| 54828278 Citrus Waterworks | F 5.1 Pressure Issue | POSSIBLE SINCE THIS IS A TIME WHEM MORE PEOPLE ARE HOME THAT MORE PEOPLE ARE USING WATER. | 06/28/2022 05:30 PM | psi was 45 no leaks completed by Juan at 4:44 pm XXXX |
| 1 | | Opjaczarnik 06/29/2022: LUCIE CALLED IN TO CHECK ON PRESSURE STATUS; ADV S/O DISPATCHED BUT NO NOTES TO | | |
| 54828278 Citrus Waterworks | F 5.1 Pressure Issue | INCIDICATE IT WAS COMPLETED; CUSOMER ADV THAT TECH CAME OUT LAST NIGHT AND INDICATED A POSSIBLE | 06/29/2022 06:46 AM | psi was 45 no leaks completed by Juan at 4:44 pm XXXX |
| | | | | did pressure check at the house psi is 25 and removed meter |
| | | OPIdrost 06/29/2022: GEORGE CALLED IN, LM. SAID PRESSURE IS LOW. CALLED BACK, PRESSURE WAS A BIT BETTER. WAS | | and check psi at meter spud and psi is 41 issue is after meter |
| 54828770 Citrus Waterworks | F 5.1 Pressure Issue | THROUGHOUT HOUSE, COULD HARDLY RUN WATER IN SINK, NO ABILITY TO TAKE A SHOWER. CHKD AGAIN, | 06/29/2022 07:57 AM | completed by Jason Losch at 2:37 pm XXXX |
| | | OPCJOHNSON 02/06/2023: GEORGE LMOM ABOUT PRESSURE ISSURE. I CALLED, I ADV TECHS WORKING ON LEAK AT PLANT, IA DV | | |
| 54828770 Citrus Waterworks | | WATER SHOULD BE RESTORED SOON. NFAN | | Leak at plant. Water restored after repair. |
| 54826122 Citrus Waterworks | | OPtveldhouse 03/17/2023: KATHLEEN CI BECAUSE LOW PRESSURE. SUPERVISOR AWARE AND SENDING TECHS OUT. NFAN | | Dump truck ran over line - repair made to 2" water line |
| 54826119 Citrus Waterworks | F 5.1 Pressure Issue | OPdsawyer 03/17/2023: THERESA C/I THAT THERE WAS VERY LITTLE PRESSURE, S/O SUBMTD. NFAN | 03/17/2023 08:54 AM | Dump truck ran over line - repair made to 2" water line |
| ! | | OPdsawyer 03/17/2023: HELEN C/I TO REPORT LOW PRESSURE, ADV DUE TO MAIN BREAK/CRACK, TECHS ARE WORKING ON IT. | | į |
| 54826083 Citrus Waterworks | F 5.1 Pressure Issue | NO ETA. NFAN | 03/17/2023 09:38 AM | Dump truck ran over line - repair made to 2" water line |
| i | | | | Spoke with homeowner and repaired the broken 2" water main |
| ! | | Shirm and the second state of the second state | | that the dump truck ran over. Repair was completed on 3/17 |
| LEADADAGE CHANGESTON | LP 2 Main Prook | OPdsawyer 03/17/2023: CHAZ C/I THAT A DUMPTRUCK DROVE OVER WATER LINE AND CRACKED PIPE. EMAILED TECH FOR S/O | 00/47/0000 00:40 514 | before 1200, pressure was restored to the residents house |
| 54828125 Citrus Waterworks | To.z Main Break | AND SUBMTD, S/O. NFAN | 03/1//2023 02:42 PM | shortly after the repair was complete. |
| F4000007 Olymorthise 1 | 5548 | OR THE STATE OF TH | 0.4105/100000.00.00 | talk to customer about issue with pressure need to add another |
| 54826067 Citrus Waterworks | r o'T klesznie izzne | OPdsawyer 04/05/2023: KELVIN WILSON C/I LOW WATER PRESS ISSUE FOR A MONTH, S/O SUBMTD. NFAN | 04/05/2023 09:20 AM | service line to help with issue xxxx |
| EADOG124 Cityur Western | E E 1 Brossura Janua | OPtveldhouse 06/13/2023: RICK CI SAID HE HAS LOSS OF WATER PRESSURE AND WATER IS TRICKLING OUT. SAID IT HAS BEEN | 001401000000000000 | took and to refer the second of the second o |
| 54826134 Citrus Waterworks | F 5.1 Pressure Issue | ABOUT A HALF HOUR. FILLED OUT SO. | 06/13/2023 02:58 PM | tech spoke w/customer about water problemall is good now |
| | | ABAILINE - COMMISSON LAIGHT OLTO REPORT LOSS OF APPROPRIES LIFE AND THERE IS AN CLEOCOCCA COMMISSON COMMIS | | |
| E4000070 Cir | | OPtveldhouse 06/23/2023: LUCIE CI TO REPORT LOSS OF PRESSURE, HE SAID THERE IS AN ELECTRICAL OUTAGE TO THE AREA | 00/00/0000 00 00 00 | Af an India and the latest the second |
| 54828278 Citrus Waterworks | | OPtveldhouse 06/23/2023: LUCIE CITO REPORT LOSS OF PRESSURE. HE SAID THERE IS AN ELECTRICAL OUTAGE TO THE AREA AND WE ARE TO HAVE A BACK UP POWER SOURCE. ADV CUST HE CAN CALL CORP OFFICE BUT I CAN FI | 06/23/2023 02:46 PM | |
| 54828278 Citrus Waterworks | | AND WE ARE TO HAVE A BACK UP POWER SOURCE. ADVICUST HE CAN CALL CORP OFFICE BUT I CAN FI | 06/23/2023 02:46 PM | water is on check psi at the house psi is 25 removed meter and |
| | F 5.1 Pressure Issue | AND WE ARE TO HAVE A BACK UP POWER SOURCE. ADVICUST HE CAN CALL CORP OFFICE BUT I CAN FI OPdsawyer 07/20/2023: KATHLEEN C/I THAT PRESSURE IS LOW SINC 7/16/23 WHEN THERE WAS A MASSIVE POWER OUTAGE | | water is on check psi at the house psi is 25 removed meter and did psi is 41 customer issues is after meter spud completed by |
| 54828278 Citrus Waterworks 54826122 Citrus Waterworks | F 5.1 Pressure Issue | AND WE ARE TO HAVE A BACK UP POWER SOURCE. ADVICUST HE CAN CALL CORP OFFICE BUT I CAN FI | | water is on check psi at the house psi is 25 removed meter and did psi is 41 customer issues is after meter spud completed by Jason Losch at 3:00 pm XXXX |
| | F 5.1 Pressure Issue | AND WE ARE TO HAVE A BACK UP POWER SOURCE. ADVICUST HE CAN CALL CORP OFFICE BUT I CAN FI OPdsawyer 07/20/2023: KATHLEEN C/I THAT PRESSURE IS LOW SINC 7/16/23 WHEN THERE WAS A MASSIVE POWER OUTAGE DUE TO DRUNK DRIVER HITING POWERPOLE. S/O SUBMID. NFAN | | water is on check psi at the house psi is 25 removed meter and did psi is 41 customer issues is after meter spud completed by Jason Losch at 3:00 pm XXXX did pressure check at the house psi is 25 and removed meter |
| 54826122 Citrus Waterworks | F 5.1 Pressure Issue F 5.1 Pressure Issue | AND WE ARE TO HAVE A BACK UP POWER SOURCE. ADV CUST HE CAN CALL CORP OFFICE BUT I CAN FI OPdsawyer 07/20/2023: KATHLEEN C/I THAT PRESSURE IS LOW SING 7/16/23 WHEN THERE WAS A MASSIVE POWER OUTAGE DUE TO DRUNK DRIVER HITING POWERPOLE. S/O SUBMTD. NFAN OPtveldhouse 07/20/2023: GEORGE CI BECAUSE THERE HAS BEEN A DROP IN PRESSURE FOR THE LAST 3 DAYS. FILLED OUT SO. | 07/20/2023 09:33 AM | water is on check psi at the house psi is 25 removed meter and did psi is 41 customer issues is after meter spud completed by Jason Losch at 3:00 pm XXXX did pressure check at the house psi is 25 and removed meter and check psi at meter spud and psi is 41 issue is after meter |
| 54826122 Citrus Waterworks 54828770 Citrus Waterworks | F 5.1 Pressure Issue F 5.1 Pressure Issue F 5.1 Pressure Issue | AND WE ARE TO HAVE A BACK UP POWER SOURCE. ADV CUST HE CAN CALL CORP OFFICE BUT I CAN FI OPdsawyer 07/20/2023: KATHLEEN C/I THAT PRESSURE IS LOW SING 7/16/23 WHEN THERE WAS A MASSIVE POWER OUTAGE DUE TO DRUNK DRIVER HITING POWERPOLE. S/O SUBMTD. NFAN OPtveldhouse 07/20/2023: GEORGE CI BECAUSE THERE HAS BEEN A DROP IN PRESSURE FOR THE LAST 3 DAYS. FILLED OUT SO, NFAN | 07/20/2023 09:33 AM 07/20/2023 11:57 AM | water is on check psi at the house psi is 25 removed meter and did psi is 41 customer issues is after meter spud completed by Jason Losch at 3:00 pm XXXX did pressure check at the house psi is 25 and removed meter and check psi at meter spud and psi is 41 issue is after meter completed by Jason Losch at 2:37 pm XXXX |
| 54826122 Citrus Waterworks 54828770 Citrus Waterworks 54826112 Citrus Waterworks | F 5.1 Pressure Issue F 5.1 Pressure Issue F 5.1 Pressure Issue F 5.1 Pressure Issue | AND WE ARE TO HAVE A BACK UP POWER SOURCE. ADV CUST HE CAN CALL CORP OFFICE BUT I CAN FI OPdsawyer 07/20/2023: KATHLEEN C/I THAT PRESSURE IS LOW SINC 7/16/23 WHEN THERE WAS A MASSIVE POWER OUTAGE DUE TO DRUNK DRIVER HITING POWERPOLE. S/O SUBMTD. NFAN OPtveldhouse 07/20/2023: GEORGE CI BECAUSE THERE HAS BEEN A DROP IN PRESSURE FOR THE LAST 3 DAYS. FILLED OUT SO. NFAN OPaochoa 04/09/2025: KEVIN CI ADV HE HAS BEEN HAVING LOW PRESSURE FOR A WEEK NOW. FILLED S/O | 07/20/2023 09:33 AM 07/20/2023 11:57 AM 04/09/2025 03:28 PM | water is on check psi at the house psi is 25 removed meter and did psi is 41 customer issues is after meter spud completed by Jason Losch at 3:00 pm XXXX did pressure check at the house psi is 25 and removed meter and check psi at meter spud and psi is 41 issue is after meter completed by Jason Losch at 2:37 pm XXXX water pressure is normal at both plants |
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| 1 | | | | per Citrus tech, water pressure was 45 psi. Spoke with |
|----------------------------|----------------------|---|---------------------|--|
| | | | | customer and explained to her that she may need a plumber to |
| | | | | take a look. They need to look at everything inside to figure out |
| 54826061 Citrus Waterworks | F 5.1 Pressure Issue | OPdsawyer 04/24/2025: LINDA C/I THAT SHE IS STILL EXPERIENCING LOW PRESSURE. S/O SUBMTD | 04/24/2025 09:02 AM | the inside issue. |
| | • | OPIdrost 05/14/2021: ROY CALLED IN TO REPORT HE BELIEVES THERE MAY BE A MAIN BREAK NEAR MAILBOX ON RIGHT HAND | | Alex Heinzlman received a call on May 15, 2021 about a leak. |
| 54826117 Citrus Waterworks | I 8.2 Main Break | SIDE - WATER SEEPING AND BUBBLING. NOTICED WHEN HE WAS MOWING THIS MORNING. CONTACTING JHI | 05/14/2021 11:17 AM | He fixed the leak at 5222 W Evita LnJennifer Luby |
| | | opckaliszewski 04/29/2024: MIKE CI SAID RIGHT AROUND THE CORNER FROM HIS HOUSE THERE IS A GOOD SIZED LEAK | | |
| 54827578 Citrus Waterworks | i 8.2 Main Break | COMING FROM A PIPE. I GAVE HIM THE EMERGENCY NUMBER TO CALL, NFAN | 04/29/2024 06:37 PM | Main Break was repaired |
| 54826176 Citrus Waterworks | l 8.2 Main Break | OPdjohnson 10/11/2024: CUST CI TO REPORT 2 MAIN BREAKS DOWN THE STREET. SO SUBMITTED. NFAN | 10/11/2024 09:48 AM | Main Break was repaired |
| | | | | Dave Schirmer provided following notes on service call: "I just |
| | | | | came back from the customer's house, he stated that it has |
| | | Opjaczarnik 10/19/2021: HOLLY CALLED REGARDING WATER QUALITY; SHE ADV GREY WATER SINCE YESTERDAY (10/18); ADV | | cleared up some. I asked for a sample to test ph and chlorine |
| 54826391 Citrus Waterworks | J 9.0 Water Quality | WOULD SEND S/O TO TECH TO INSPECT; | 10/19/2021 07:33 AM | which came back as 7.0 and .60 |
| | | | | I explained to the customer that air in the water will cause it to |
| | | | | look cloudy. He stated that he noticed it mostly in the tub or |
| | | | | large body of water. I encouraged him to call back if it |
| 54828278 Citrus Waterworks | J 9.0 Water Quality | OPaochoa 09/30/2024: NAVID CI ADV SINCE WATER WAS TURNED PON ITS BEEN CLOUDY. FILLED S/O. NFAN. | 09/30/2024 03:07 PM | continues or gets worse." - JH |

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