EXCEL
ENGINEERING CONSULTANTS, INC.
Environmental & Civil Engineers

Before the

FLORIDA PUBLIC SERVICES COMMISSION

DOCKET NO. 010492-WS

APPLICATION FOR A GENERAL RATE INCREASE FOR

Zellwood Station

Water & Wastewater Development Facility
Orange County, Florida

VOLUME II

WATER & WASTEWATER MINIMUM FILING REQUIREMENTS

Containing

ENGINEERING INFORMATION

Prepared by:
Excel Engineering Consultants, Inc.
122 Wilshire Boulevard
Casselberry, FL 32707

Zellwood Station
Water and Wastewater Treatment Facility
Orange County, Florida
Docket No. 010492-WS

TABLE OF CONTENTS

1999 CHEMICALS USED AT WATER TREATMENT PLANT					
ITEM	DESCRIPTION	UNIT	UNIT PRICE	QUANTITY	AMOUNT
1	Pre-chlorination 10% Liquid Bleach used at Well 1 & 2.	gal.	$1.00 gal	10,520 gal	$ 10,520.00
2	Post-chlorination 150 lbs CL_2 gas used at Water Treatment Plant.	cyl	$117.00 per cyl	10lb gas used per day	$ 2,691.00
3	HTH Granular 60% - general use at Water Treatment Plant site.	drum	$1.40 lb	10lb used per day	$ 560.00

1999 CHEMICALS USED AT WASTEWATER TREATMENT PLANT					
ITEM	DESCRIPTION	UNIT	UNIT PRICE	QUANTITY	AMOUNT
1	150lb CL_2 gas used for disinfection of the Wastewater Treatment Plant	cyl	$0.78 lb	21lb gas used per day	$ 5,850.00
2	HTH Granular 60% - general use at Wastewater Treament Plant	drum	$1.40 lb	10lb used per dose	$ 280.00
3	Trichlorisocyanuric Acid 95% - used for pH adjustment	drum	$2.30 lb	10lb used per dose	$ 460.00
4	Bio Clear Enzyme - degreaser used at Lift Station	gal	$21.87 gal	1 gal. per use	$ 874.80
5	Chemical Hand Wipes - general use around Wastewater Treatment Plant	can	14.91 can	6 cans a year	$ 89.46

2000 CHEMICALS USED AT WATER TREATMENT PLANT					
ITEM	DESCRIPTION	UNIT	UNIT PRICE	QUANTITY	AMOUNT
1	Pre-chlorination 10% Liquid Bleach used at Well 1 & 2 Storage Tank.	gal	$1.00 gal	12,247 gal	$ 12,247.00
2	Post-chlorination 150 lbs CL_2 gas used at Water Treatment Plant.	cyl	$0.80 lb	14lb used per day	$ 4,080.00
3	HTH Granular 60% - general use at Water Treatment Plant site.	drum	$1.40 lb	10lb used per day	$ 560.00

2000 CHEMICALS USED AT WASTEWATER TREATMENT PLANT					
ITEM	DESCRIPTION	UNIT	UNIT PRICE	QUANTITY	AMOUNT
1	150lb CL_2 gas used for disinfection of the Wastewater Treatment Plant	cyl	$120.00 cyl	25lb used per day	$ 7,200.00
2	HTH Granular 60% - general use at Wastewater Treament Plant	drum	$1.40 lb	10 lb used per day	$ 280.00
3	Trichlorisocyanuric Acid 95% - used for pH adjustment	drum	$2.28 lb	10 lb used per day	$ 570.00
4	Bio Clear Enzyme - degreaser used at Lift Station	gal	$21.87 gal	1 gal per dose	$ 656.10
5	Degreaser 5 gal pail - used at Lift Station	gal	$16.00 gal	1 gal per dose	$ 480.00

FLOWERS CHEMICAL LABORATORIES INCORPORATED

Received From:
Zellwood Station CO-OP
2126 Spillman Drive
Zellwood,FL 32798

Date Reported : Apr19 2000
Project Number : 34841506
PO Number : N/A
FLDOH Number : 83139/E83018
NYSDOH Number : 11595
FDER COMQAPNum : 86-0008
CTDPH Number : 0173
NCDEHNR Number : 296
SCDHEC Number : 96019

For: POE
Date Sampled:Mar28 2000 Date Received:Mar28 2000 Lab Number : 19882

REPORT OF ANALYSIS

Parameter	Unit	Reportable Detection Limit	%Rec	%RSD	19882
Gross alpha	pCi/L	0.100			0.800
Analysis Error	pCi/L	0.100			0.500
Photon emitters	pCi/L	0.100			-
Analysis_Error(Photo	pCi/L	0.100			-
Radium 226	pCi/L	0.100			-
Analysis_Error(226)	pCi/L	0.100			-
Radium 228	pCi/L	0.300			-
Analysis_Error(228)	pCi/L	0.300			-
Man-made beta & phot	pCi/L	0.100			-
Analysis_Error(beta	pCi/L	0.100			-

Certificate of Results

Sample integrity certified prior to analysis. Test results meet all requirments of the NELAC Standards, except as noted in the QA Report Section 4. This Report may not be reproduced in part, results relate only to items tested.

Jefferson S. Flowers, Ph.D.
President/Technical Director

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NCDEHNR Number : 296
SCDHEC Number : 96019

For: POE
Date Sampled:Mar28 2000 Date Received:Mar28 2000 Lab Number : 19882

REPORT OF ANALYSIS

Parameter	Unit	Reportable Detection Limit	%Rec	%RSD	19882
Fluoride	mg/L	0.0347	87.7	.000	0.441
Lead	mg/L	0.000100	109.	.480	0.000592
Mercury	mg/L	0.000200	105.	8.00	<0.000200
Nickel	mg/L	0.000400	112.	13.5	0.00313
Nitrate(as N)	mg/L	0.00900			0.136
Nitrite(as N)	mg/L	0.00350	104.	1.71	<0.00350
Selenium	mg/L	0.000220	111.	1.76	0.000593
Sodium	mg/L	0.109	107.	.070	15.3
Antimony	mg/L	0.000220	95.3	5.28	<0.000220
Beryllium	mg/L	0.000100	119.	2.47	<0.000100
Thallium	mg/L	0.000100	106.	.160	0.000273
Asbestos	MF/L	1.00			-
Aluminum	mg/L	0.000100	118.	13.0	0.0229
Chloride	mg/L	0.0470	118.	1.55	44.3
Copper	mg/L	0.000100	111.	14.5	0.0411
Fluoride	mg/L	0.0347			0.441
Iron	mg/L	0.0107	100.	1.13	0.0250
Manganese	mg/L	0.00388	99.5	.050	0.0145
Silver	mg/L	0.0000500	104.	.840	0.0000557
Sulfate	mg/L	1.00			64.0
Zinc	mg/L	0.000150	120.	13.0	0.147
Color (color units)	PCU	5.00			<5.00
Odor (total odor num	TON	1.00			<1.00
pH	pH	0.0100	101.	.070	7.91
TDS	mg/L	2.50	96.5	.170	220.
Foaming_Agents	mg/L	0.159			0.160

Certificate of Results

Sample integrity certified prior to analysis. Test results meet all requirments of the NELAC Standards, except as noted in the QA Report Section 4. This Report may not be reproduced in part, results relate only to items tested.

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FLOWERS CHEMICAL LABORATORIES INCORPORATED

Received From:
Zellwood Station CO-OP
2126 Spillman Drive
Zellwood,FL 32798

Date Reported : Apr19 2000
Project Number : 34841506
PO Number : N/A
FLDOH Number : 83139/E83018
NYSDOH Number : 11595
FDER COMQAPNum : 86-0008
CTDPH Number : 0173
NCDEHNR Number : 296
SCDHEC Number : 96019

For: POE
Date Sampled:Mar28 2000 Date Received:Mar28 2000 Lab Number : 19882

REPORT OF ANALYSIS

Parameter	Unit	Reportable Detection Limit	%Rec	%RSD	19882
1,2,4-trichlorobenze	ug/L	0.500	117.	.450	<0.500
cis-1,2-dichloroethe	ug/L	0.500	95.7	2.19	<0.500
Xylene	ug/L	0.500	92.7	1.35	<0.500
Methylene chloride	ug/L	0.500	103.	.440	<0.500
o-dichlorobenzene	ug/L	0.500	94.2	1.94	<0.500
Para-dichlorobenzene	ug/L	0.500	95.0	2.01	<0.500
Vinyl chloride	ug/L	0.500			<0.500
1,1-dichloroethene	ug/L	0.500	113.	.850	<0.500
t-1,2-dichloroethene	ug/L	0.500	103.	2.84	<0.500
1,2-dichloroethane	ug/L	0.500	95.0	.840	<0.500
1,1,1-trichloroethan	ug/L	0.500	102.	2.91	<0.500
Carbon tetrachloride	ug/L	0.500	104.	1.83	<0.500
1,2-dichloropropane	ug/L	0.500	99.0	1.78	<0.500
Trichloroethene	ug/L	0.500	101.	1.79	<0.500
1,1,2-trichloroethan	ug/L	0.500	96.5	1.71	<0.500
Tetrachloroethene	ug/L	0.500	102.	1.73	<0.500
Chlorobenzene	ug/L	0.500	87.1	8.13	<0.500
Benzene	ug/L	0.500	94.5	1.38	<0.500
Toluene	ug/L	0.500	93.5	1.48	<0.500
Ethylbenzene	ug/L	0.500	93.8	.280	<0.500
Styrene	ug/L	0.500			<0.500
Arsenic	mg/L	0.000100	110.	1.11	0.000171
Barium	mg/L	0.000200	109.	.150	0.0135
Cadmium	mg/L	0.000100	104.	1.67	0.000448
Chromium	mg/L	0.000100	113.	11.7	0.0173
Cyanide	mg/L	0.00330	104.	.730	<0.00330

Certificate of Results

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WEB www.flowerslabs.co

Total Dissolved Solids		mg/L	220															
Foaming Agent	*	mg/L	0.160											SM5540C	0.159			MAN	-2000 03:00
Gross alpha	*	pCi/L	0.8											EPA900	0.1			PL	04-08-00
Analysis_Error(Ga)	*	pCi/L	0.5											EPA900	0.1			PL	04-08-00
Photon emitters	*	pCi/L												-	0.1				
Analysis_Error(Photon)	*	pCi/L												-	0.1				
Radium-226	*	pCi/L	-											EPA903.1	0.1			PL	04-08-00
Analysis_Error(226)	*	pCi/L	-											EPA903.1	0.1			PL	04-08-00
Radium-228	*	pCi/L	-											EPA904	0.3			PL	04-08-00
Analysis_Error(228)	*	pCi/L	-											EPA904	0.3			PL	04-08-00
Man-made beta & photon	*	pCi/L	-											EPA900	0.1			PL	04-08-00
Analysis_Error(beta & pho	*	pCi/L	-											EPA900	0.1			PL	04-08-00

Date Received: 03-28-00 Typed: 04-19-00 Sent: 04-19-00

Project Number	34841506		Qualifier Key	
PO Number	N/A		J	Surrogate recovery limits have been exceeded; No known quality control criteria exists for the component;
Date Sampled	1	03-28-00 *		The sample matrix interfered with the ability to make any accurate determination;
Date Analyzed	0			The reported value is between the MDL and the PQL.
Compacted	1		Q	Sample held beyond the accepted holding time.
Format	NormRR		U	Indicates that the compound was analyzed for but not detected.
Unit Cost	Exted		V	Indicates that the analyte was detected in both the sample and the associated method blank.
Secs93	8500	1 *		
VOC93	6500	1 *		
Inorg93	9500	1 *		
GA	4000	1 *		
T&M	13750	1 *		
Paid Check#70325	-42250	1 *		

4451

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FLOWERS CHEMICAL LABORATORIES

ANALYTICAL RESULTS FORM

HRS Number 83139

Parameter	Symbol	Unit	POE 19882	Method	QA MDL	Section %RSD	%Rec	Analyst	Date
1,2,4-trichlorobenzene	*	ug/L	<0.5	EPA502.2	0.5	0.456	117	EVB	03-30-00
cis-1,2-dichloroethene	*	ug/L	<0.5	EPA502.2	0.5	2.19	95.7	EVB	03-30-00
Xylene	*	ug/L	<0.5	EPA502.2	0.5	1.35	92.7	EVB	03-30-00
Methylene chloride	*	ug/L	<0.5	EPA502.2	0.5	0.449	103	EVB	03-30-00
o-dichlorobenzene	*	ug/L	<0.5	EPA502.2	0.5	1.94	94.2	EVB	03-30-00
Para-dichlorobenzene	*	ug/L	<0.5	EPA502.2	0.5	2.01	95	EVB	03-30-00
Vinyl chloride	*	ug/L	<0.5	EPA502.2	0.5			EVB	03-30-00
1,1-dichloroethene	*	ug/L	<0.5	EPA502.2	0.5	0.858	113	EVB	03-30-00
t-1,2-dichloroethene	*	ug/L	<0.5	EPA502.2	0.5	2.84	103	EVB	03-30-00
1,2-dichloroethane	*	ug/L	<0.5	EPA502.2	0.5	0.847	95	EVB	03-30-00
1,1,1-trichloroethane	*	ug/L	<0.5	EPA502.2	0.5	2.91	102	EVB	03-30-00
Carbon tetrachloride	*	ug/L	<0.5	EPA502.2	0.5	1.83	104	EVB	03-30-00
1,2-dichloropropane	*	ug/L	<0.5	EPA502.2	0.5	1.78	99	EVB	03-30-00
Trichloroethene	*	ug/L	<0.5	EPA502.2	0.5	1.79	101	EVB	03-30-00
1,1,2-trichloroethane	*	ug/L	<0.5	EPA502.2	0.5	1.71	96.5	EVB	03-30-00
Tetrachloroethene	*	ug/L	<0.5	EPA502.2	0.5	1.73	102	EVB	03-30-00
Chlorobenzene	*	ug/L	<0.5	EPA502.2	0.5	8.13	87.1	EVB	03-30-00
Benzene	*	ug/L	<0.5	EPA502.2	0.5	1.38	94.5	EVB	03-30-00
Toluene	*	ug/L	<0.5	EPA502.2	0.5	1.48	93.5	EVB	03-30-00
Ethylbenzene	*	ug/L	<0.5	EPA502.2	0.5	0.282	93.8	EVB	03-30-00
Styrene	*	ug/L	<0.5	EPA502.2	0.5			EVB	03-30-00
Arsenic	*	mg/L	0.000171	EPA200.8	0.0001	1.1171668	110.292	LSM	03-31-2000 11:39
Barium	*	mg/L	0.0135	EPA200.8	0.0002	0.1590215	109.822	LSM	03-31-2000 11:39
Cadmium	*	mg/L	0.000448	EPA200.8	0.0001	1.6760525	104.5692	LSM	03-31-2000 11:39
Chromium	*	mg/L	0.0173	EPA200.8	0.0001	11.760691	113.252	LSM	03-31-2000 11:39
Cyanide	*	mg/L	<0.0033	SM4500-C	0.0033	0.7354380	104.77548	EAB	04-04-00
Fluoride	*	mg/L	0.441	SM4500F	0.0347	0	87.797119	YGS	04-12-2000 10:00
Lead	*	mg/L	0.000592	EPA200.8	0.0001	0.4805189	109.074	LSM	03-31-2000 11:39
Mercury	*	mg/L	<0.0002	EPA245.1	0.0002	8.0094243	105.86546	EVB	04-07-2000 09:00
Nickel	*	mg/L	0.00313	EPA200.8	0.0004	13.503016	112.5084	LSM	03-31-2000 11:39
Nitrate(as N)	*	mg/L	0.136	EPA300.0	0.009			YGS	03-28-2000 08:30
Nitrite(as N)	*	mg/L	<0.0035	EPA353.2	0.0035	1.7183606	104	DRP	03-28-2000 14:00
Selenium	*	mg/L	0.000593	EPA200.8	0.00022	1.7683039	111.0014	LSM	03-31-2000 11:39
Sodium	*	mg/L	15.3	EPA6010	0.109	0.0791906	107.4	EVS	03-30-2000 10:00
Antimony	*	mg/L	<0.00022	EPA200.8	0.00022	5.2885801	95.3	LSM	03-31-2000 11:39
Beryllium	*	mg/L	<0.0001	EPA200.8	0.0001	2.4764193	119.8	LSM	03-31-2000 11:39
Thallium	*	mg/L	0.000273	EPA200.8	0.0001	0.1668154	106.121	LSM	03-31-2000 11:39
Asbestos	*	MF/L		TEM	1				
Aluminum	*	mg/L	0.0229	EPA200.8	0.0001	13.064614	118.412	LSM	03-31-2000 11:39
Chloride	*	mg/L	44.3	EPA300	0.047	1.5534761	118.58910	YGS	04-14-2000 09:00
Copper	*	mg/L	0.0411	EPA200.8	0.0001	14.507471	111.96	LSM	03-31-2000 11:39
Fluoride	*	mg/L	0.441	SM4500F	0.0347			YGS	04-12-2000 10:00
Iron	*	mg/L	0.0250	EPA200.7	0.0107	1.1376841	100.21	EVB	03-30-2000 10:00
Manganese	*	mg/L	0.0145	EPA200.7	0.00388	0.0532090	99.518	EVB	03-30-2000 10:00
Silver	*	mg/L	0.0000557	EPA200.8	0.00005	0.8404138	104.8	LSM	03-31-2000 11:39
Sulfate	*	mg/L	64.0	EPA375.4	1			YGS	04-14-2000 10:00
Zinc	*	mg/L	0.147	EPA200.8	0.00015	13.001719	120	LSM	03-31-2000 11:39
Color (color units)	*	PCU	<5	SM2120B	5			MAN	03-28-2000 03:00
Odor (total odor number)	*	TON	<1	SM2150B	1			MAN	03-28-2000 03:30
pH (units)	*	pH	7.91	EPA150.1	0.01	0.0783097	101.1	DRP	03-28-2000 15:30

Secondary Chemical Analysis
62-550.320
(PWS031)

Parameter ID	NAME	Sample Number	Analysis Result(mg/l)	Analytical Method	Detection Limit (mg/l)	MCL	Analysis Date
1002	Aluminum	19882	0.0229	EPA200.8	0.0001	0.2	·31-2000 11:3
1017	Chloride	19882	44.3	EPA300	0.047	250	·14-2000 09:0
1022	Copper	19882	0.0411	EPA200.8	0.0001	1	·31-2000 11:3
1025	Fluoride	19882	0.441	SM4500F C	0.0347	2	·12-2000 10:0
1028	Iron	19882	0.0250	EPA200.7	0.0107	0.3	·30-2000 10:0
1032	Manganese	19882	0.0145	EPA200.7	0.00388	0.05	·30-2000 10:0
1050	Silver	19882	0.0000557	EPA200.8	0.00005	0.1	·31-2000 11:3
1055	Sulfate	19882	64.0	EPA375.4	1	250	·14-2000 10:0
1095	Zinc	19882	0.147	EPA200.8	0.00015	5	·31-2000 11:3
1905	Color (color units)	19882	<5	SM2120B	5	15	·28-2000 03:0
1920	Odor (total odor number)	19882	<1	SM2150B	1	3	·28-2000 03:3
1925	pH	19882	7.91	EPA150.1	0.01	6.5 - 8.5	·28-2000 15:3
1930	Total Dissolved Solids	19882	220	SM2540C	2.5	500	·29-2000 05:0
2905	Foaming Agents	19882	0.160	SM5540C	0.159	0.5	·29-2000 03:0

Radiological Analysis
62-550.310(5)
(PWS033)

Parameter ID	NAME	Sample Number	Analysis Result(pCi/l)	Analytical Method	Detection Limit (pCi/l)	MCL	Analysis Date
4000	Gross alpha	19882	0.800	EPA900	0.1	5	04-08-00
4000	Analysis_Error(Ga)	19882	0.500	EPA900	0.1		04-08-00
4012	Photon emitters	19882		-	0.1		
4012	Analysis_Error(Photon)	19882		-	0.1		
4020	Radium-226	19882		EPA903.1	0.1		04-08-00
4020	Analysis_Error(226)	19882		EPA903.1	0.1		04-08-00
4030	Radium-228	19882		EPA904	0.3		04-08-00
4030	Analysis_Error(228)	19882		EPA904	0.3		04-08-00
4101	Man-made beta	19882		EPA900	0.1		04-08-00
4101	Analysis_Error(beta)	19882		EPA900	0.1		04-08-00

Inorganic Analysis
62-550.310(1)
(PWS030)

Parameter ID	NAME	Sample Number	Analysis Result(mg/l)	Analytical Method	Detection Limit (mg/l)	MCL	Analysis Date
1005	Arsenic	19882	0.000171	EPA200.8	0.0001	0.05	·31-2000 11:3
1010	Barium	19882	0.0135	EPA200.8	0.0002	2	·31-2000 11:3
1015	Cadmium	19882	0.000448	EPA200.8	0.0001	0.005	·31-2000 11:3
1020	Chromium	19882	0.0173	EPA200.8	0.0001	0.1	·31-2000 11:3
1024	Cyanide	19882	<0.0033	SM4500-CN E	0.0033	0.2	04-04-00
1025	Fluoride	19882	0.441	SM4500F C	0.0347	4	·12-2000 10:0
1030	Lead	19882	0.000592	EPA200.8	0.0001	0.015	·31-2000 11:3
1035	Mercury	19882	<0.0002	EPA245.1	0.0002	0.002	·07-2000 09:0
1036	Nickel	19882	0.00313	EPA200.8	0.0004	0.1	·31-2000 11:3
1040	Nitrate(as N)	19882	0.136	EPA300.0	0.009	10	·28-2000 08:3
1041	Nitrite(as N)	19882	<0.0035	EPA353.2	0.0035	1	·28-2000 14:0
1045	Selenium	19882	0.000593	EPA200.8	0.00022	0.05	·31-2000 11:3
1052	Sodium	19882	15.3	EPA6010	0.109	160	·30-2000 10:0
1074	Antimony	19882	<0.00022	EPA200.8	0.00022	0.006	·31-2000 11:3
1075	Beryllium	19882	<0.0001	EPA200.8	0.0001	0.004	·31-2000 11:3
1085	Thallium	19882	0.000273	EPA200.8	0.0001	0.002	·31-2000 11:3
1094	Asbestos	19882		TEM	1	7	

Volatile Organic Analysis
62-550.310(2)(b)
(PWS028)

Parameter ID	NAME	Sample Number	Analysis Result(ug/l)	Analytical Method	Detection Limit (ug/l)	MCL	Analysis Date
2378	1,2,4-trichlorobenzene	19882	<0.5	EPA502.2	0.5	70	03-30-00
2380	cis-1,2-Dichloroethylene	19882	<0.5	EPA502.2	0.5	70	03-30-00
2955	Xylenes (total)	19882	<0.5	EPA502.2	0.5	10000	03-30-00
2964	Dichloromethane	19882	<0.5	EPA502.2	0.5	5	03-30-00
2968	O-dichlorobenzene	19882	<0.5	EPA502.2	0.5	600	03-30-00
2969	Para-dichlorobenzene	19882	<0.5	EPA502.2	0.5	75	03-30-00
2976	Vinyl chloride	19882	<0.5	EPA502.2	0.5	1	03-30-00
2977	1,1,-dichloroethylene	19882	<0.5	EPA502.2	0.5	7	03-30-00
2979	Trans-1,2-dichloroethylene	19882	<0.5	EPA502.2	0.5	100	03-30-00
2980	1,2,-dichloroethane	19882	<0.5	EPA502.2	0.5	3	03-30-00
2981	1,1,1-trichloroethane	19882	<0.5	EPA502.2	0.5	200	03-30-00
2982	Carbon tetrachloride	19882	<0.5	EPA502.2	0.5	3	03-30-00
2983	1,2-dichloropropane	19882	<0.5	EPA502.2	0.5	5	03-30-00
2984	Trichloroethylene	19882	<0.5	EPA502.2	0.5	3	03-30-00
2985	1,1,2-trichloroethane	19882	<0.5	EPA502.2	0.5	5	03-30-00
2987	Tetrachloroethylene	19882	<0.5	EPA502.2	0.5	3	03-30-00
2989	Monochlorobenzene	19882	<0.5	EPA502.2	0.5	100	03-30-00
2990	Benzene	19882	<0.5	EPA502.2	0.5	1	03-30-00
2991	Toluene	19882	<0.5	EPA502.2	0.5	1000	03-30-00
2992	Ethylbenzene	19882	<0.5	EPA502.2	0.5	700	03-30-00
2996	Styrene	19882	<0.5	EPA502.2	0.5	100	03-30-00

PUBLIC DRINKING WATER ANALYSIS REPORTING FORMAT

PUBLIC WATER SYSTEM INFORMATION (to be completed by system or lab)

System Name: _____ I.D. #: 34841506

Address: 2126 Spillman Drive Zellwood,FL 32798 Phone #: 886 0000

Type (check one): (X)Community ( )Nontransient Noncommunity ( )Noncommunity

SAMPLE INFORMATION (to be completed by sampler)

Sample Date (MMDDYY): 3/28/00 Sample Time : 12 50P

Sample Location (be specific): POE WP RESTAIL

Sampler Name and Phone: PHILIP STORY

Samplers Signature: _____ Title: OPERATOR

Check Type (s): ( )Distribution ( )Recheck of MCL ( )Resample of Lab Invalidated Sample

( )Clearance ( ) Thm Max Res Time ( )Plant Tap

(X)Distribution entry pt ( )Raw ( )Composite of Multiple Sites-Attach a format for each site

LABORATORY CERTIFICATION INFORMATION

Lab Name: Flowers Chemical Laboratories Inc. HRS# 83139 Expiration Date 6/30/2000

Address: PO Box 150-597 Altamonte Springs, Florida 32715-0597 Phone #: (407) 339-5984

Subcontracted Lab HRS #: HRS84252 Groups Analyzed: RAD

ANALYSIS INFORMATION (to be completed by lab) Lab Number: 19882

Date Sample(s) Recieved: 3/28/00 Group(s) Analyzed & Results attached for compliance with 62-550, F.A.C.:

(X) Nitrate (X) Nitrite ( ) Asbestos ( ) Trihalomethanes

Inorganics	Volatile Organics	Secondaries	Pesticides & PCBs
(X) All 17 ( ) Partial	(X) All 21 ( ) Partial	(X) All 14 ( ) Partial	( ) All 30 ( ) Partial
Group I Unregulateds	Group II Unregulateds	Group III Unregulateds	Radiochemicals
( ) All 13 ( ) Partial	( ) All 23 ( ) Partial	( ) All 11 ( ) Partial	(X) Single Sample
			( ) Qtrly Composite *

* Provide radiochemical sample dates & locations for each quarter

I, Dr. Jefferson S Flowers, do HEREBY CERTIFY that all attached analytical data submitted are correct.

Signature: _____

Title: Technical Director Date: 4/19/00

COMPLIANCE INFORMATION (to be completed by State)

Sample Collection Satisfactory: _____ Sample Analysis Satisfactory: _____

Resample Request for: _____ Reason: _____

Person notified to resample: _____ Date notified: ____/____/____

DEP /ACPHU Reviewing Offical: _____

Effective 1/95

FLOWERS

CHEMICAL LABORATORIES INCORPORATE

ANALYTICAL & CONSULTING CHEMISTS
CHAIN OF CUSTODY RECORD
DRINKING WATER 62-550

CLIENT: Zellwood STA.

Client #:

Billing ADDRESS:

PHONE:

Public Drinking Water ID #: 348415016

Public Water System Name: Zellwood STA.

Project #:

PO #:

Public Water System Type: ☐ Limited Use Commercial/Public ☒ Community ☐ Non_Community ☐ Special Non_Community

NOTES:

Turn Around Time

10 Working Days ____
5 Working Days ____
3 Working Days ____
1 Working Day ____
Other ____

Per Site	Total	PRESERVATIVE					PLASTIC CONTAINERS								GLASS CONTAINERS						
		HNO3	NaOH	Na2S2O3	H2SO4		60 mL	125 mL	250 mL clear	500 mL	1 Liter clear	2 Liter clear	Whirl-Pak Bag		40 mL	250 mL	500 mL	1 Liter AMBER	2 Liter	4 Liter	

Kit Relinquished: Date: Time:

Kit Received: Date: Time:

PARAMETERS

Prim. Inorganics w/o asbestos X; Asbestos ____; NO3 ____ NO2 ____ THM ____;
Volatile Organics X; Pesticides & PCBs (w/o dioxin) ____; Radiological X; Secondary Standards X;
Group I Unreg. ____, Group II Unreg. ____; Group III Unreg ____; Lead & Copper ____.

Laboratory Number	Do Not Write In Shaded Area	Client Identification/Description
19882	#1	P-O.E. (G.A. only)
	#2	
	#3	
	#4	
	#5	
	#6	
	#7	
	#8	
	#9	
	#10	

		Date	Time
Sample Collection:	[signature]	3/28/00	12:50P
Transportation:		3/28/00	4:30P
Lab Acceptance:			1639

Page 1 of 1

3.0 HRS / 50 MILES

Jefferson L. Flowers, I
Jefferson S. Flowers, II
481 NEWBURYPO
P.O. BOX 150-
ALTAMONTE SPRINGS
FLORIDA 32715-0597

Serving Your Analytical and Environmental Needs Since 1957

FLOWERS CHEMICAL LABORATORIES INCORPORATED

Internal Custody Record Lab Number: 19882

This form was intentionally left blank.

RECEIVED APR 30 1999

FLOWERS CHEMICAL LABORATORIES INCORPORATED

Received From:
Zellwood Station CO-OP
2126 Spillman Drive
Zellwood,FL 32798

Date Reported : Apr27 1999
Project Number : 34841506
PO Number : N/A
FDHRSDW Number : 83139
NYSDOH Number : 11595
FDER COMQAPNum : 86-0008G
LDHH Number : 94-23
NCDEHNR Number : 296
SCDHEC Number : 96019

For: WELL1
Date Sampled:Mar31 1999 Date Received:Mar31 1999 Lab Numbers: 14583-14584

REPORT OF ANALYSIS

Parameter	Unit	Method Detection Limit	%ACC	%PRC	14583
Endrin	ug/L	0.00100			<0.00100
Lindane	ug/L	0.00100			<0.00100
Methoxychlor	ug/L	0.0100			<0.0100
Toxaphene	ug/L	0.100			<0.100
Dalapon	ug/L	0.00100	132.	1.18	<0.00100
Diquat	ug/L	0.400	112.	.880	<0.400
Endothall	ug/L	9.00	70.3	1.42	<9.00
Glyphosate	ug/L	6.00			<6.00
Di(2-ethylhexyl) adi	ug/L	0.600	107.	24.0	<0.600
Oxamyl (Vydate)	ug/L	2.00	104.	2.17	<2.00
Simazine	ug/L	0.0700	107.	8.71	<0.0700
Bis(2-ethylhexyl)pht	ug/L	0.600	112.	20.9	<0.600
Picloram	ug/L	0.0700			<0.0700
Dinoseb	ug/L	0.0100	91.8	.190	<0.0100
Hexachlorocyclopenta	ug/L	0.100			<0.100
Carbofuran	ug/L	0.900	105.	16.1	<0.900
Atrazine	ug/L	0.100	75.8	9.25	<0.100
Alachlor (Lasso)	ug/L	0.200	71.8	10.3	<0.200
Dioxin	ug/L	0.0100			-
Heptachlor	ug/L	0.00500	71.8	10.3	<0.00500
Heptachlor_Epoxide	ug/L	0.00500			<0.00500
2,4-D	ug/L	0.0500	132.	1.47	<0.0500
2,4,5-TP(Silvex)	ug/L	0.0200	123.	1.05	<0.0200
Hexachlorobenzene	ug/L	0.100	106.	12.7	<0.100
Benzo(a)pyrene	ug/L	0.0200	80.8	2.99	<0.0200
Pentachlorophenol	ug/L	0.0400	123.	1.24	<0.0400

Data Release Authorization

Sample integrity certified prior to analysis.Deficiencies are in QA Report Sec.4
Methods of analysis in accordance with FCL QA and EPA approved methodology .
This Report may not be reproduced in part, results relate only to items tested.

Jefferson S. Flowers, Ph.d.
President/Technical Director

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ALTAMONTE SPRINGS
FLORIDA 32715-0597
BUS: (407) 339-5984
FAX: (407) 260-6110
WEB: www.flowerslabs.com

Pesticides & PCB Chemical Analysis
62-550.310(2)(c)
(PWS029)

Parameter ID	NAME	Sample Number	Analysis Result(ug/l)	Analytical Method	Detection Limit (ug/l)	MCL	Analysis Date
2005	Endrin	14583	<0.001	EPA505	0.001	2	04-23-99
2010	Lindane	14583	<0.001	EPA505	0.001	0.2	04-23-99
2015	Methoxychlor	14583	<0.01	EPA505	0.01	40	04-23-99
2020	Toxaphene	14583	<0.1	EPA505	0.1	3	04-23-99
2031	Dalapon	14583	<0.001	EPA515.1	0.001	200	04-12-99
2032	Diquat	14583	<0.4	EPA549	0.4	20	04-21-99
2033	Endothall	14583	<9	EPA548	9	100	04-21-99
2034	Glyphosate	14583	<6	EPA547	6	700	04-12-99
2035	Di(2-ethylhexyl)adipate	14583	<0.6	EPA525.2	0.6	400	04-19-99
2036	Oxamyl (Vydate)	14583	<2	EPA531.1	2	200	04-14-99
2037	Simazine	14583	<0.07	EPA505	0.07	4	04-23-99
2039	Di(2-ethylhexyl)phthalate	14583	<0.6	EPA525.2	0.6	6	04-19-99
2040	Picloram	14583	<0.07	EPA515.1	0.07	500	04-12-99
2041	Dinoseb	14583	<0.01	EPA515.1	0.01	7	04-12-99
2042	Hexachlorocyclopentadiene	14583	<0.1	EPA505	0.1	50	04-23-99
2046	Carbofuran	14583	<0.9	EPA531	0.9	40	04-14-99
2050	Atrazine	14583	<0.1	EPA505	0.1	3	04-23-99
2051	Alachlor	14583	<0.2	EPA505	0.2	2	04-23-99
2063	2,3,7,8-TCDD (Dioxin)	14583		EPA625	0.01	0.00003	
2065	Heptachlor	14583	<0.005	EPA505	0.005	0.4	04-23-99
2067	Heptachlor epoxide	14583	<0.005	EPA505	0.005	0.2	04-23-99
2105	2,4-D	14583	<0.05	EPA515.1	0.05	70	04-12-99
2110	2,4,5-TP (Silvex)	14583	<0.02	EPA515.1	0.02	50	04-12-99
2274	Hexachlorobenzene	14583	<0.1	EPA505	0.1	1	04-23-99
2306	Benzo(a)pyrene	14583	<0.02	EPA550	0.02	0.2	04-08-99
2326	Pentachlorophenol	14583	<0.04	EPA515.1	0.04	1	04-12-99
2383	PCB	14583	<0.1	EPA505	0.1	0.5	04-23-99
2931	Dibromochloropropane	14583	<0.01	EPA504	0.01	0.2	04-21-99
2946	Ethylene dibromide	14583	<0.01	EPA504	0.01	0.02	04-21-99
2959	Chlordane	14583	<0.01	EPA505	0.01	2	04-23-99

FLOWERS CHEMICAL LABORATORIES INCORPORATED

Received From:
Zellwood Station CO-OP
2126 Spillman Drive
Zellwood,FL 32798

Date Reported : Apr27 1999
Project Number : 34841506
PO Number : N/A
FDHRSDW Number : 83139
NYSDOH Number : 11595
FDER COMQAPNum : 86-0008G
LDHH Number : 94-23
NCDEHNR Number : 296
SCDHEC Number : 96019

For: WELL2
Date Sampled:Mar31 1999 Date Received:Mar31 1999 Lab Numbers: 14583-14584

REPORT OF ANALYSIS

Parameter	Unit	Method Detection Limit	%ACC	%PRC	14584
Endrin	ug/L	0.00100			<0.00100
Lindane	ug/L	0.00100			<0.00100
Methoxychlor	ug/L	0.0100			<0.0100
Toxaphene	ug/L	0.100			<0.100
Dalapon	ug/L	0.00100	132.	1.18	<0.00100
Diquat	ug/L	0.400	112.	.880	<0.400
Endothall	ug/L	9.00	70.3	1.42	<9.00
Glyphosate	ug/L	6.00			<6.00
Di(2-ethylhexyl) adi	ug/L	0.600	107.	24.0	<0.600
Oxamyl (Vydate)	ug/L	2.00	104.	2.17	<2.00
Simazine	ug/L	0.0700	107.	8.71	<0.0700
Bis(2-ethylhexyl)pht	ug/L	0.600	112.	20.9	<0.600
Picloram	ug/L	0.0700			<0.0700
Dinoseb	ug/L	0.0100	91.8	.190	<0.0100
Hexachlorocyclopenta	ug/L	0.100			<0.100
Carbofuran	ug/L	0.900	105.	16.1	<0.900
Atrazine	ug/L	0.100	75.8	9.25	<0.100
Alachlor (Lasso)	ug/L	0.200	71.8	10.3	<0.200
Dioxin	ug/L	0.0100			-
Heptachlor	ug/L	0.00500	71.8	10.3	<0.00500
Heptachlor_Epoxide	ug/L	0.00500			<0.00500
2,4-D	ug/L	0.0500	132.	1.47	<0.0500
2,4,5-TP(Silvex)	ug/L	0.0200	123.	1.05	<0.0200
Hexachlorobenzene	ug/L	0.100	106.	12.7	<0.100
Benzo(a)pyrene	ug/L	0.0200	80.8	2.99	<0.0200
Pentachlorophenol	ug/L	0.0400	123.	1.24	<0.0400

Data Release Authorization

Sample integrity certified prior to analysis.Deficiencies are in QA Report Sec.4
Methods of analysis in accordance with FCL QA and EPA approved methodology .
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Jefferson S. Flowers, Ph.d.
President/Technical Director

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FAX: (407) 260-611
WEB: www.flowerslabs.co

FLOWERS CHEMICAL LABORATORIES INCORPORATED

Received From:
Zellwood Station CO-OP
2126 Spillman Drive
Zellwood,FL 32798

Date Reported : Apr27 1999
Project Number : 34841506
PO Number : N/A
FDHRSDW Number : 83139
NYSDOH Number : 11595
FDER COMQAPNum : 86-0008G
LDHH Number : 94-23
NCDEHNR Number : 296
SCDHEC Number : 96019

For: WELL2
Date Sampled:Mar31 1999 Date Received:Mar31 1999 Lab Numbers: 14583-14584

REPORT OF ANALYSIS

Parameter	Unit	Method Detection Limit	%ACC	%PRC	14584
Total_PCB	ug/L	0.100			<0.100
Dibromochloropropane	ug/L	0.0100	113.	2.78	<0.0100
Ethylene dibromide	ug/L	0.0100	81.6	3.73	<0.0100
Chlordane	ug/L	0.0100			<0.0100

Data Release Authorization

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WEB: www.flowerslabs.com

Pesticides & PCB Chemical Analysis
62-550.310(2)(c)
(PWS029)

ımeter NAME	Sample Number	Analysis Result(ug/l)	Analytical Method	Detection Limit (ug/l)	MCL	Analysis Date
Endrin	14583	<0.001	EPA505	0.001	2	04-23-99
Lindane	14583	<0.001	EPA505	0.001	0.2	04-23-99
Methoxychlor	14583	<0.01	EPA505	0.01	40	04-23-99
Toxaphene	14583	<0.1	EPA505	0.1	3	04-23-99
Dalapon	14583	<0.001	EPA515.1	0.001	200	04-12-99
Diquat	14583	<0.4	EPA549	0.4	20	04-21-99
Endothall	14583	<9	EPA548	9	100	04-21-99
Glyphosate	14583	<6	EPA547	6	700	04-12-99
Di(2-ethylhexyl)adipate	14583	<0.6	EPA525.2	0.6	400	04-19-99
Oxamyl (Vydate)	14583	<2	EPA531.1	2	200	04-14-99
Simazine	14583	<0.07	EPA505	0.07	4	04-23-99
Di(2-ethylhexyl)phthalate	14583	<0.6	EPA525.2	0.6	6	04-19-99
' ıram	14583	<0.07	EPA515.1	0.07	500	04-12-99
D...oseb	14583	<0.01	EPA515.1	0.01	7	04-12-99
Hexachlorocyclopentadiene	14583	<0.1	EPA505	0.1	50	04-23-99
Carbofuran	14583	<0.9	EPA531	0.9	40	04-14-99
Atrazine	14583	<0.1	EPA505	0.1	3	04-23-99
Alachlor	14583	<0.2	EPA505	0.2	2	04-23-99
2,3,7,8-TCDD (Dioxin)	14583		EPA625	0.01	0.00003	
Heptachlor	14583	<0.005	EPA505	0.005	0.4	04-23-99
Heptachlor epoxide	14583	<0.005	EPA505	0.005	0.2	04-23-99
2,4-D	14583	<0.05	EPA515.1	0.05	70	04-12-99
2,4,5-TP (Silvex)	14583	<0.02	EPA515.1	0.02	50	04-12-99
Hexachlorobenzene	14583	<0.1	EPA505	0.1	1	04-23-99
Benzo(a)pyrene	14583	<0.02	EPA550	0.02	0.2	04-08-99
Pentachlorophenol	14583	<0.04	EPA515.1	0.04	1	04-12-99
PCB	14583	<0.1	EPA505	0.1	0.5	04-23-99
Dibromochloropropane	14583	<0.01	EPA504	0.01	0.2	04-21-99
Ethylene dibromide	14583	<0.01	EPA504	0.01	0.02	04-21-99
Chlordane	14583	<0.01	EPA505	0.01	2	04-23-99

FLOWERS CHEMICAL LABORATORIES INCORPORATED

Received From:
Zellwood Station CO-OP
2126 Spillman Drive
Zellwood,FL 32798

Date Reported : Apr27 1999
Project Number : 34841506
PO Number : N/A
FDHRSDW Number : 83139
NYSDOH Number : 11595
FDER COMQAPNum : 86-0008G
LDHH Number : 94-23
NCDEHNR Number : 296
SCDHEC Number : 96019

For: WELL1
Date Sampled:Mar31 1999 Date Received:Mar31 1999 Lab Numbers: 14583-14584

REPORT OF ANALYSIS

Parameter	Unit	Method Detection Limit	%ACC	%PRC	14583
Total_PCB	ug/L	0.100			<0.100
Dibromochloropropane	ug/L	0.0100	113.	2.78	<0.0100
Ethylene dibromide	ug/L	0.0100	81.6	3.73	<0.0100
Chlordane	ug/L	0.0100			<0.0100

Data Release Authorization

Sample integrity certified prior to analysis.Deficiencies are in QA Report Sec.4
Methods of analysis in accordance with FCL QA and EPA approved methodology .
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President/Technical Director

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WEB www.flowerslabs.co

4451

1

ANALYTICAL RESULTS FORM HRS Number 83139

Parameter	Symbol	Unit	well#1 14583	well#2 14584									Method	QA MDL	Section %RSD	%Rec	Analys	Date
Endrin	*	ug/L	<0.001	<0.001									EPA505	0.001			JRG	04-23-99
Lindane	*	ug/L	<0.001	<0.001									EPA505	0.001			JRG	04-23-99
Methoxychlor	*	ug/L	<0.01	<0.01									EPA505	0.01			JRG	04-23-99
Toxaphene	*	ug/L	<0.1	<0.1									EPA505	0.1			JRG	04-23-99
Dalapon	*	ug/L	<0.001	<0.001									EPA515.1	0.001	1.18	132	JRG	04-12-99
Diquat	*	ug/L	<0.4	<0.4									EPA549	0.4	0.885202	112.25709	YGS	04-21-99
Endothall	*	ug/L	<9	<9									EPA548	9	1.428628	70.394617	CLS	04-21-99
Glyphosate	*	ug/L	<6	<6									EPA547	6			YGS	04-12-99
Di(2-ethylhexyl) adipate	*	ug/L	<0.6	<0.6									EPA525.2	0.6	24	107	CLS	04-19-99
Oxamyl (Vydate)	*	ug/L	<2	<2									EPA531.1	2	2.17	104	YGS	04-14-99
Simazine	*	ug/L	<0.07	<0.07									EPA505	0.07	8.71	107	JRG	04-23-99
Bis(2-ethylhexyl)phthalate	*	ug/L	<0.6	<0.6									EPA525.2	0.6	20.9	112	CLS	04-19-99
Picloram	*	ug/L	<0.07	<0.07									EPA515.1	0.07			JRG	04-12-99
Dinoseb	*	ug/L	<0.01	<0.01									EPA515.1	0.01	0.19	91.8	JRG	04-12-99
Hexachlorocyclopentadien	*	ug/L	<0.1	<0.1									EPA505	0.1			JRG	04-23-99
Carbofuran	*	ug/L	<0.9	<0.9									EPA531	0.9	16.1	105	YGS	04-14-99
Atrazine	*	ug/L	<0.1	<0.1									EPA505	0.1	9.25	75.8	JRG	04-23-99
Alachlor (Lasso)	*	ug/L	<0.2	<0.2									EPA505	0.2	10.3	71.8	JRG	04-23-99
Dioxin	*	ug/L											EPA625	0.01				
Heptachlor	*	ug/L	<0.005	<0.005									EPA505	0.005	10.3	71.8	JRG	04-23-99
Heptachlor Epoxide	*	ug/L	<0.005	<0.005									EPA505	0.005			JRG	04-23-99
2,4-D	*	ug/L	<0.05	<0.05									EPA515.1	0.05	1.47	132	JRG	04-12-99
2,4,5-TP(Silvex)	*	ug/L	<0.02	<0.02									EPA515.1	0.02	1.05	123	JRG	04-12-99
Hexachlorobenzene	*	ug/L	<0.1	<0.1									EPA505	0.1	12.7	106	JRG	04-23-99
Benzo(a)pyrene	*	ug/L	<0.02	<0.02									EPA550	0.02	2.9908897	80.806529	YGS	04-08-99
Pentachlorophenol	*	ug/L	<0.04	<0.04									EPA515.1	0.04	1.24	123	JRG	04-12-99
Total PCB	*	ug/L	<0.1	<0.1									EPA505	0.1			JRG	04-23-99
Dibromochloropropane	*	ug/L	<0.01	<0.01									EPA504	0.01	2.7864852	113.09869	JRG	04-21-99
Ethylene dibromide	*	ug/L	<0.01	<0.01									EPA504	0.01	**********	81.643423	JRG	04-21-99
Chlordane	*	ug/L	<0.01	<0.01									EPA505	0.01			JRG	04-23-99

Date Received: 03-31-99 Typed: 04-27-99 Sent: 04-27-99

Project Number	34841506	
PO Number	N/A	
Date Sampled	1	03-31-99 *
Date Analyzed	0	
Compacted	1	
Format	NormRR	
Unit Cost	Exted	
PPCB93	47500	2 *
T&M	13750	1 *

PUBLIC DRINKING WATER ANALYSIS REPORTING FORMAT

PUBLIC WATER SYSTEM INFORMATION (to be completed by system or lab)
System Name: ZELLWOOD STATION CO OP I.D. #: 34841506
Address: 2126 Spillman Drive Zellwood,FL 32798 Phone #: _____
Type (check one): (X)Community ( )Nontransient Noncommunity ( )Noncommunity

SAMPLE INFORMATION (to be completed by sampler)
Sample Date (MMDDYY): 3/31/99 Sample Time : _____
Sample Location (be specific): well#2
Sampler Name and Phone: WA RESTALL
Samplers Signature: WR Title: WTS MGR

Check Type (s): ( )Distribution ( )Recheck of MCL ( )Resample of Lab Invalidated Sample
( )Clearance ( ) Thm Max Res Time ( )Plant Tap
( )Distribution entry pt (X)Raw ( )Composite of Multiple Sites-Attach a format for each site

LABORATORY CERTIFICATION INFORMATION
Lab Name: Flowers Chemical Laboratories Inc. HRS# 83139 Expiration Date 6/30/99
Address: PO Box 150-597 Altamonte Springs, Florida 32715-0597 Phone #: (407) 339-5984
Subcontracted Lab HRS #: _____

ANALYSIS INFORMATION (to be completed by lab) Lab Number: 14584
Date Sample(s) Recieved: 3/31/99 Group(s) Analyzed & Results attached for compliance with 62-550, F.A.C.:

( ) Nitrate	( ) Nitrite	( ) Asbestos	( ) Trihalomethanes
Inorganics	Volatile Organics	Secondaries	Pesticides & PCBs
( ) All 17 ( ) Partial	( ) All 21 ( ) Partial	( ) All 14 ( ) Partial	( ) All 30 (X) Partial
Group I Unregulateds	Group II Unregulateds	Group III Unregulateds	Radiochemicals
( ) All 13 ( ) Partial	( ) All 23 ( ) Partial	( ) All 11 ( ) Partial	( ) Single Sample
			( ) Qtrly Composite *

* Provide radiochemical sample dates & locations for each quarter

I , Dr. Jefferson S Flowers, do HEREBY CERTIFY that all attached analytical data submitted are correct.

Signature: _____
Title: Technical Director Date: 4/27/99

COMPLIANCE INFORMATION (to be completed by State)

Sample Collection Satisfactory: _____ Sample Analysis Satisfactory: _____

Resample Request for: _____ Reason: _____

Person notified to resample: _____ Date notified: ____/____/____

DEP /ACPHU Reviewing Offical: _____

Effective 1/95

RECEIVED NOV 1 0 1998

Tri-Tech Analytical
Laboratories, Inc.

P.O. Box 140966 • Orlando, FL 32814-0966 • (407) 275-8463
See us on the web at : http://www.tri-techlabs.com

REPORT OF ANALYSIS

Zellwood Station
2126 Spillman Drive
Zellwood, Florida 32798
Attention: Mr. Restall

Work Order # : 98-10-671
Date Received: 10/22/98
Date Reported: 10/30/98
TTA Contact : T. Tridico

Work ID : Compliance Analysis

Samples : 1

Sampling information is based on data supplied by the Client.

SAMPLE ID	DATE COLLECTED	TEST PARAMETER
1. Point of entry	10/22/98 10:00am	Nitrate Analysis Nitrite Analysis

Respectfully Submitted,

Tri-Tech Laboratories, Inc.

Linda Trytek

Laboratory Director

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!

DHRS #83359 & #E83294

DEP #900405G

AIHA #169077

RECEIVED NOV 1 0 1998

Tri-Tech Laboratories, Inc.
P.O. Box 140966
Orlando, Florida 32814-0966
(407) 275-8463

Lab Reference # : 98-10-671
Project Name : Point of entry
Project Number : NA
Client Sample # : 01

Client Name : Zellwood Station
Confirmed : NA
Dilution Factor : NA

Date Sampled : 10/22/98
Date Received : 10/22/98
Date Extracted :

INORGANIC ANALYSIS
62-550.310 (1)
(PWS030)

Parameter ID Name (MCL mg/l)	Sample Number	Analysis Result (mg/l)	Analysis Method	Analysis Date	MDL	Lab ID
1040 Nitrate (10)	___	0.02 U	SM4500N03E	10/23/98	0.02	83359
1041 Nitrite (1)	___	0.02 U	SM4500N03E	10/23/98	0.02	83359

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

Tri-Tech Analytical Laboratories, Inc.

P.O. Box 140966 • Orlando, FL 32814-0966 • (407) 275-8463

REPORT OF ANALYSIS

Zellwood Station
2126 Spillman Drive
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

Work Order # : 96-10-105-A
Date Received: 10/03/96
Date Reported: 10/30/96
TTA Contact : T. Haynes

Work ID : Zellwood Station Effluent Water Analysis
Total Samples: 1

Sampling information is based on data supplied by the Client.

Analyzed under HRS# E83325, E84088, E83294 & E84129.

Respectfully Submitted,
Tri-Tech Laboratories, Inc.

Linda Trytek
Laboratory Director

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!

DHRS #83359 & #E83294

DEP #900405G

AIHA #169077

RECLAIMED WATER OR EFFLUENT ANALYSIS REPORT

DER FORM : 17-501.900 (4)
Form Title: Effluent Water

Name of Laboratory Conducting the analysis : Karr Environmental
Address: 1495 S. Volusia Ave. Suite 101
City: Orange City State: Florida Zip: 32763
Telephone: (904) 775-0144
The Facilities DER identification number, also known as the GMS identification number: HRS #83472 & E83325
DER test site identification number (for the sampling location)

Description of the monitoring point: Zellwood Station

Date on which the sample was taken (MM/DD/YR): 10/03/96
Time of day at which the sample was taken: 2:00 ___am X pm
Date of extraction for the organic chemical analysis performed in Part VI (MM/DD/YR): 10/08/96

PART III - INORGANIC ANALYSIS

(a) Parameter Name	(b) Storet Code	(c) Analysis Result (mg/L)	(d) Standard (mg/L)	(e) Analytical Methods	(f) Analysis Date	(g) Above Standards
Arsenic	900208	<0.001	0.05	206.2	10/18/96	
Barium	900209	<0.05	1.0	208.1	10/17/96	
Cadmium	900210	<0.001	0.01	213.2	10/15/96	
Chromium	900211	<0.01	0.05	219.2	10/15/96	
Fluoride	900951	0.19	4.0	340.2	10/11/96	
Lead	900212	0.006	0.06	239.2	10/15/96	
Mercury	900213	<0.0002	0.002	245.1	10/16/96	
Nitrate (N)	071850	2.5	10.0	353.2	10/29/96	*
Selenium	900214	<0.001	0.01	270.2	10/18/96	
Silver	900215	<0.01	0.05	272.1	10/17/96	
Sodium	000929	22.0	160.0	273.1	10/23/96	

* Sampled 10/28/96. Analyzed under HRS #E83294.

PART IV - VOLATILE ORGANIC ANALYSIS

(a) Parameter Name	(b) Storet Code	(c) Analysis Res. (ug/L)	(d) Standards (ug/L)	(e) Analytical Methods	(f) Analysis Date	(g) Above Standard
Ethylene Dibromide	900222	<0.02	0.02	504	10/16/96	
Para-dichlorobenzene	039175	<1.0	75.0	602	10/14/96	
Vinyl chloride	034531	<1.0	1.0	601	10/14/96	
1,1-Dichloroethene	034531	<1.0	7.0	601	10/14/96	
1,2-Dichloroethene	034531	<1.0	3.0	601	10/14/96	
1,1,1-trichloroethane	034508	<1.0	200.0	601	10/14/96	
Carbon Tetrachloride	032102	<1.0	3.0	601	10/14/96	
Trichloroethylene	----	<1.0	3.0	601	10/14/96	
Tetrachloroethylene	----	<1.0	3.0	601	10/14/96	
Benzene	034030	<1.0	1.0	602	10/14/96	

PART V - TRIHALOMETHANE ANALYSIS

(a) Parameter Name	(b) Storet Code	(c) Analysis Res. (ug/L)	(d) Standards (ug/L)	(e) Analytical Methods	(f) Analysis Date	(g) Above Standard
Total THM	082080	92.0	100.0	601	10/14/96	

PART VI - ORGANIC CHEMICAL ANALYSIS

(a) Parameter Name	(b) Storet Code	(c) Analysis Res. (ug/L)	(d) Standards (ug/L)	(e) Analytical Methods	(f) Analysis Date	(g) Above Standard
Endrin	039390	<0.02	0.02	608	10/14/96	
Lindane	039782	<0.2	4.0	608	10/14/96	
Methoxychlor	039480	<1.0	100.0	608	10/14/96	
Toxaphene	039400	<1.0	5.0	608	10/14/96	
2,4-D	039730	<0.5	100.0	615	10/14/96	
2,4,5-TP (Silvex)	039780	<0.05	10.0	615	10/14/96	

PART VII - RADIOLOGICAL ANALYSIS

(a) Parameter Name	(b) Storet Code	(c) Analysis Res. (ug/L)	(d) Standards (ug/L)	(e) Analytical Methods	(f) Analysis Date	(g) Above Standard
Gross Alpha excl. radon and uranium	001519	1.0+/-3.0	15.0	900.0	10/15/96	
Radium 226 and Radium 228 combined	011503	<0.5+/-0.5	5.0	903.1	10/21/96	

DER FORM : 17-501.900 (4)
Form Title: Effluent Water

PART VIII - SECONDARY CHEMICAL ANALYSIS

(a) Parameter Name	(b) Storet Code	(c) Analysis Res. (ug/L)	(d) Standards (ug/L)	(e) Analytical Methods	(f) Analysis Date	(g) Above Standard
Chloride	000940	67.0	250.0	325.2	10/18/96	
Copper	900218	0.01	1.0	220.1	10/16/96	
Iron	900219	0.1	0.3	236.1	10/23/96	
Manganese	900220	<0.01	0.05	243.1	10/16/96	
Sulfate	000945	28.9	250.0	375.4	10/08/96	
Zinc	900221	0.04	5.0	289.1	10/15/96	
pH (Units)	000403	6.8	6.5-8.5	150.1	10/04/96	
TDS	070300	410.0	500.0	160.1	10/07/96	
Foaming Agents	900217	<0.1	0.5	425.1	10/04/96	

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based upon my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that these are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Date: 10/30/96

Signature of Lead Operator

Phone: 407 886 0002

W A RESTAIN A2322

Name (please type) Certification No.

Tri-Tech Laboratories, Inc.
(407) 275-8463 • FAX 281-9187
P.O. Box 140966, Orlando, FL 4-0966

CHAIN OF

INVOICE TO (COMPANY AND INDIVIDUAL): Zellwood Station
ADDRESS (CITY STATE ZIP): 2126 Spillman Dr. Zellwood, Fl. 32798
CONTACT PERSON PHONE # INVOICE: Mr. WaRestall
TTA WORK ORDER # (LAB USE): 96-10-105 17

ORIGINAL REPORT TO (COMPANY AND INDIVIDUAL)
ADDRESS (CITY STATE ZIP)
CONTACT PERSON PHONE # REPORT: 886-0000

(OPTIONAL) ADDITIONAL REPORTS SENT TO
ADDRESS (CITY STATE ZIP)

CLIENT PROJECT NAME: Zellwood Station
CLIENT PROJECT #

	SAMPLE IDENTIFICATION	DATE/TIME	COMP	GRAB	WATER	SOIL	OTHER	SAMPLE DESCRIPTION	NUMBER OF CONTAINERS	Effluent Analysis	Bod	TSS	Fecal							REMARKS
1.	251	10/3/96		X	X			Raw	1			X	X							
2.	252	2:00pm		X	X			2° Effluent	1			X	X	X						
3.																				
4.	Effluent Chem.			X	X															
5.								2° Effluent	17											
6.	INORGANIC			X	X						X									
7.	VOLATILE			X	X						X									
8.	TRIHALOMETHANE			X	X						X									96-10-105 17
9.	ORGANIC CHEM			X	X						X									
10.	RADIOLOGICAL			X	X						X									
11.	SECONDARY			X	X						X									
12.																				
13.																				

TRANSFER NUMBER	RELINQUISHED BY	DATE TIME	ACCEPTED BY
1st	[signature]	10/3/96	[signature] 10-3-96
2nd	[signature]		R. Dowdell 3:45p

ADDITIONAL REMARKS

COOLER #

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Department of
Environmental Protection

FEB 1999 RECEIVED D.E.P. CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

ISTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF JAN 1999

Water System Information

System Name: ZELLWOOD STATION CO OP PWS Identification No.: 3481506

System Owner

Name: ZELLWOOD STATION CO OP Telephone No.: 886 0000

Address: 2126 SPILLMAN DR

City: ZELLWOOD State: FL Zip Code: 32798

System Type: ☐ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive

No. of Service Connections at End of Month: 1008 Total Population Served at End of Month: 1800

Water Treatment Plant Information

Treatment Plant

Name: ZELLWOOD STATION CO OP Telephone No.: 886 0000

Address: 2126 SPILLMAN DR

City: ZELLWOOD State: FL Zip Code: 32798

Permitted Maximum Day Capacity of Plant: 1.25 MGD

Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C

Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WARESTALL	6839	B	All

Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
D LAND	8534	C	All

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF JAN 1999

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Signature and Date: 2/15/99

WARESTALL 136839
Name and Certificate Number (please type or print)

DEP Form 62-555.900(3)
Effective December 10, 1998

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number:

Treatment Plant Name: ZELLWOOD STATION CO OP

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF JAN 1999

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reason for or Actual Circumstances Causing Exceptions
1	24	.316	2.0	1.0	1	1.0	
2	24	.337	1.8	.8	1	.8	
3	24	.406	3.0	1.4	1	1.4	
4	24	.368	2.8	1.2	1	1.2	
5	24	.332	2.6	1.2	1	1.2	
6	24	.450	2.4	1.0	1	1.0	
7	24	.377	2.2	1.0	1	1.0	
8	24	.356	1.6	.7	1	.7	
9	24	.465	1.4	.7	1	.7	
10	24	.354	1.6	.8	1	.8	
11	24	.341	2.0	1.0	1	1.0	
12	24	.444	2.2	1.0	1	1.0	
13	24	.426	2.4	1.2	1	1.2	
14	24	.516	2.6	1.2	1	1.2	
15	24	.362	3.0	1.4	1	1.4	
16	24	.471	3.2	1.6	1	1.6	
17	24	.479	3.5	2.0	1	2.0	
18	24	.426	3.2	2.0	1	2.0	
19	24	.334	2.8	1.5	1	1.5	
20	24	.362	2.6	1.2	1	1.2	
21	24	.513	2.4	1.2	1	1.2	
22	24	.319	2.0	.8	1	.8	
23	24	.306	1.8	.6	1	.6	
24	24	.388	2.6	.8	1	.8	
25	24	.541	2.5	1.2	1	1.2	
26	24	.169	2.4	1.0	1	1.0	
27	24	.360	2.4	1.2	1	1.2	
28	24	.434	2.2	1.0	1	1.0	
29	24	.320	2.0	1.0	1	1.0	
30	24	.420	2.8	1.3	1	1.3	
31	24	.448	2.6	1.3	1	1.3	
Total		12.140			31		
Avg.		.392					
Max.		.541					

RECEIVED FEB 1999 DEP CENTRAL DISTRICT

Department of
Environmental Protection

RECEIVED MAR 15 1999 DEP CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF FEB 1999

Water System Information

- System Name: ZELLWOOD STATION COOP — PWS Identification No.: 3481506
- System Owner
  - Name: ZELLWOOD STATION COOP — Telephone No.: 886 0000
  - Address: 2126 SPILLMAN DR.
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1008 — Total Population Served at End of Month: 1800

Water Treatment Plant Information

- Treatment Plant
  - Name: ZELLWOOD STATION COOP — Telephone No.: 886 0000
  - Address: 2126 SPILLMAN DR.
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 gpd MGD
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTALL	6839	B	ALL

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
D LANID	8534	C	DAY

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF FEB 1999

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

WA Restall 3/15/99 — Signature and Date

WA RESTALL 6839 — Name and Certificate Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ZELLWOOD STATION CO OP

III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF FEB 1999

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) M.G.D.	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1	24	.336	2.0	1.0	1	1.0	
2	24	.388	3.0	1.4	1	1.4	
3	24	.395	2.5	1.2	1	1.2	
4	24	.486	2.0	1.0	1	1.0	
5	24	.251	3.5	2.0	1	2.0	
6	24	.209	4.0	2.2	1	2.2	
7	24	.477	4.0	2.4	1	2.4	
8	24	.453	3.5	2.0	1	2.0	
9	24	.485	3.0	1.6	1	1.6	
10	24	.319	2.5	1.2	1	1.2	
11	24	.577	2.4	1.2	1	1.2	
12	24	.292	2.5	1.2	1	1.2	
13	24	.445	2.8	1.4	1	1.4	
14	24	.380	2.6	1.2	1	1.2	
15	24	.456	2.4	1.2	1	1.2	
16	24	.470	2.0	.8	1	.8	
17	24	.488	1.8	.8	1	.8	
18	24	.510	1.6	.6	1	.6	
19	24	.451	2.0	1.0	1	1.0	
20	24	.355	2.4	1.2	1	1.2	
21	24	.572	2.6	1.2	1	1.2	
22	24	.394	2.8	1.4	1	1.4	
23	24	.476	2.4	1.2	1	1.2	
24	24	.398	2.5	1.0	1	1.0	
25	24	.705	2.6	1.2	1	1.2	
26	24	.320	2.8	1.2	1	1.2	
27	24	.542	2.8	1.4	1	1.4	
28	24	.625	2.6	1.4	1	1.4	
29							
30							
31							
Total		12.267			28		
Avg.		.438					
Max.		.705					

Department of
Environmental Protection

APR 1999
RECEIVED
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DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

NSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF MARCH 1999

Water System Information

- System Name: ZELLWOOD STATION CO OP PWS Identification No.: 3485506
- System Owner
  - Name: ZELLWOOD STATION CO OP Telephone No.: 886-0000
  - Address: 2126 SPILMAN DR.
  - City: ZELLWOOD State: FL Zip Code: 32798
- System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1005 Total Population Served at End of Month: 1800

Water Treatment Plant Information

- Treatment Plant
  - Name: ZELLWOOD STATION CO OP Telephone No.: 886-0000
  - Address: 2126 SPILMAN DR
  - City: ZELLWOOD State: FL Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.0 MGD gpd
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTAIL	6835	B	All

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
D LAND	8534	C	All

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF MARCH 1999

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

4/14/99 WA RESTAIL B6835

Signature and Date Name and Certificate Number (please type or print)

DEP Form 62-555.900(3)
Effective December 10, 1996

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: Hilliard Station 2 Co OP

III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF MARCH 1999

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1	24	.419	2.0	1.0	1	1.0	
2	24	.441	2.8	1.0	1	1.0	
3	24	.600	3.0	1.4	1	1.4	
4	24	.655	2.8	1.2	1	1.2	
5	24	.542	2.6	1.2	1	1.2	
6	24	.533	2.4	1.0	1	1.0	
7	24	.632	2.2	1.0	1	1.0	
8	24	.466	1.6	.8	1	.8	
9	24	.472	1.5	.7	1	.7	
10	24	.510	3.0	1.4	1	1.4	
11	24	.774	2.8	1.2	1	1.2	
12	24	.558	2.0	1.0	1	1.0	
13	24	.486	1.5	.5	1	.5	
14	24	.535	1.4	.5	1	.5	
15	24	.400	2.2	1.0	1	1.0	
16	24	.443	2.4	1.2	1	1.2	
17	24	.484	2.0	1.0	1	1.0	
18	24	.727	1.8	1.0	1	1.0	
19	24	.772	3.2	2.0	1	2.0	
20	24	.500	3.0	1.6	1	1.6	
21	24	.611	2.4	1.2	1	1.2	
22	24	.387	2.2	1.0	1	1.0	
23	24	.547	2.0	1.0	1	1.0	
24	24	.452	2.4	1.2	1	1.2	
25	24	.655	2.6	1.4	1	1.4	
26	24	.301	2.4	1.2	1	1.2	
27	24	.681	2.0	1.0	1	1.0	
28	24	.601	1.8	1.0	1	1.0	
29	24	.360	1.5	.7	1	.7	
30	24	.577	1.4	.6	1	.6	
31	24	.622	2.0	1.0	1	1.0	
Total		15.795			31		
Avg.		.509					
Max.		.774					

Department of
Environmental Protection

RECEIVED MAY 1999 DEP CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF APRIL 1999

Water System Information

- System Name: ZELLWOOD STATION CO OP PWS Identification No.: 3481506
- System Owner
  Name: ZELLWOOD STATION CO OP Telephone No.: 886 0000
  Address: 2126 SPILLMAN DR
  City: ZELLWOOD State: FL Zip Code: 32798
- System Type: ☐ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1008 Total Population Served at End of Month: 1600

Water Treatment Plant Information

- Treatment Plant
  Name: ZELLWOOD STATION CO OP Telephone No.: 886 0000
  Address: 2126 SPILLMAN DR
  City: ZELLWOOD FL State: FL Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD gpd
  Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
  Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
W RESTALL	6839	B	ALL

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
D LAND	8534	C	ALL

RECEIVED MAY 1999 DEP CENTRAL DISTRICT

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF APRIL 1999

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

W Restall 5/10/99 — Signature and Date

W RESTALL B6839 — Name and Certificate Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ZELLWOOD STATION CO OP

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF APRIL 1999

Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide

Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Residual Disinfectant in Distribution System: Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.557	2.3	1.1	1	1.1	
2		.378	3.4	1.5	1	1.5	
3		.505	2.3	1.3	1	1.3	
4		.483	1.2	.4	1	.4	
5		.579	1.5	1.0	1	1.0	
6		.635	2.1	1.4	1	1.4	
7		.594	1.1	.6	1	.6	
8		.749	3.9	2.3	1	2.3	
9		.373	3.6	2.1	1	2.1	
10		.719	2.8	1.9	1	1.9	
11		.519	1.9	1.0	1	1.0	
12		.662	2.0	1.0	1	1.0	
13		.705	2.2	1.0	1	1.0	
14		.619	2.4	1.1	1	1.1	
15		.370	2.2	1.0	1	1.0	
16		.737	3.4	1.6	1	1.6	
17		.584	3.0	1.6	1	1.6	
18		.320	2.7	1.4	1	1.4	
19		.469	1.6	.7	1	.7	
20		.505	4.0	2.0	1	2.0	
21		.579	2.2	1.6	1	1.6	
22		.597	2.6	1.8	1	1.8	
23		.533	3.8	2.2	1	2.2	
24		.582	3.0	2.0	1	2.0	
25		.697	3.8	2.0	1	2.0	
26		.504	3.5	1.5	1	1.5	
27		.756	2.5	1.2	1	1.2	
28		.704	1.8	.8	1	.8	
29		.228	3.8	2.0	1	2.0	
30		.304	3.6	1.8	1	1.8	
31							
Total		16.546			30		
Avg.		.552					
Max.		.756					

Department of
Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

STRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF MAY 1999

ater System Information
ystem Name: ZELLWOOD STATION CO OP PWS Identification No.: 3481506
ystem Owner
Name: ZELLWOOD STATION CO OP Telephone No.: 886 0000
Address: 2126 SPILLMAN DR
City: ZELLWOOD FL 32798 State: FL Zip Code: 32798
ystem Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
lo. of Service Connections at End of Month: 1008 Total Population Served at End of Month: 1500

ater Treatment Plant Information
reatment Plant
Name: ZELLWOOD STATION CO OP Telephone No.: 886 0000
Address: 2126 SPILLMAN DR
City: ZELLWOOD State: FL Zip Code: 32798
Permitted Maximum Day Capacity of Plant: 1.25 MGD ~~gpd~~
Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTAIL	6839	B	All

Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
D LAND	8534	C	All

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF MAY 1999

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my nowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional perations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited he plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

ermore, I agree to retain these additional operations records at the plant site for at least five years and to make them ble for review upon request.

Wa Restall 6/10/99
Signature and Date

WA RESTAIL 136839
Name and Certificate Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ZELLWOOD STATION CO OP

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF MAY 1999

Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide

Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.317	3.0	1.4	1	1.4	
2		.556	2.8	1.2	1	1.2	
3		.468	2.6	1.2	1	1.2	
4		.627	2.0	.8	1	.8	
5		.464	1.6	.6	1	.6	
6		.618	2.4	1.0	1	1.0	
7		.245	2.5	1.2	1	1.2	
8		.151	2.6	1.2	1	1.2	
9		.303	3.0	1.4	1	1.4	
10		.280	2.8	1.2	1	1.2	
11		.418	2.8	1.4	1	1.4	PRESSURE
12		.413	3.0	1.6	1	1.6	LOSS BAC
13		.557	3.2	2.0	1	2.0	TAKEN
14		.291	3.5	2.0	1	2.0	
15		.550	2.0	1.0	1	1.0	
16		.433	2.2	1.0	1	1.0	
17		.458	2.4	1.2	1	1.2	
18		.510	2.6	1.2	1	1.2	
19		.584	2.4	1.2	1	1.2	
20		.556	2.0	.7	1	.7	
21		.340	1.8	.6	1	.6	
22		.452	2.0	1.0	1	1.0	
23		.557	3.0	1.4	1	1.4	
24		.500	2.8	1.2	1	1.2	
25		.626	2.6	1.2	1	1.2	
26		.580	2.4	1.0	1	1.0	
27		.528	2.0	1.0	1	1.0	
28		.327	2.4	1.2	1	1.2	
29		.325	2.2	1.0	1	1.0	
30		.411	2.0	1.0	1	1.0	
31		.457	2.8	1.2	1	1.2	
Total		13.742			31		
Avg.		.443					
Max.		.626					

TCEQ Form 20488 (Revised)
Effective December 10, 1994

Department of
Environmental Protection

JUL 1999
RECEIVED
D.E.P. CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF: JUNE 1999

Water System Information

- System Name: ZELLWOOD STATION CO OP — PWS Identification No.: 3481506
- System Owner
  - Name: ZELLWOOD STATION CO OP — Telephone No.: 886 0000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1008 — Total Population Served at End of Month: 1600

Water Treatment Plant Information

- Treatment Plant
  - Name: ZELLWOOD STATION CO OP — Telephone No.: 886 0000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD gpd
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
W.A. RESTALL	6839	B	ALL

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
D. LAND	8534	C	

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF:

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

W A Restall 7/13/99
Signature and Date

WA RESTALL B6839
Name and Certificate Number (please type or print)

onthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

ystem PWS Identification Number: 348 1506

reatment Plant Name: ZIELWOOD STATION CO OP.

E SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF JUNE 1999

Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide

Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.647	2.4	1.2	1	1.2	
2		.481	1.8	1.0	1	1.0	
3		.628	2.0	1.0	1	1.0	
4		.376	2.8	1.4	1	1.4	
5		.269	3.0	1.6	1	1.6	
6		.494	3.2	1.4	1	1.4	
7		.493	2.8	1.2	1	1.2	
8		.340	2.6	1.0	1	1.0	
9		.614	2.4	1.0	1	1.0	
10		.412	2.2	1.0	1	1.0	
11		.225	1.8	.8	1	.8	
12		.301	1.6	.6	1	.6	
13		.327	1.5	.5	1	.5	
14		.258	2.0	.8	1	.8	
15		.291	2.0	1.0	1	1.0	
16		.350	2.4	1.0	1	1.0	
17		.212	2.8	1.2	1	1.2	
18		.226	3.4	2.0	1	2.0	
19		.234	3.0	1.8	1	1.8	
20		.260	3.2	2.0	1	2.0	
21		.213	2.8	1.6	1	1.6	
22		.241	1.6	.7	1	.7	
23		.233	1.8	.8	1	.8	
24		.294	2.0	.8	1	.8	
25		.408	2.2	1.0	1	1.0	
26		.444	3.0	1.0	1	1.0	
27		.238	2.6	1.0	1	1.0	
28		.290	2.6	1.2	1	1.2	
29		.224	2.4	1.0	1	1.0	
30		.236	2.4	1.0	1	1.0	
31							
Total		10.259			30		
Avg.		.342					
Max.							

JUL 1999
RECEIVED
D.E.P. CENTRAL DISTRICT

Department of
Environmental Protection

AUG 1999
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D.E.P. CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF JULY 1999

Water System Information

- System Name: ZELLWOOD STATION CO OP PWS Identification No.: 3481506
- System Owner
  Name: ZELLWOOD STATION CO-OP. Telephone No.: 886 0000
  Address: 2126 SPILLMAN DR
  City: ZELLWOOD FL 32798 State: FL Zip Code: 32766
- System Type: X community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1008 Total Population Served at End of Month: 1500

Water Treatment Plant Information

- Treatment Plant
  Name: ZELLWOOD STATION CO-OP. Telephone No.: 886 0000
  Address: 2126 SPILLMAN DR
  City: ZELLWOOD State: FL Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD gpd
  Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTAIL	6839	B	ALL

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
NONE			

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF JULY 1999

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

WA Restail 8/13/99 — Signature and Date

WA RESTAIL B6839 — Name and Certificate Number (please type or print)

DEP Form 62-555.900(3)
Effective December 10, 1998

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ZELLWOOD STATION CO. OP.

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF JULY 1999

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: X free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.236	2.0	.8	1	.8	
2		.237	1.8	.6	1	.6	
3		.362	2.0	1.0	1	1.0	
4		.230	2.6	1.0	1	1.0	
5		.205	3.0	1.4	1	1.4	
6		.245	2.8	1.2	1	1.2	
7		.311	2.6	1.2	1	1.2	
8		.283	2.4	1.0	1	1.0	
9		.230	2.2	1.0	1	1.0	
10		.285	2.0	.8	1	.8	
11		.268	2.0	.8	1	.8	
12		.372	3.0	1.4	1	1.4	
13		.273	2.6	1.2	1	1.2	
14		.356	2.8	1.4	1	1.4	
15		.260	2.4	1.2	1	1.2	
16		.211	2.4	1.2	1	1.2	
17		.367	3.5	2.0	1	2.0	
18		.280	3.0	1.6	1	1.6	
19		.223	2.0	1.0	1	1.0	
20		.243	2.4	1.2	1	1.2	
21		.344	2.2	1.0	1	1.0	
22		.408	4.0	2.0	1	2.0	
23		.250	3.2	1.6	1	1.6	
24		.467	3.6	1.6	1	1.6	
25		.154	2.8	1.4	1	1.4	
26		.200	2.6	1.4	1	1.4	
27		.289	2.4	1.2	1	1.2	
28		.340	2.4	1.2	1	1.2	
29		.387	2.6	1.3	1	1.3	
30		.319	2.8	1.4	1	1.4	
31		.482	2.8	1.4	1	1.4	
Total		9.017			31		
Avg.		.291					
Max.		.467					

AUG 1999
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Department of
Environmental Protection

SEP 1999
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D.E.P. CENTRAL
DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

NSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF: AUG 1999

Water System Information

- System Name: ZELLWOOD STATION CO-OP. PWS Identification No.: 3481506
- System Owner
  Name: ZELLWOOD STATION CO-OP. Telephone No.: 886 0000
  Address: 2126 SPILLMAN DR
  City: ZELLWOOD State: FL Zip Code: 32798
- System Type: community; non-transient non-community; non-community; consecutive
- No. of Service Connections at End of Month: 100 8 Total Population Served at End of Month: 1700

Water Treatment Plant Information

- Treatment Plant
  Name: ZELLWOOD STATION CO OP Telephone No.: 886 0000
  Address: 2126 SPILLMAN DR
  City: ZELLWOOD State: FL Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD gpd
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C

ad/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTALL	6839	B	All

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
NONE			

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF: AUG 1999

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

WA Restall 8/15/99
Signature and Date

WA RESTALL B6839
Name and Certificate Number (please type or print)

DEP Form 62-555.900(1)
Effective December 10, 1998

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ZELLWOOD STATION CO OP

III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF AUG 1999

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) .MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Residual Disinfectant in Distribution System: Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.600	3.0	1.4	1	1.4	
2		.386	2.8	1.8	1	1.2	
3		.319	2.5	1.2	1	1.2	
4		.225	2.4	1.0	1	1.0	
5		.322	2.4	1.2	1	1.2	
6		.260	2.8	1.2	1	1.2	
7		.313	3.0	1.6	1	1.6	
8		.299	3.2	1.8	1	1.8	
9		.408	3.0	1.6	1	1.6	
10		.318	2.8	1.4	1	1.4	
11		.322	2.6	1.4	1	1.4	
12		.520	2.0	1.0	1	1.0	
13		.171	3.5	2.0	1	2.0	
14		.434	3.2	2.0	1	2.0	
15		.347	3.0	1.8	1	1.8	
16		.145	3.2	1.8	1	1.8	
17		.250	3.6	2.0	1	2.0	
18		.291	3.0	1.8	1	1.8	
19		.371	3.0	1.6	1	1.6	
20		.265	2.8	1.2	1	1.2	
21		.247	2.6	1.2	1	1.2	
22		.307	2.4	1.2	1	1.4	
23		.259	2.6	1.4	1	1.4	
24		.287	2.4	1.2	1	1.2	
25		.308	3.0	1.5	1	1.5	
26		.360	2.8	1.4	1	1.4	
27		.258	2.4	1.2	1	1.2	
28		.322	2.6	1.2	1	1.2	
29		.322	2.8	1.4	1	1.4	
30		.357	2.4	1.2	1	1.2	
31		.432	2.4	1.2	1	1.2	
Total		10.572			31		
Avg.		.341					
Max.		.600					

SEP 1999
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D.E.P. CENTRAL DISTRICT

FLORIDA

Department of
Environmental Protection

OCT 1999
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D.E.P. CENTRAL
DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground and for Consecutive Public Water Systems that Treat Their Water

NSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF: SEPT 1999

Water System Information

- System Name: ZELLWOOD STATION CO OP — PWS Identification No.: 3481506
- System Owner
  - Name: ZELLWOOD STATION CO OP — Telephone No.: 886 0000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1009 — Total Population Served at End of Month: 1700

Water Treatment Plant Information

- Treatment Plant
  - Name: ZELLWOOD STATION CO OP — Telephone No.: 886 0000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WARESTALL	6839	B	All

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
R CARSON	5480	B	WEEK ENDS

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF: SEPT 1999

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

W. Rastall 10/5/99 — Signature and Date

W. Rastall B6839 — Name and Certificate Number (please type or print)

DEP Form 62-555.900(3)
Effective December 10, 1998

onthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

ystem PWS Identification Number: 3481506

eatment Plant Name: ZELLWOOD STATION CO OP

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF SEPT 1999

Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide

Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.645	2.0	1.0	1	1.0	
2		.450	2.4	1.0	1	1.0	
3		.283	2.8	1.2	1	1.2	
4		.572	2.6	1.2	1	1.2	
5		.575	3.0	1.4	1	1.4	
6		.504	3.5	2.0	1	2.0	
7		.503	2.0	.8	1	.8	
8		.510	2.4	1.2	1	1.2	
9		.378	3.0	1.6	1	1.6	
10		.334	3.5	1.8	1	1.8	
11		.250	2.0	1.4	1	1.4	
12		.520	3.2	2.2	1	2.2	
13		.398	2.0	1.0	1	1.0	
14		.346	2.4	1.2	1	1.2	
15		.248	2.6	1.2	1	1.2	
16		.290	2.8	1.3	1	1.3	
17		.272	3.2	1.5	1	1.5	
18		.329	4.0	2.0	1	2.0	
19		.272	2.5	1.2	1	1.2	
20		.210	1.6	.7	1	.7	
21		.274	2.0	.8	1	.8	
22		.278	3.5	2.0	1	2.0	
23		.440	1.8	1.0	1	1.0	
24		.206	4.0	2.0	1	2.0	
25		.322	2.0	.8	1	.8	
26		.252	2.5	1.4	1	1.4	
27		.216	4.0	1.8	1	1.8	
28		.219	3.0	1.6	1	1.6	
29		.341	2.8	1.2	1	1.2	
30		.448	2.2	.8	1	.8	
31							
Total		10.890			30		
Avg.		.363					
Max.		.645					

OCT 1999
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D.E.P. CENTRAL DISTRICT

Department of
Environmental Protection

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D.E.P. CENTRAL DISTRICT
NOV 1999

Monthly Operation Report for Public Water Systems that Use Groundwater and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF: OCT 1999

Water System Information

- System Name: ZELLWOOD STATION CO OP — PWS Identification No.: 3481506
- System Owner
  - Name: ZELLWOOD STATION CO OP — Telephone No.: 8860000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- System Type: X community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1010 — Total Population Served at End of Month: 1800

Water Treatment Plant Information

- Treatment Plant
  - Name: ZELLWOOD STATION CO OP — Telephone No.: 8860000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD gpd
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTAIL	6839	B	All

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
NONE			

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF:

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

WA Restail 11/8/99 — Signature and Date

WA RESTAIL B6839 — Name and Certificate Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ZELWOOD STATION CO OP

III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF OCT 1999

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.224	3.0	1.4	1	1.4	
2		.133	2.8	1.2	1	1.2	
3		.327	3.0	1.6	1	1.6	
4		.244	2.2	1.0	1	1.0	
5		.200	2.4	1.0	1	1.0	
6		.220	2.0	.8	1	.8	
7		.200	2.2	1.0	1	1.0	
8		.252	2.8	1.2	1	1.2	
9		.231	4.0	2.2	1	2.2	
10		.237	3.4	2.0	1	2.0	
11		.252	3.0	1.8	1	1.8	
12		.236	2.8	1.8	1	1.8	
13		.295	2.6	1.4	1	1.4	
14		.427	2.4	1.0	1	1.0	
15		.222	2.2	1.0	1	1.0	
16		.213	2.8	1.4	1	1.4	
17		.170	2.6	1.4	1	1.4	
18		.248	2.8	1.5	1	1.5	
19		.252	3.0	1.6	1	1.6	
20		.336	3.2	2.0	1	2.0	
21		.329	3.6	2.0	1	2.0	
22		.210	3.2	1.8	1	1.8	
23		.264	3.0	1.4	1	1.4	
24		.402	2.8	1.4	1	1.4	
25		.319	2.6	1.2	1	1.2	
26		.298	3.0	1.6	1	1.6	
27		.465	3.2	1.6	1	1.6	
28		.421	3.5	2.0	1	2.0	
29		.350	3.0	1.8	1	1.8	
30		.507	2.8	1.4	1	1.4	
31		.362	2.6	1.4	1	1.4	
Total		9.196			31		
Avg.		.297					
Max.		.507					

RECEIVED NOV 1999 D.E.P. CENTRAL DISTRICT

Department of
Environmental Protection

RECEIVED DEC 1999 D.E.P. CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Groundwater and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF: NOV 1999

Water System Information

- System Name: ZELLWOOD STATION CO-OP. PWS Identification No.: 3481506
- System Owner
  Name: ZELLWOOD STATION CO-OP. Telephone No.: 407 886 0000
  Address: 2126 SPILLMAN DR
  City: ZELLWOOD State: FL Zip Code: 32798
- System Type: X community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1010 Total Population Served at End of Month: 1800

Water Treatment Plant Information

- Treatment Plant
  Name: ZELLWOOD STATION CO-OP. Telephone No.: 407 886 0000
  Address: 2126 SPILLMAN DR
  City: ZELLWOOD State: FL Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- ad/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTAIL	6839	B	ALL

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
NONE			

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF: NOV 1999

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

WA Restail 12/15/99 — Signature and Date

WA RESTAIL 136839 — Name and Certificate Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ZELLWOOD STATION CO OP

III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF Nov 1999

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.322	2.0	.8	1	.8	
2		.301	3.0	1.4	1	1.4	
3		.340	3.4	1.5	1	1.5	
4		.352	3.2	1.4	1	1.4	
5		.235	3.0	1.2	1	1.2	
6		.249	2.8	1.2	1	1.2	
7		.468	2.8	1.0	1	1.0	
8		.337	2.6	1.0	1	1.0	
9		.350	4.0	2.2	1	2.2	
10		.275	3.5	2.0	1	2.0	
11		.486	3.0	1.6	1	1.6	
12		.447	3.2	1.6	1	1.6	
13		.434	3.0	1.5	1	1.5	
14		.415	2.8	1.2	1	1.2	
15		.373	2.6	1.2	1	1.2	
16		.500	2.6	1.0	1	1.0	
17		.363	2.4	1.0	1	1.0	
18		.408	2.4	1.2	1	1.2	
19		.248	2.5	1.4	1	1.4	
20		.395	2.2	1.0	1	1.0	
21		.438	2.0	1.0	1	1.0	
22		.339	1.8	.8	1	.8	
23		.461	1.6	.6	1	.6	
24		.325	2.2	1.0	1	1.0	
25		.320	2.0	1.0	1	1.0	
26		.380	2.2	1.2	1	1.2	
27		.470	2.0	1.0	1	1.0	
28		.378	2.0	1.0	1	1.0	
29		.285	2.4	1.2	1	1.2	
30		.388	2.6	1.2	1	1.2	
31							
Total		11.082			30		
Avg.		.369					
Max.		.500					

Department of
Environmental Protection

JAN 2000
RECEIVED
D.E.P. CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF: DEC 1999

Water System Information

- System Name: ZELLWOOD STATION CO.OP. PWS Identification No.: 3481506
- System Owner
  Name: ZELLWOOD STATION CO. OP. Telephone No.: 407 886 0000
  Address: 2126 SPILLMAN DR
  City: ZELLWOOD State: FL Zip Code: 32798
- System Type: community; non-transient non-community; non-community; consecutive
- No. of Service Connections at End of Month: 1011 Total Population Served at End of Month: 1800

Water Treatment Plant Information

- Treatment Plant
  Name: ZELLWOOD STATION CO OP Telephone No.: 407 886 0000
  Address: 2126 SPILLMAN DR
  City: ZELLWOOD State: FL Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C

Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTALL	6839	B	All

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
NONE			

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF: DEC 1999

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

WA Restall 1/11/2000 WA RESTALL B6839

Signature and Date Name and Certificate Number (please type or print)

DEP Form 62-555.900(1)
Effective December 10, 1996

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ZELLWOOD STATION CO OP

III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF DEC 1999

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) M.G.D.	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.362	4.0	2.0	1	2.0	
2		.352	3.0	1.4	1	1.4	
3		.370	2.4	1.2	1	1.2	
4		.510	2.2	1.0	1	1.0	
5		.426	1.8	.6	1	.6	
6		.334	1.6	.5	1	.5	
7		.409	2.0	.8	1	.8	
8		.534	2.2	1.0	1	1.0	
9		.334	2.8	1.2	1	1.2	
10		.269	3.0	1.4	1	1.4	
11		.469	3.2	1.5	1	1.5	
12		.456	3.0	1.5	1	1.5	
13		.426	2.8	1.2	1	1.2	
14		.270	2.6	1.0	1	1.0	
15		.391	1.8	.8	1	.8	
16		.323	2.0	1.0	1	1.0	
17		.508	2.4	1.0	1	1.0	
18		.191	4.0	2.2	1	2.2	
19		.223	4.0	2.2	1	2.2	
20		.247	3.0	1.4	1	1.4	
21		.223	2.8	1.2	1	1.2	
22		.260	3.2	1.4	1	1.4	
23		.371	2.8	1.2	1	1.2	
24		.290	2.6	1.2	1	1.2	
25		.314	2.6	1.0	1	1.0	
26		.320	4.0	2.0	1	2.0	
27		.348	3.6	2.0	1	2.0	
28		.384	3.2	1.6	1	1.6	
29		.400	1.8	.7	1	.7	
30		.412	1.6	.6	1	.6	
31		.246	2.8	1.2	1	1.2	
Total		10.972			31		
Avg.		.354					
Max.		.534					

Department of
Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Ground Water

RECEIVED FEB 2000 DEP. DISTRICT

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF: JAN 2000

Water System Information

- System Name: ZELLWOOD STATION CO OP INC — PWS Identification No.: 3484 1506
- System Owner
  - Name: ZELLWOOD STATION CO-OP. INC. — Telephone No.: 407 886 0000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- System Type: ✓ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1011 — Total Population Served at End of Month: 1650

Water Treatment Plant Information

- Treatment Plant
  - Name: ZELLWOOD STATION CO-OP. INC. — Telephone No.: 407 886 0000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGPD
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTAIL	6839	B	All

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
NONE			

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF: JAN 2000

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

WA RESTAIL 2/9/2000 — Signature and Date

WA Restail B6839 — Name and Certificate Number (please type or print)

ion Report for Public Water Systems that Use Ground Water and for Consecutive Public Water
t Treat Their Water
Identification Number: 34841506
lant Name: ZELLWOOD STATION CO OP INC

MMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF JAN 2000

e of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide

ummary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.415	2.4	1.0	1	1.0	
2		.391	2.2	1.0	1	1.0	
3		.329	3.4	2.0	1	2.0	
4		.437	4.0	2.0	1	2.0	
5		.498	3.2	1.4	1	1.4	
6		.394	3.0	1.2	1	1.2	
7		.287	2.8	1.2	1	1.2	
8		.301	2.0	.8	1	.8	
9		.346	2.8	1.3	1	1.3	
10		.324	2.6	1.0	1	1.0	
11		.299	2.4	1.0	1	1.0	
12		.336	3.5	2.0	1	2.0	
13		.654	3.0	1.4	1	1.4	
14		.515	3.5	2.0	1	2.0	
15		.290	2.0	.8	1	.8	
16		.474	2.2	1.0	1	1.0	
17		.408	2.0	1.0	1	1.0	
18		.286	2.8	1.2	1	1.2	
19		.526	3.0	1.4	1	1.4	
20		.316	3.4	2.0	1	2.0	
21		.239	2.4	1.2	1	1.2	
22		.323	2.6	1.2	1	1.2	
23		.402	3.0	1.4	1	1.4	
24		.279	2.8	1.2	1	1.2	
25		.267	2.6	1.2	1	1.2	
26		.288	4.0	2.0	1	2.0	
27		.298	3.5	2.0	1	2.0	
28		.245	2.8	1.4	1	1.4	
29		.304	2.6	1.2	1	1.2	
30		.242	2.0	.8	1	.8	
31		.313	1.6	.6	1	.6	
Total		11.029			31		
Avg.		.356					
Max.		.654					

FLORIDA

Department of
Environmental Protection

MAR 2000
RECEIVED
D.E.P. CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF: FEB 2000

Water System Information

- System Name: ZELLWOOD STATION CO OP — PWS Identification No.: 34841506
- System Owner
  - Name: ZELLWOOD STATION CO OP — Telephone No.: 407 8860000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1011 — Total Population Served at End of Month: 1650

Water Treatment Plant Information

- Treatment Plant
  - Name: ZELLWOOD STATION CO OP — Telephone No.: 4078860000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTAIL	6839	B	

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
R CARSON	5480	B	

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF: FEB 2000

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

WA Restail 3/8/2000 — Signature and Date

WA RESTAIL 136839 — Name and Certificate Number (please type or print)

DEP Form 62-555.900(2)
Effective December 10, 1998

...on Report for Public Water Systems that Use Ground Water and for Consecutive Public Water ...t Treat Their Water

...Identification Number: 3481506

...Plant Name: ELLIWOOD STATION CO OP

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF FEB 2000

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reason for Emergency or Abnormal Operating Conditions
1		.249	2.8	1.2	1	1.2	
2		.243	2.6	1.2	1	1.2	
3		.268	3.0	1.5	1	1.5	
4		.225	1.8	.8	1	.8	
5		.350	1.9	.8	1	.8	
6		.294	2.0	1.0	1	1.0	
7		.375	2.4	1.2	1	1.2	
8		.267	1.8	.8	1	.8	
9		.372	2.0	1.0	1	1.0	
10		.370	3.0	1.4	1	1.4	
11		.483	2.8	1.3	1	1.3	
12		.441	4.0	2.2	1	2.2	
13		.454	4.0	1.8	1	1.8	
14		.443	1.6	1.0	1	1.0	
15		.305	3.0	1.4	1	1.4	
16		.386	4.0	2.0	1	2.0	
17		.345	4.0	2.0	1	2.0	
18		.404	2.0	.8	1	.8	
19		.413	3.5	2.0	1	2.0	
20		.376	4.0	2.0	1	2.0	
21		.450	3.0	1.2	1	1.2	
22		.415	3.0	.8	1	.8	
23		.417	2.5	1.2	1	1.2	
24		.481	3.0	1.4	1	1.4	
25		.377	4.0	2.0	1	2.0	
26		.456	2.4	1.0	1	1.0	
27		.481	3.3	1.2	1	1.2	
28		.274	3.0	1.0	1	1.0	
29		.346	2.8	1.0	1	1.0	
30							
31							
Total		10.780			29		
Avg.		.371					
Max.		.483					

Department of
Environmental Protection

APR 2000 RECEIVED DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

STRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF: MARCH 2000

ater System Information
System Name: ZELLWOOD STATION COOP PWS Identification No.: 3481506
System Owner
Name: ZELLWOOD STATION COOP Telephone No. 4078860000
Address: 2126 SPILLMAN DR
City: ZELLWOOD State: FL Zip Code: 32798
System Type: X community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
No. of Service Connections at End of Month: 1011 Total Population Served at End of Month: 1500

/ater Treatment Plant Information
Treatment Plant
Name: ZELLWOOD STATION COOP Telephone No.: 4078860000
Address: 2126 SPILLMAN DR
City: ZELLWOOD State: FL Zip Code: 32798
P mitted Maximum Day Capacity of Plant: 1.25 MGD gpd
it Category and Class per Rule 62-699.310(4), F.A.C.: 3C
Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTAIL	6839	B	ALL

Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
R CARSON	5480	B	WEEK ENDS

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF: MARCH 2000

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

hermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Signature and Date: 4/9/2000

Name and Certificate Number (please type or print): WA RESTAIL B6839

DEP Form 62-555.900(3)
Effective December 10, 1998

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ZELLWOOD STATION COOP

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF MARCH 2000

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.450	2.0	.8	1	.8	
2		.472	2.2	1.0	1	1.0	
3		.370	2.2	1.0	1	1.0	
4		.477	2.4	1.2	1	1.2	
5		.501	2.0	.8	1	.8	
6		.449	1.8	.6	1	.6	
7		.512	2.4	1.0	1	1.0	
8		.541	2.6	1.2	1	1.2	
9		.517	3.0	1.4	1	1.4	
10		.220	2.8	1.2	1	1.2	
11		.529	2.6	1.2	1	1.2	
12		.484	2.4	1.2	1	1.2	
13		.432	2.8	1.6	1	1.6	
14		.437	3.0	1.8	1	1.8	
15		.585	2.8	1.5	1	1.5	
16		.305	2.4	1.2	1	1.2	
17		.293	2.6	1.2	1	1.2	
18		.349	2.0	1.0	1	1.0	
19		.493	2.4	1.2	1	1.2	
20		.358	2.8	1.4	1	1.4	
21		.397	2.4	1.2	1	1.2	
22		.553	2.6	1.2	1	1.2	
23		.503	2.2	1.0	1	1.0	
24		.458	2.4	1.2	1	1.2	
25		.697	2.6	1.4	1	1.4	
26		.508	2.4	1.2	1	1.2	
27		.474	2.2	1.0	1	1.0	
28		.345	2.0	1.0	1	1.0	
29		.586	2.4	1.2	1	1.2	
30		.644	2.4	1.2	1	1.2	
31		.350	2.2	1.0	1	1.0	
Total		14.291			31		
Avg.		.461					
Max.		.697					

Department of
Environmental Protection

MAY 2000
RECEIVED
D.E.P. CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

NSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF: APRIL 2000

Water System Information

- System Name: ZELLWOOD STATION CO OP — PWS Identification No.: 3481506
- System Owner
  - Name: ZELLWOOD STATION CO. OP. — Telephone No.: 886 0000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- System Type: X community; C non-transient non-community; C non-community; C consecutive
- No. of Service Connections at End of Month: 1012 — Total Population Served at End of Month: 1400

Water Treatment Plant Information

- Treatment Plant
  - Name: ZELLWOOD STATION CO OP — Telephone No.: 886 0000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD
  - Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WARESTALL	6839	B	All

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
R. CARSON	5480	B	RELIEF

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF: APRIL 2000

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

W. Warestall 5/9/2000 — Signature and Date

WARESTALL 136839 — Name and Certificate Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ELLWOOD STATION CO OP

III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF APRIL 2000

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: X free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.270	3.0	1.2	1	1.2	
2		.421	2.8	1.2	1	1.2	
3		.571	3.0	1.4	1	1.4	
4		.434	2.8	1.4	1	1.4	
5		.572	2.6	1.2	1	1.2	
6		.559	3.2	2.0	1	2.0	
7		.332	2.8	1.8	1	1.8	
8		.576	3.0	1.8	1	1.8	
9		.426	2.6	1.4	1	1.4	
10		.412	2.5	1.2	1	1.2	
11		.578	2.4	1.2	1	1.2	
12		.501	3.0	1.5	1	1.5	
13		.646	3.2	1.6	1	1.6	
14		.305	2.8	1.4	1	1.4	
15		.252	2.4	1.2	1	1.2	
16		.251	2.2	1.0	1	1.0	
17		.698	2.0	1.0	1	1.0	
18		.600	1.8	.8	1	.8	
19		.792	1.8	1.0	1	1.0	
20		.548	2.0	1.0	1	1.0	
21		.275	2.4	1.2	1	1.2	
22		.545	2.2	1.0	1	1.0	
23		.529	2.8	1.4	1	1.4	
24		.515	2.8	1.4	1	1.4	
25		.505	2.6	1.2	1	1.2	
26		.402	3.5	2.0	1	2.0	
27		.565	3.2	2.0	1	2.0	
28		.289	2.8	1.6	1	1.6	
29		.463	2.8	1.4	1	1.4	
30		.570	2.6	1.2	1	1.2	
31							
Total		14.352			30		
Avg.		.478					
Max.		.792					

Department of
Environmental Protection

JUN 2000
RECEIVED
S.E. DISTRICT

Monthly Operation Report for Public Water Systems that Use Groundwater and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF MAY 2000

Water System Information

- System Name: ZELLWOOD STATION CO OP — PWS Identification No.: 3481506
- System Owner
  - Name: ZELLWOOD STATION CO OP — Telephone No.: 886 0000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- System Type: ☐ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1012 — Total Population Served at End of Month: 1400

Water Treatment Plant Information

- Treatment Plant
  - Name: ZELLWOOD STATION CO OP — Telephone No.: 886 0000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTAIL	6839	B	All

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
R CARSON	5480	B	RELIEF

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF MAY 2000

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

WA Restail 6/20/2000 — Signature and Date

WA RESTAIL / B6839 — Name and Certificate Number (please type or print)

DEP Form 62-555.900(3)
Effective December 10, 1996

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ELLWOOD STATION CO OP

III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF MAY 2000

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) M G D	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.472	2.2	1.0	1	1.0	
2		.551	2.4	1.2	1	1.2	
3		.648	2.6	1.2	1	1.2	
4		.554	2.0	1.4	1	1.4	
5		.593	2.8	1.4	1	1.4	
6		.563	2.6	1.2	1	1.2	
7		.624	2.5	1.2	1	1.2	
8		.507	2.0	.8	1	.8	
9		.592	2.2	1.0	1	1.0	
10		.641	2.4	1.2	1	1.2	
11		.503	3.0	1.4	1	1.4	
12		.579	2.8	1.2	1	1.2	
13		.601	2.6	1.2	1	1.2	
14		.608	2.4	1.0	1	1.0	
15		.567	2.2	1.0	1	1.0	
16		.529	2.4	1.0	1	1.0	
17		.867	1.6	.6	1	.6	
18		.641	1.8	.6	1	.6	
19		.295	2.4	1.0	1	1.0	
20		.567	2.4	1.2	1	1.2	
21		.758	1.8	.6	1	.6	
22		.541	2.0	1.0	1	1.0	
23		.618	1.8	.6	1	.6	
24		.623	2.0	.8	1	.8	
25		.641	1.8	.6	1	.6	
26		.524	2.4	1.0	1	1.0	
27		.644	2.2	1.0	1	1.0	
28		.827	1.6	.6	1	.6	
29		.694	1.8	.8	1	.8	
30		.625	2.0	.8	1	.8	
31		.660	2.2	1.0	1	1.0	
Total		18.302			31		
Avg.		.590					
Max.		.867					

Department of
Environmental Protection

RECEIVED JUL 2000 D.E.P. CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF JUNE 2000

Water System Information

System Name: ZELLWOOD STATION CO OP — PWS Identification No.: 3481506

System Owner

Name: ZELLWOOD STATION CO OP — Telephone No.: 407 886 0000

Address: 2126 SPILLMAN DR

City: ZELLWOOD FL — State: FL — Zip Code: 32798

System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive

No. of Service Connections at End of Month: 1012 — Total Population Served at End of Month: 1400

Water Treatment Plant Information

Treatment Plant

Name: ZELLWOOD STATION CO OP — Telephone No.: 407 886 0000

Address: 2126 SPILLMAN DR

City: ZELLWOOD — State: FL — Zip Code: 32798

Permitted Maximum Day Capacity of Plant: 1.25 MGPD

Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C

Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTAIL	6839	B	All

Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
R CARSON	5480	B	RELIEF

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF JUNE 2000

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

WA Restail 7/10/2000 — Signature and Date

WA RESTAIL B6839 — Name and Certificate Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ELLWOOD STATION CO OP

III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF JUNE 2000

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.695	2.0	.8	1	.8	
2		.544	2.8	1.2	1	1.2	
3		.630	2.6	1.2	1	1.2	
4		.852	1.8	.8	1	.8	
5		.803	2.0	.8	1	.8	
6		.757	1.6	.6	1	.6	
7		.611	2.5	1.2	1	1.2	
8		.688	3.0	1.4	1	1.4	
9		.440	4.0	1.8	1	1.8	
10		.655	4.0	1.8	1	1.8	
11		.740	2.0	.8	1	.8	
12		.430	1.6	.6	1	.6	
13		.547	2.4	1.2	1	1.2	
14		.497	2.6	1.2	1	1.2	
15		.631	2.4	1.0	1	1.0	
16		.401	4.0	1.8	1	1.8	
17		.600	3.5	1.4	1	1.4	
18		.919	2.0	.6	1	.6	
19		.856	2.0	.6	1	.6	
20		.253	1.8	.4	1	.4	
21		.214	2.0	.7	1	.7	
22		.445	3.8	1.2	1	1.2	
23		.349	3.0	1.2	1	1.2	
24		.364	4.0	2.0	1	2.0	
25		.461	4.0	2.0	1	2.0	
26		.508	3.0	1.4	1	1.4	
27		.305	2.8	1.2	1	1.2	
28		.386	2.6	1.2	1	1.2	
29		.375	3.0	1.5	1	1.5	
30		.308	3.0	1.4	1	1.4	
31							
Total		17.364			30		
Avg.		.579					
Max.		.919					

Department of
Environmental Protection

RECEIVED AUG 2000 DEP CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF JULY 2000

Water System Information

- System Name: ZELLWOOD STATION COOP — PWS Identification No.: 3481506
- System Owner
  - Name: ZELLWOOD STATION COOP — Telephone No: 4078860000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- System Type: X community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1012 — Total Population Served at End of Month: 1650

Water Treatment Plant Information

- Treatment Plant
  - Name: ZELLWOOD STATION COOP — Telephone No.: 4078860000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 125 MGD
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTALL	6839	B	All

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
R. CARSON	5480	B	RELIEF

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF JULY 2000

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Wa Restall 8/6/2000 — Signature and Date

WA RESTALL B6839 — Name and Certificate Number (please type or print)

DEP Form 62-555.900(3)
Effective December 10, 1994

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ZELLWOOD STATION CO OP

III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF JULY 2006

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.406	2.0	.5	1	.8	
2		.410	1.8	.6	1	.6	
3		.355	1.8	.6	1	.6	
4		.641	2.5	1.2	1	1.2	
5		.526	2.6	1.2	1	1.2	
6		.492	2.4	1.0	1	1.0	
7		.502	2.4	1.0	1	1.0	
8		.385	1.5	.5	1	.5	
9		.378	1.8	.6	1	.6	
10		.443	1.6	.6	1	.6	
11		.547	3.0	1.2	1	1.2	
12		.624	4.0	2.0	1	2.0	
13		.740	3.0	1.4	1	1.4	
14		.400	2.8	1.4	1	1.4	
15		.471	3.0	1.6	1	1.6	
16		.381	3.2	1.6	1	1.6	
17		.636	3.4	1.6	1	1.6	
18		.401	3.0	.7	1	.7	
19		.633	2.2	.8	1	.8	
20		.579	2.4	1.0	1	1.0	
21		.447	2.2	1.0	1	1.0	
22		.318	2.0	.8	1	.8	
23		.313	1.6	.6	1	.6	
24		.386	1.5	.6	1	.6	
25		.427	1.4	.6	1	.6	
26		.315	2.0	1.0	1	1.0	
27		.564	2.2	1.0	1	1.0	
28		.517	2.4	1.0	1	1.0	
29		.534	2.6	1.2	1	1.2	
30		.596	2.4	1.2	1	1.2	
31		.500	2.8	1.4	1	1.4	
Total		14.744			31		
Avg.		.476					
Max.		.740					

Department of
Environmental Protection

SEP 2000
RECEIVED
D.E.P. CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF

AUG 2000

Water System Information

- System Name: ZELLWOOD STATION CO OP — PWS Identification No. 3481506
- System Owner
  - Name: ZELLWOOD STATION CO OP — Telephone No.: 407 8860000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- System Type: X community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1115 — Total Population Served at End of Month: 1650

Water Treatment Plant Information

- Treatment Plant
  - Name: ZELLWOOD STATION CO OP — Telephone No.: 407 886 0000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD
  - ant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- Lead/Chief Plant Operator

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
W A RESTAIL	6839	B	All

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
R. CARSON	5480	B	RELIEF

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF

AUG 2000

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

W A Restail 9/15/2000 — Signature and Date

W A RESTAIL B6839 — Name and Certificate Number (please type or print)

DEP Form 62-555 (6/01)
Effective December 10, 1994

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ZELLWOOD STATION COOP

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH OF AUG 2000

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Recorded Emergency or Abnormal Operating Conditions
1		.590	2.0	.8	1	.8	
2		.191	2.4	1.2	1	1.2	
3		.466	2.6	1.2	1	1.2	
4		.277	3.0	1.4	1	1.4	
5		.530	3.4	1.6	1	1.6	
6		.509	3.0	1.4	1	1.4	
7		.549	2.8	1.2	1	1.2	
8		.391	2.6	1.0	1	1.0	
9		.494	2.0	.7	1	.7	
10		.406	1.8	.6	1	.6	
11		.478	1.5	.5	1	.5	
12		.537	2.0	.8	1	.8	
13		.490	2.2	1.0	1	1.0	
14		.323	4.0	2.0	1	2.0	
15		.448	4.0	2.0	1	2.0	
16		.559	3.0	1.4	1	1.4	
17		.395	2.8	1.2	1	1.2	
18		.449	2.6	1.2	1	1.2	
19		.424	2.6	1.3	1	1.3	
20		.521	3.4	1.0	1	1.0	
21		.268	3.0	1.2	1	1.2	
22		.340	3.0	1.4	1	1.4	
23		.458	3.5	2.0	1	2.0	
24		.600	3.2	2.0	1	2.0	
25		.484	2.5	1.4	1	1.4	
26		.429	2.8	1.4	1	1.4	
27		.507	2.6	1.2	1	1.2	
28		.424	2.0	1.8	1	1.8	
29		.548	2.2	2.0	1	2.0	
30		.460	2.0	1.6	1	1.6	
31		.200	2.6	1.2	1	1.2	
Total		13.800			31		
Avg.		.445					
Max.		.600					

Department of
Environmental Protection

RECEIVED
D.E.P. CENTRAL DISTRICT
OCT 2000

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

ISTRUCTIONS: See Page 4.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF SEPT 2000

Water System Information

System Name: ZELLWOOD STATION CO. OP. PWS Identification No.: 3481506

System Owner

Name: ZELLWOOD STATION CO OP Telephone No.: 4078860000

Address: 2126 SPILLMAN DR

City: ZELLWOOD State: FL Zip Code: 32798

System Type: ☐ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive

No. of Service Connections at End of Month: 111 S Total Population Served at End of Month: 1650

Water Treatment Plant Information

Treatment Plant

Name: ZELLWOOD STATION CO OP Telephone No.: 4078860000

Address: 2126 SPILLMAN DR

City: ZELLWOOD State: FL Zip Code: 32798

• Permitted Maximum Day Capacity of Plant: 1.25 MGD

• Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C

• Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WARESTALL	6837	B	ALL

• Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
R CARSON	5480	B	RELIEF

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF SEPT 2000

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

WA Restall 10/10/2000 — Signature and Date

WA RESTALL 136839 — Name and Certificate Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ZELLWOOD STATION CO OP

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH OF SEPT. 2000

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at a Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken for Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reason for Emergency or Abnormal Operating Conditions
		MGD					
1		.270	2.0	.6	1	.6	
2		.495	2.4	1.0	1	1.0	
3		.540	3.0	1.4	1	1.4	
4		.404	3.5	2.0	1	2.0	
5		.523	4.0	2.0	1	2.0	
6		.335	3.8	2.0	1	2.0	
7		.350	4.0	2.2	1	2.2	
8		.244	3.2	1.8	1	1.8	
9		.249	3.0	1.2	1	1.2	
10		.291	2.8	1.2	1	1.2	
11		.385	3.0	1.3	1	1.3	
12		.470	2.6	1.0	1	1.0	
13		.720	2.4	1.0	1	1.0	
14		.524	2.8	1.2	1	1.2	
15		.489	2.6	1.0	1	1.0	
16		.243	3.0	1.4	1	1.4	
17		.358	3.0	1.2	1	1.2	
18		.247	3.2	1.5	1	1.5	
19		.341	3.4	1.5	1	1.5	
20		.340	3.2	1.4	1	1.4	
21		.316	3.0	1.2	1	1.2	
22		.262	2.8	1.0	1	1.0	
23		.238	2.6	1.0	1	1.0	
24		.325	2.8	1.2	1	1.2	
25		.408	3.2	1.4	1	1.4	
26		.420	4.0	2.0	1	2.0	
27		.448	3.5	1.8	1	1.8	
28		.428	3.2	1.4	1	1.4	
29		.319	3.0	1.2	1	1.2	
30		.419	2.6	1.0	1	1.0	
31							
Total		11.481			30		
Avg.		.381					
Max.		.720					

Department of
Environmental Protection

NOV 2000
RECEIVED
D.E.P. CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

STRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF: OCT 2000

Water System Information
System Name: ZELLWOOD STATION CO-OP. PWS Identification No.: 3481506
System Owner
Name: ZELLWOOD STATION CO OP Telephone No.: 407886 0000
Address: 2126 SPILLMAN DR.
City: ZELLWOOD State: FL Zip Code: 32798
System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
No. of Service Connections at End of Month: 1115 Total Population Served at End of Month: 1700

Water Treatment Plant Information
Treatment Plant
Name: ZELLWOOD STATION CO OP Telephone No. 407 886 0000
Address: 2126 SPILLMAN DR.
City: ZELLWOOD State: FL Zip Code: 32798
Permitted Maximum Day Capacity of Plant: 1.25 MGPD
Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTAIL	6839	B	ALL

Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
J.R. CARSON	5480	B	RELIEF

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF: OCT 2000

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Wa Restail 11/13/2000
Signature and Date

WA RESTAIL B6839
Name and Certificate Number (please type or print)

DEP Form 62-555.900(3)
Effective December 10, 1996

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 3481506

Treatment Plant Name: ZELLWOOD STATION CO OP

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF OCT 2006

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) M.G.D.	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.375	2.0	.8	1	.8	
2		.776	2.4	1.0	1	1.0	
3		.420	2.6	1.2	1	1.2	
4		.280	3.0	1.4	1	1.4	
5		.328	2.8	1.4	1	1.4	
6		.322	4.0	2.0	1	2.0	
7		.501	3.8	2.0	1	2.0	
8		.487	3.4	1.4	1	1.4	
9		.393	3.5	1.5	1	1.5	
10		.573	3.0	1.2	1	1.2	
11		.524	3.2	1.5	1	1.5	
12		.473	2.6	1.0	1	1.0	
13		.388	2.4	1.0	1	1.0	
14		.460	2.0	.8	1	.8	
15		.685	1.4	.5	1	.5	
16		.579	1.6	.6	1	.6	
17		.603	2.8	1.2	1	1.2	
18		.651	2.2	1.0	1	1.0	
19		.526	2.5	1.2	1	1.2	
20		.322	2.6	1.2	1	1.2	
21		.165	4.0	2.0	1	2.0	
22		.659	3.8	2.0	1	2.0	
23		.536	4.0	2.0	1	2.0	
24		.473	3.6	1.4	1	1.4	
25		.629	3.2	1.4	1	1.4	
26		.493	3.0	1.2	1	1.2	
27		.290	3.5	1.6	1	1.6	
28		.548	4.0	2.0	1	2.0	
29		.576	2.5	1.4	1	1.4	
30		.487	2.6	1.4	1	1.4	
31		.592	2.8	1.5	1	1.5	
Total		15.539			31		
Avg.		.501					
Max.		.776					

Department of
Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH AND YEAR OF:
NOV 2000

Water System Information

- System Name: ZELLWOOD STATION CO OP — PWS Identification No. 3481506
- System Owner
  - Name: ZELLWOOD STATION CO OP — Telephone No. 407886 0000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- System Type: X community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- No. of Service Connections at End of Month: 1115 — Total Population Served at End of Month: 1750

Water Treatment Plant Information

- Treatment Plant
  - Name: ZELLWOOD STATION CO OP — Telephone No. 407886 0000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD — State: FL — Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C

Lead/Chief Plant Operator

Name	Certificate Number	Class (A, B, C, or D)	Days/Shifts Worked
WA RESTAIL	6839	B	All

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Days/Shifts Worked
JR CARSON	5480	B	RELIEF

RECEIVED DEC 2000 D.E.P. CENTRAL DISTRICT

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH AND YEAR OF:
NOV 2000

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

WA Restail 12/10/2000 — Signature and Date

WA RESTAIL B6839 — Name and Certificate Number (please type or print)

...ation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water ...
...that Treat Their Water
...WS Identification Number: 3481506
...ent Plant Name: ZELLWOOD STATION CO OP

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE CONTROL PERIOD: NOV 2000

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: X free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration in Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Sample Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.587	4.0	1.8	1	1.8	
2		.558	3.2	1.4	1	1.4	
3		.282	4.0	2.0	1	2.0	
4		.590	4.0	1.8	1	1.8	
5		.608	3.5	1.6	1	1.6	
6		.575	3.0	1.4	1	1.4	
7		.640	2.8	1.0	1	1.0	
8		.642	3.0	1.2	1	1.2	
9		.715	2.4	1.0	1	1.0	
10		.339	2.6	1.0	1	1.0	
11		.602	3.0	1.4	1	1.4	
12		.510	3.5	2.0	1	2.0	
13		.549	3.5	2.0	1	2.0	
14		.611	3.0	1.4	1	1.4	
15		.572	3.5	1.8	1	1.8	
16		.601	3.5	2.0	1	2.0	
17		.266	2.4	1.0	1	1.0	
18		.587	3.0	1.4	1	1.4	
19		.631	2.8	1.4	1	1.4	
20		.486	3.0	1.4	1	1.4	
21		.621	3.2	1.6	1	1.6	
22		.552	3.4	1.6	1	1.6	
23		.551	3.0	1.3	1	1.3	
24		.387	2.8	1.0	1	1.0	
25		.667	3.5	2.2	1	2.2	
26		.587	3.2	2.0	1	2.0	
27		.326	3.0	1.4	1	1.4	
28		.322	2.4	1.2	1	1.2	
29		.411	2.2	1.0	1	1.0	
30		.579	2.2	.8	1	.8	
31							
Total		15.915			30		
Avg.		.531					
Max.		.715					

Department of
Environmental Protection

RECEIVED JAN 2001 DEP CENTRAL DISTRICT

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF: DEC 2000

Water System Information

- System Name: ZELLWOOD STATION CO-OP PWS Identification No.: 3481506
- System Owner
  - Name: ZELLWOOD STATION CO-OP. Telephone No.: 407 8860000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD State: FL Zip Code: 32766
- System Type: community; non-transient non-community; non-community; consecutive
- No. of Service Connections at End of Month: 1115 Total Population Served at End of Month: 1250

Water Treatment Plant Information

- Treatment Plant
  - Name: ZELLWOOD STATION CO. OP. Telephone No.: 407 8860000
  - Address: 2126 SPILLMAN DR
  - City: ZELLWOOD FL State: FL Zip Code: 32798
- Permitted Maximum Day Capacity of Plant: 1.25 MGD
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 3-C
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
WA RESTAIL	6839	B	All

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
JR CARSON	5480	B	RELIEF

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF: DEC 2000

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

WA Restail 1/8/2001 — Signature and Date

WA RESTAIL B6839 — Name and Certificate Number (please type or print)

...ration Report for Public Water Systems that Use Ground Water and for Consecutive Public Water ...that Treat Their Water

...WS Identification Number: PWS 3481506

...ent Plant Name: ZELLWOOD STATION CO OP

...SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF DEC 2000

Type of Residual Disinfectant Maintained in Distribution System Served by Plant: X free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide

Summary of Daily Water Treatment Data for Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons) MGD	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System: Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1		.579	2.0	.8	1	.8	
2		.353	2.4	1.0	1	1.0	
3		.451	2.8	1.2	1	1.2	
4		.623	4.0	2.0	1	2.0	
5		.494	4.0	2.0	1	2.0	
6		.472	3.5	1.5	1	1.5	
7		.520	3.0	1.2	1	1.2	
8		.580	2.8	1.2	1	1.2	
9		.263	2.6	1.0	1	1.0	
10		.700	2.8	1.2	1	1.2	
11		.537	2.8	1.3	1	1.3	
12		.479	3.2	1.6	1	1.6	
13		.302	3.4	1.6	1	1.6	
14		.343	4.0	1.8	1	1.8	
15		.334	4.0	2.0	1	2.0	
16		.240	2.8	1.6	1	1.6	
17		.479	3.0	1.6	1	1.6	
18		.422	3.5	2.0	1	2.0	
19		.291	4.0	2.2	1	2.2	
20		.370	3.8	1.8	1	1.8	
21		.330	2.6	1.3	1	1.3	
22		.562	4.0	1.8	1	1.8	
23		.388	3.5	1.8	1	1.8	
24		.308	3.0	1.3	1	1.3	
25		.384	2.8	1.2	1	1.2	
26		.496	3.0	1.4	1	1.4	
27		.362	2.4	1.0	1	1.0	
28		.536	2.0	.8	1	.8	
29		.401	2.0	.8	1	.8	
30		.400	2.2	1.0	1	1.0	
31		.745	2.8	1.2	1	1.2	
Total		13.689			31		
Avg.		.442					
Max.		.745					

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART B

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

RECEIVED FEB 99 D.E.P. CENTRAL DISTRICT

PERMITTEE NAME:	Zellwood Station Co-Op, Inc.	PERMIT NUMBER:	FLA010865
MAILING ADDRESS:	2126 Spillman Drive Zellwood, FL 32798-9799	MONITORING PERIOD From:	JAN 1 1999 To: JAN
		LIMIT:	Final
		CLASS SIZE:	N/A
		REPORT:	Monthly
		GROUP:	Domestic
FACILITY:	Zellwood Station MHP WWTP	FACILITY ID:	FLA010865
LOCATION:	2126 Spillman Drive Zellwood, FL	GMS ID NO.:	3048F01438
		DISCHARGE POINT NUMBER:	R001
		PLANT SIZE/TREATMENT TYPE:	IIIC
		WAFR SITE NO:	[illegible]
		GMS TEST SITE NO:	[illegible]
COUNTY:	Orange		

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
	Sample Measurement	.182	.191	MGD						7/7	FLOWMETER
STORET No. 50050 Y Mon.Site No. EFF-1	Permit Measurement	0.300 (Mo.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement				6.8					2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement				4.1	6.8				2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				6.8					2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				4.1	6.0				2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement				6.7	7.0				7/7	GRAB
STORET No. 00400 Y Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Day/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W A RESTALL VTS. MGR	W A Restall VTS mgr	8860000	2/10/99

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEP [illegible] 0), 29.

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865

Facility: Zellwood Station MHP WWTF

Three month Average Daily Flow: .192

Daily Flow % of Permitted Capacity: 64%

Month/Year: JAN 1999

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	.199	.200	.205	.196	.187	.188	.192	.189	.191	.196	.194	.190	.187	.189	.196	.188	.192	.190	.192	.190	.190	.188	.187	.192	.192	.189	.191	.196	.184	.182
CBOD5 (mg/L), EFA-1														1.4											1.8					
CBOD5 (mg/L), INF-1														187											210					
TSS (mg/L), EFA-1														2.7											6.0					
TSS (mg/L), INF-1														159											188					
Minimum pH (std. units), EFA-1	7.0	6.9	6.8	6.9	7.0	6.9	7.0	6.8	6.9	7.0	7.0	6.9	7.0	6.8	6.8	6.7	6.8	6.9	7.0	6.9	6.8	7.0	6.8	6.9	7.0	6.9	6.7	6.7	6.8	6.8
Maximum pH (std. units), EFA-1	7.0	6.9	6.8	6.9	7.0	6.9	7.0	6.8	6.9	7.0	7.0	6.9	7.0	6.8	6.8	6.7	6.8	6.9	7.0	6.9	6.8	7.0	6.8	6.9	7.0	6.9	6.7	6.7	6.8	6.8
Fecal Coliform Bacteria (#/100 mL), EFA-1														1CL											1CL					
TRC (For Disinfection) (mg/L), EFA-1	2.5	3.5	5.0	5.0	3.5	3.0	4.0	5.0	5.0	3.0	3.5	5.0	3.5	3.0	4.0	5.0	5.0	5.0	5.0	5.0	3.5	2.8	4.0	3.5	4.0	5.0	3.0	3.5	5.0	4.0
Nitrate (as N) (mg/L), EFA-1																									1.2					

Plant Staffing:

Day Shift Operator	Class A	Certificate No. 7322	Name:	W. A. RESTALL
Evening Shift Operator	Class C	Certificate No 9407	Name:	D. LAND
Night Shift Operator	Class	Certificate No.	Name:	
Lead Operator	Class	Certificate No.	Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EVP - PERC

Limited Wet Weather Discharge Activated: Yes____ No____ Not Applicable X If yes, cumulative days of wet weather discharge____

*Attach additional sheets necessary to list all certified operators necessary for required operations

DEPARTMENT OF ENVIRONMENTAL PROTI ION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: FEB 1 1999 To: FEB 28 1999
LIMIT: Final
REPORT: Monthly
CLASS SIZE: N/A
GROUP: Domestic

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

FACILITY ID: FLA010865
GMS ID NO.: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC

WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12578

COUNTY: Orange

ENTERED DEC 06 1999

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.185	.191	MGD						CONT.	FLOWMETER
STORET No. 50050 Y Mon.Site No. EFA-1	Permit Measurement	0.300 (Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement				2.1			MGL		2/28	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (Avg.)			mg/L		Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement				12.0	18.0		MGL		2/28	8HR COMP
STORET No. 80082 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				6.7			MGL		2/28	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				18.0	29.0		MGL		2/28	8HR COMP
STORET No. 00530 1 Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.0		SU		7/7	GRAB
STORET No. 00406 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Wm PESTAIL UTS-MGR	Wm Pestail UTS Mgr	886 0000	3/5/99

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF

PERMIT NUMBER: FLA010865

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1u			100mL		2/28	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				200 (Art.Avg.)			#/100mL		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1u	1u		100mL		2/28	GRAB
STORET No. 31615 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max.)		#/100mL		Every Two Weeks	Grab
TRC for disinfection	Sample Measurement				2.0			MGL		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				1.3			MGL		1/28	8HR COMP
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour F/C
$CBOD_5$	Sample Measurement				237			MGL		2/28	8HR COMP
STORET No. 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour F/C
TSS	Sample Measurement				234			MGL		2/28	8HR COMP
STORET No. 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour F/C
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

ermit Number: FLA010865
Month/Year: FEB 1999

Facility: Zellwood Station MHP WWTF

Three-month Average Daily Flow: .185 MGD
Daily Flow % of Permitted Capacity: 68 %

Days of the Months / Parameter/Unit/Monitoring Location Site Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Flow (mgd), EFF-1	.186	.188	.185	.180	.191	.188	.192	.190	.188	.186	.188	.189	.186	.185	.188	.191	.192	.195	.195	.183	.196	.195	.198	.199	.198	.191	.191	.198		
CBOD5 (mg/L), EFA-1									18.0													6.1								
CBOD5 (mg/L), INF-1									190													284								
TSS (mg/L), EFA-1									29.0													7.0								
TSS (mg/L), INF-1									222													245								
Minimum pH (std. units), EFA-1	7.0	6.9	6.9	7.0	6.9	6.8	6.9	6.8	6.7	6.9	7.0	7.0	7.0	6.8	6.9	7.0	6.8	6.9	7.0	7.0	6.9	6.9	6.8	6.8	7.0	7.0	6.9	6.9		
Maximum pH (std. units), EFA-1	7.0	6.9	6.9	7.0	6.9	6.8	6.9	6.8	6.7	6.9	7.0	7.0	7.0	6.8	6.9	7.0	6.8	6.9	7.0	7.0	6.9	6.9	6.8	6.8	7.0	7.0	6.9	6.9		
Fecal Coliform Bacteria (#/100 mL), EFA-1									14													14								
TRC (For Disinfection) (mg/L), EFA-1	2.5	3.8	3.5	3.0	5.0	4.8	3.0	5.0	5.0	3.0	3.5	3.0	3.0	4.5	5.0	3.0	3.0	5.0	3.0	2.5	2.8	2.5	2.0	2.2	2.0	2.2	2.4	4.0		
Nitrate (as N) (mg/L), EFA-1																						1.3								

Plan Staffing:

Day Shift Operator	Class A	Certificate No.	7322	Name:	W A RESTALL
Evening Shift Operator	Class C	Certificate No.	9407	Name:	D LANDIS
Night Shift Operator	Class	Certificate No.		Name:	
Lead Operator	Class	Certificate No.		Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EVIP - PERC
Limited Wet Weather Discharge Activated: Yes____ No____ Not Applicable X If yes, cumulative days of wet weather discharge: NA
*Attach additional sheets necessary to list all certified operators necessary for required operations.

Tri-Tech Analytical
Laboratories, Inc.

P.O. Box 140966 • Orlando, FL 32814-0966 • (407) 275-8463
See us on the web at : http://www.tri-techlabs.com

REPORT OF ANALYSIS

Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. WaRestall

Work Order # : 99-02-295
Date Received: 02/09/99
Date Reported: 02/17/99
TTA Contact : C.Young

Work ID : Zellwood Station
Total Samples: 2

SAMPLE ID	DATE COLLECTED	TEST CODE
1. Raw	02/09/99	CBOD Analysis TSS Analysis
2. Effluent	02/09/99	CBOD Analysis TSS Analysis Fecal Coliform

Respectfully Submitted,
Tri-Tech Laboratories, Inc.

Linda Trytek
Laboratory Director

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!

DHRS #83359 & #E83294
DEP #900405G
AIHA # 169077

RECEIVED FEb 2 6 1999

REPORT OF ANALYSIS

RESULTS BY SAMPLES

Tri-Tech Laboratories, Inc. Work Order #: 99-02-295
Date Received : 02/09/99

Date Collected: 02/09/99 Matrix : Water
Sample ID : Raw Sample # : 1

TEST PARAMETER	RESULTS	UNITS
CBOD	190 A	mg/L
TSS	222	mg/L

Date Collected: 02/09/99 Matrix : Water
Sample ID : Effluent Sample # : 2

TEST PARAMETER	RESULTS	UNITS
CBOD	18.0 A	mg/L
TSS	29.0	mg/L
*Fecal	1 U	cfu's/100mls.

*Date & Time Of Setup: 02/09/99 5:15pm
*Date & Time Read....: 02/10/99 5:30pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

RECEIVED FEB 2 6 1999

QUALITY CONTROL PAGE

PARAMETER	METHOD #	%REC	%RSD	DATE & TIME	ANALYST
				SETUP	
CBOD	SM 5210 B	99	0.0	02/10/99 3:30p	CC
				READ	
				02/15/99 10:00a	CC
TSS	EPA 160.2	100	0.2	02/10/99 -------	CC
FECAL	SM 9222 D	---	---	02/09/99 5:15p	MS/RS

Reviewed By: Tamara Tridico
Title : Quality Control Director

FINAL REPORT

Tri-Tech Analytical
Laboratories, Inc.

RECEIVED MAR 5 1999

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REPORT OF ANALYSIS

Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. WaRestall

Work Order # : 99-02-775
Date Received: 02/22/99
Date Reported: 03/02/99
TTA Contact : C.Young

Work ID : Zellwood Station
Total Samples: 2

SAMPLE ID	DATE COLLECTED	TEST CODE
1. Raw	02/22/99	CBOD Analysis TSS Analysis
2. Effluent	02/22/99	CBOD Analysis TSS Analysis Fecal Coliform Nitrate Analysis

Respectfully Submitted,
Tri-Tech Laboratories, Inc.

Linda Trytek
Laboratory Director

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!

DHRS #83359 & #E83294
DEP #900405G
AIHA # 169077

RECEIVED MAR 5 1999

REPORT OF ANALYSIS

RESULTS BY SAMPLES

Tri-Tech Laboratories, Inc. Work Order #: 99-02-775
Date Received : 02/22/99

Date Collected: 02/22/99 Matrix : Water
Sample ID : Raw Sample # : 1

TEST PARAMETER	RESULTS	UNITS
CBOD	284 A	mg/L
TSS	245	mg/L

Date Collected: 02/22/99 Matrix : Water
Sample ID : Effluent Sample # : 2

TEST PARAMETER	RESULTS	UNITS
CBOD	6.1 A	mg/L
TSS	7.0	mg/L
*Fecal	1 U	cfu's/100mls.
Nitrate	1.3	mg/L

*Date & Time Of Setup: 02/22/99 4:15pm
*Date & Time Read....: 02/23/99 3:30pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

RECEIVED MAR 5 1999

QUALITY CONTROL PAGE

PARAMETER	METHOD #	%REC	%RSD	DATE & TIME	ANALYST
				SETUP	
CBOD	SM 5210 B	99 -	1.5	02/24/99 1:45p	CC
				READ	
				03/01/99 11:30a	CC
TSS	EPA 160.2	100	0.6	02/24/99 -------	CC
FECAL	SM 9222 D	---	---	02/22/99 4:15p	RS
NITRATE	EPA 353.3	102	0.0	02/23/99 10a	HD

Reviewed By: Tamara Tridico
Title : Quality Control Director

FINAL REPORT

DEPARTMENT OF ENVIRONMENTAL PROTE 'ON DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

RECEIVED DEP CENTRAL DISTRICT APR 1999

PERMITTEE NAME:	Zellwood Station Co-Op, Inc.	PERMIT NUMBER:	FLA010865		
MAILING ADDRESS:	2126 Spillman Drive Zellwood, FL 32798-9799	MONITORING PERIOD From:	3/1/99	To:	3/31/99
		LIMIT:	Final	REPORT:	Monthly
		CLASS SIZE:	N/A	GROUP:	Domestic
FACILITY:	Zellwood Station MHP WWT	FACILITY ID:	FLA010865	WAFR SITE NO.:	5843
LOCATION:	2126 Spillman Drive Zellwood, FL	GMS ID NO.:	3048P01438	GMS TEST SITE NO.:	3048X12578
		DISCHARGE POINT NUMBER:	R001		
		PLANT SIZE/TREATMENT TYPE:	IIIC		
COUNTY:	Orange				

ENTERED DEC 06 1999

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.180	.188	MGD						7/7	FLOWMETER
STORET No. 50050 Y Mon.Site No. EFF-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement				2.5					2/30	8 COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement				10.5	15.0				2/30	8 COMP
STORET No. 80082 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				7.0					2/30	8 COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				11.7	16.0				2/30	8 COMP
STORET No. 00530 1 Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.1				7/7	6 RAN
STORET No. 00406 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W.A. RESTALL UTS. MGR.		407 886 0000	4/12/99

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITO' NG REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: 001 | WATER SITE No.: 5843

RECEIVED D.E.P. CENTRAL DISTRICT FEB 1999

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U			100 ML		2/30	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				200 (Air Avg.)			#/100ml		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1U	1U		100 ML		2/30	GRAB
STORET No. 31615 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max)		#/100ml		Every Two Weeks	Grab
TRC for disinfection	Sample Measurement				2.5			MG/L		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				1.2			MG/L		1/30	8HRCOMP
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
$CBOD_5$	Sample Measurement				199			MGL		2/30	8HRCOMP
STORET No. 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				173			MGL		2/30	8HRCOMP
STORET No. 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U			100mL		2/30	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				200 (Ari Avg)			#/100mL		Every Two Weeks	Grab
ecal Coliform Bacteria	Sample Measurement				1U	1U		100ml		2/30	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max)		#/100mL		Every Two Weeks	Grab
TRC for disinfection	Sample Measurement				2.0			MLL		2/2	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				2.0			MLL		1/30	8HR COMP
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
$CBOD_5$	Sample Measurement				223			MLL		2/30	8HR COMP
STORET No. 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				165			MLL		2/30	8HR COMP
STORET No. 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865

Facility: Zellwood Station MHP WWTF

Three-month Average Daily Flow: .184

Daily Flow % of Permitted Capacity: 23%

Month/Year:

Days of the Months / Parameter/Unit/Monitoring Location Site Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Flow (mgd), EFF-1	199	190	186	182	178	183	190	188	190	185	198	184	190	186	185	182	185	190	187	191	190	192	187	186	185	183	188	185	170	196
$CBOD_5$ (mg/L), EFA-1				6.1																				15.0						
$CBOD_5$ (mg/L), INF-1				283																				162						
(mg/L), EFA-1				2.3																				16.0						
TSS (mg/L), INF-1				223																				106						
Minimum pH (std. units), EFA-1	6.9	7.0	6.8	6.7	6.8	6.3	7.0	6.9	7.0	6.8	6.9	7.0	6.8	6.9	6.9	7.0	6.7	6.8	6.7	6.8	6.8	7.0	7.0	7.0	7.0	7.1	7.0	7.0	7.9	6.9
Maximum pH (std. units), EFA-1	6.9	7.0	6.8	6.7	6.8	6.8	7.0	6.9	7.0	6.8	6.9	7.0	6.8	6.9	6.9	7.0	6.9	6.8	6.9	6.8	6.8	7.0	7.0	7.0	7.0	7.1	7.0	7.0	6.9	6.9
Fecal Coliform Bacteria (#/100 mL), EFA-1				14																				14						
TRC (For Disinfection) (mg/L), EFA-1	3.5	5.0	5.0	3.5	3.0	4.0	2.5	2.0	2.0	5.0	5.0	5.0	3.5	5.0	5.0	5.0	3.5	5.0	5.0	3.0	4.0	5.0	3.5	3.0	3.5	3.0	3.5	4.0	3.0	3.5
Nitrate (as N) (mg/L), EFA-1																								2.0						

Plan Staffing:

	Class	Certificate No.	Name:
Day Shift Operator	A	7322	W. A. RESTAIN
Evening Shift Operator	C	9407	D. LAND
Night Shift Operator			
Lead Operator			

Type of Effluent Disposal or Reclaimed Water Reuse: EVP - PERC

Limited Wet Weather Discharge Activated: Yes____ No____ Not Applicable X If yes, cumulative days of wet weather discharge:____

*Attach additional sheets necessary to list all certified operators necessary for required operations.

Tri-Tech Analytical
Laboratories, Inc.

RECEIVED MAR 16 1999

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REPORT OF ANALYSIS

Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. WaRestall

Work Order # : 99-03-186
Date Received: 03/04/99
Date Reported: 03/11/99
TTA Contact : J Focht

APR 1999 RECEIVED DEP CENTRAL DISTRICT

Work ID : Zellwood Station
Total Samples: 2

SAMPLE ID	DATE COLLECTED	TEST CODE
1. Raw	03/04/99	BOD Analysis TSS Analysis
2. Effluent	03/04/99	BOD Analysis TSS Analysis Fecal Coliform

Respectfully Submitted,
Tri-Tech Laboratories, Inc.

Linda Trytek
Laboratory Director

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DHRS #83359 & #E83294
DEP #900405G
AIHA # 169077

REPORT OF ANALYSIS

RESULTS BY SAMPLES

Tri-Tech Laboratories, Inc.
Date Received : 03/04/99

Work Order #: 99-03-186
Location :Zellwood Station

Date Collected: 03/04/99
Sample ID : Raw

Matrix : Water
Sample # : 1

TEST PARAMETER	RESULTS	UNITS
BOD	283 A	mg/L
TSS	223 A	mg/L

Date Collected: 03/04/99
Sample ID : Effluent

Matrix : Water
Sample # : 2

TEST PARAMETER	RESULTS	UNITS
BOD	6.1 A	mg/L
TSS	7.3	mg/L
*Fecal	1 U	cfu's/100mls.

*Date & Time Of Setup: 03/04/99 5:15pm
*Date & Time Read....: 03/05/99 5:00pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

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DISTRICT

QUALITY CONTROL PAGE

PARAMETER	METHOD #	%REC	%RSD	DATE & TIME	ANALYST
				SETUP	
BOD	EPA 405.1	99	2.3	03/05/99 11:00am	CC
				READ	
				03/10/99 11:00am	CC
TSS	EPA 160.2	100	1.7	03/05/99 -------	CC
FECAL	SM 9222 D	---	---	03/04/99 5:15pm	RS

Reviewed By: Tamara Tridico
Title : Quality Control Director

RECEIVED R 7 1999

Tri-Tech Analytical
Laboratories, Inc.

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APR 1999
RECEIVED
DEP CENTRAL
DISTRICT

REPORT OF ANALYSIS

Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. WaRestall

Work Order # : 99-03-1024
Date Received: 03/25/99
Date Reported: 04/01/99
TTA Contact : C.Young

Work ID : Zellwood Station
Total Samples: 2

SAMPLE ID	DATE COLLECTED	TEST CODE
1. Raw	03/25/99	CBOD Analysis TSS Analysis
2. Effluent	03/25/99	CBOD Analysis TSS Analysis Fecal Coliform Nitrate Analysis

Respectfully Submitted,
Tri-Tech Laboratories, Inc.

Linda Trytek
Laboratory Director

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DHRS #83359 & #E83294
DEP #900405G
AIHA # 169077

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APR 1999 RECEIVED DEP. CENTRAL DISTRICT

REPORT OF ANALYSIS

RESULTS BY SAMPLES

Tri-Tech Laboratories, Inc. Work Order #: 99-03-102
Date Received : 03/25/99

Date Collected: 03/25/99 2pm Matrix : Water
Sample ID : Raw Sample # : 1

TEST PARAMETER	RESULTS	UNITS
CBOD	162 A	mg/L
TSS	106	mg/L

Date Collected: 03/25/99 2pm Matrix : Water
Sample ID : Effluent Sample # : 2

TEST PARAMETER	RESULTS	UNITS
CBOD	15.0 A	mg/L
TSS	16.0	mg/L
*Fecal	1 U	cfu's/100mls.
Nitrate	2.0	mg/L

*Date & Time Of Setup: 03/25/99 5:00pm
*Date & Time Read....: 03/26/99 5:30pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

RECEIVED APR 7 1999

APR 1999 RECEIVED DEP CENTRAL DISTRICT

QUALITY CONTROL PAGE

PARAMETER	METHOD #	%REC	%RSD	DATE & TIME	ANALYST
				SETUP	
CBOD	SM 5210 B	100	2.5	03/26/99 -------	CC
				READ	
				03/31/99 -------	CC
TSS	EPA 160.2	100	1.2	03/26/99 -------	CC
FECAL	SM 9222 D	---	---	03/25/99 5p	MM/RS
NITRATE	EPA 353.3	102	0.0	03/26/99 2p	HD

Reviewed By: Tamara Tridico
Title : Quality Control Director

FINAL REPORT

DEPARTMENT OF ENVIRONMENTAL PROT ION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood , FL

COUNTY: Orange

RECEIVED MAY 1999 D.E.P. CENTRAL DISTRICT

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: APR 1 1999 To: APR 30 1999
LIMIT: Final
CLASS SIZE: N/A

REPORT: Monthly
GROUP: Domestic

FACILITY ID: FLA010865
GMS ID NO.: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC

WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12578

ENTERED DEC 06 1999

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement		0.188	MGD					CONT.	FLOW METE	
STORET No. 50050 Y Mon.Site No. EFA-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
CBOD5	Sample Measurement				8.0			MGL		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				16.5	19.		MGL		2/30	8HR COMP
STORET No. 80082 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				8.8			MGL		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				18.	20.		MGL		2/30	8HR COMP.
STORET No. 00530 1 Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.2		S.U.		7/7	GRAB
STORET No. 00406 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W A RESTAIL UTS MGR	W A Restail	8860000	5/10/99

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF

PERMIT NUMBER: FLA010865

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U			100mL		2/30	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				200 (Air Avg.)			#/100mL		Every Two Weeks	Grab
al Coliform Bacteria	Sample Measurement				1U	1U				2/30	GRAB
STORET No. 31615 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max.)		#/100mL		Every Two Weeks	Grab
TRC for disinfection	Sample Measurement				2.0			100mL		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				1.9			mgL		1/30	8HRCOMP.
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour F/C
$CBOD_5$	Sample Measurement				207			mgL		2/30	8HRCOMP
STORET No. 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour F/C
TSS	Sample Measurement				219					2/30	8HRCOMP
STORET No. 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour F/C
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865 Facility: Zellwood Station MHP WWTF

Month/Year:

Three month Average Daily Flow: .189

Daily Flow % of Permitted Capacity: 63%

Days of the Months / Parameter/Unit/Monitoring Location Site Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Flow (mgd), EFF-1	.195	.192	.192	.199	.192	.190	.192	.191	.186	.190	.191	.192	.190	.189	.199	.191	.193	.190	.186	.184	.185	.186	.184	.184	.185	.190	.182	.181	.177	.176
BOD_5 (mg/L), EFA-1																			14							19				
BOD_5 (mg/L), INF-1																			165							248				
[illegible] (mg/L), EFA-1																			16							20				
TSS (mg/L), INF-1																			160							278				
Minimum pH (std. units), EFA-1	7.1	7.2	7.1	7.0	6.8	6.5	7.0	6.5	7.0	6.9	6.8	6.9	7.0	6.9	6.8	6.8	6.7	6.9	7.0	6.9	6.7	6.8	6.7	6.7	6.8	6.8	7.0	6.9	7.0	6.8
Maximum pH (std. units), EFA-1	7.1	7.2	7.1	7.0	6.8	6.9	7.0	6.9	7.0	6.5	6.8	6.9	7.0	6.9	6.8	6.8	6.7	6.9	7.0	6.9	6.7	6.8	6.7	6.7	6.8	6.8	7.0	6.9	7.0	6.8
Fecal Coliform Bacteria (#/100 mL), EFA-1																			12							12				
TRC (For Disinfection) (mg/L), EFA-1	2.8	2.0	3.0	2.5	3.5	5.0	4.5	5.0	3.0	3.5	3.0	2.5	2.0	2.5	3.0	2.8	3.8	2.5	3.0	5.2	5.0	4.5	4.0	4.0	5.0	5.0	5.0	4.0	3.5	4.0
Nitrate (as N) (mg/L), EFA-1																										1.9				

Plan Staffing:

Day Shift Operator	Class A	Certificate No. 7322	Name: W A RESTAIL
Evening Shift Operator	Class C	Certificate No. 9407	Name: D LAND
Night Shift Operator	Class	Certificate No.	Name:
Lead Operator	Class	Certificate No.	Name:

Type of Effluent Disposal or Reclaimed Water Reuse: EVP PERC

Limited Wet Weather Discharge Activated: Yes ___ No ___ Not Applicable X If yes, cumulative days of wet weather discharge: -0-

*Attach additional sheets necessary to list all certified operators necessary for required operations.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

JUN 1999 RECEIVED D.E.P. CENTRAL DISTRICT

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: MAY 1 1999 To: MAY 31 1999
LIMIT: Final
CLASS SIZE: N/A

REPORT: Monthly
GROUP: Domestic

FACILITY: Zellwood Station MHP WWTP
LOCATION: 2126 Spillman Drive
Zellwood, FL

FACILITY ID: FLA010865
GMS ID NO.: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC

WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12578

COUNTY: Orange

ENTERED DEC 06 1999

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.182	.179	MGD						7/7	FLOW METER
STORET No. 50050 Y Mon.Site No. EFF-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement				8.5			MGL		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement				6.2	7.2		MGL		2/30	8HRCOMP
STORET No. 80082 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.6			MGL		2/30	8HOUR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement				9.9	14.0		MGL		2/30	8HRCOMP
STORET No. 00530 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.1		S.U.		7/7	GRAB
STORET No. 00406 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
WA RESTALL UTS. MGR.	Wa Restall uts MGR	886 0000	6/13/99

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITO. .G REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1 U			100 mL		2/30	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1 U	1 U		100 mL		2/30	GRAB
STORET No. 31615 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max.)		#/100mL		Every Two Weeks	Grab
C for disinfection	Sample Measurement				2.0			MGL		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		7 Days/Week	Grab
Nitrate (as N)	Sample Measurement				5.4			MGL		1/30	8HRCOMP
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
$CBOD_5$	Sample Measurement				210			MGL		2/30	8HRCOMP
STORET No. 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				199			MGL		2/30	8HRCOMP
STORET No. 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865

Facility: Zellwood Station MHP WWTF

Three-month Average Daily Flow: .185 MGD

Daily Flow % of Permitted Capacity: 61%

Month/Year:

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	179	189	182	172	180	181	178	180	179	180	182	180	178	177	177	180	182	180	181	184	183	181	177	176	177	175	176	175	175	180
$CBOD_5$ (mg/L), EFA-1											7.2									5.1										
$CBOD_5$ (mg/L), INF-1											168									252										
TSS (mg/L), EFA-1											14.0									5.7										
TSS (mg/L), INF-1											98									306										
Minimum pH (std. units), EFA-1	6.8	7.0	6.9	7.0	6.8	6.9	6.8	7.0	6.8	6.9	7.0	6.9	7.0	6.9	6.8	7.0	7.0	7.0	7.0	6.9	6.8	6.9	7.0	6.8	6.9	6.8	6.9	6.8	6.9	6.7
Maximum pH (std. units), EFA-1	6.8	7.0	6.9	7.0	6.8	6.9	6.8	7.0	6.8	6.9	7.0	6.9	7.0	6.9	6.8	7.0	7.1	7.0	7.0	6.9	6.8	6.9	7.0	6.8	6.9	6.8	6.9	6.8	6.9	6.7
Fecal Coliform Bacteria (#/100 mL), EFA-1											14									14										
TRC (For Disinfection) (mg/L), EFA-1	4.0	2.5	4.0	3.0	5.0	4.0	4.0	3.8	4.0	3.5	3.0	5.0	3.5	3.5	4.5	3.0	2.0	2.5	5.0	3.5	3.5	3.0	2.5	5.0	4.0	4.0	3.5	4.0	5.0	5.0
Nitrate (as N) (mg/L), EFA-1																				5.4										

Plan Staffing:

	Class	Certificate No.	Name:
Day Shift Operator	A	7322	W. A. RESTAIL
Evening Shift Operator	C	9407	D. LAND
Night Shift Operator			
Lead Operator			

Type of Effluent Disposal or Reclaimed Water Reuse: EUP - PERC

Limited Wet Weather Discharge Activated: Yes___ No___ Not Applicable X If yes, cumulative days of wet weather discharge: N. A.

*Attach additional sheets necessary to list all certified operators necessary for required operations.

Tri-Tech Analytical
Laboratories, Inc.

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RECEIVED MAY 2 2 1999

REPORT OF ANALYSIS

Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. WaRestall

Work Order # : 99-05-337
Date Received: 05/11/99
Date Reported: 05/18/99
TTA Contact : J Focht

RECEIVED
JUN 1999
D.E.P. CENTRAL DISTRICT

Work ID : Zellwood Station
Total Samples: 2

SAMPLE ID	DATE COLLECTED	TEST CODE
1. Raw	05/11/99	CBOD Analysis TSS Analysis
2. Effluent	05/11/99	CBOD Analysis TSS Analysis Fecal Coliform

Respectfully Submitted,
Tri-Tech Laboratories, Inc.

Linda Trytek
Laboratory Director

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DHRS #83359 & #E83294
DEP #900405G
AIHA # 169077

RECEIVED MAY 2 2 1999

RECEIVED JUN 1999 D.E.P. CENTRAL DISTRICT

REPORT OF ANALYSIS

RESULTS BY SAMPLES

Tri-Tech Laboratories, Inc.
Date Received : 05/11/99

Work Order #: 99-05-
Location :Zellwood Station

Date Collected: 05/11/99 2:00pm
Sample ID : Raw

Matrix : Water
Sample # : 1

TEST PARAMETER	RESULTS	UNITS
CBOD	168 A	mg/L
TSS	98.0	mg/L

Date Collected: 05/11/99 2:00pm
Sample ID : Effluent

Matrix : Water
Sample # : 2

TEST PARAMETER	RESULTS	UNITS
CBOD	7.2 A	mg/L
TSS	14.0	mg/L
*Fecal	1 U	cfu's/100mls.

*Date & Time Of Setup: 05/11/99 5:15pm
*Date & Time Read....: 05/12/99 4:00pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

RECEIVED MAY 2 2 1999

RECEIVED JUN 1 1999 D.E.P. CENTRAL DISTRICT

QUALITY CONTROL PAGE

PARAMETER	METHOD #	%REC	%RSD	DATE & TIME	ANALYST
				SETUP	
CBOD	EPA 405.1	100	1.3	05/12/99 11:00am-5pm	CC
				READ	
				05/17/99 11:30am	CC
TSS	EPA 160.2	102.5	1.3	05/12/99 -------	CC
FECAL	SM 9222 D	---	---	05/11/99 5:15pm	MM/RS

Reviewed By: Tamara Tridico
Title : Quality Control Director

Tri-Tech Analytical
Laboratories, Inc.

RECEIVED JUN 4 1999

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REPORT OF ANALYSIS

Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. WaRestall

Work Order # : 99-05-811
Date Received: 05/25/99
Date Reported: 06/01/99
TTA Contact : J.Focht

Work ID : Zellwood Station
Total Samples: 2

SAMPLE ID	DATE COLLECTED	TEST CODE
1. Raw	05/25/99	CBOD Analysis TSS Analysis
2. Effluent	05/25/99	CBOD Analysis TSS Analysis Nitrate Analysis Fecal Coliform

Respectfully Submitted,
Tri-Tech Laboratories, Inc.

Linda Trytek
Laboratory Director

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DHRS #83359 & #E83294
DEP #900405G
AIHA # 169077

RECEIVED JUN 4 1999

RECEIVED JUN 1999 D.E.P. CENTRAL DISTRICT

REPORT OF ANALYSIS
RESULTS BY SAMPLES

Tri-Tech Laboratories, Inc. Work Order #: 99-05-811
Date Received : 05/25/99

Date Collected: 05/25/99 Matrix : Water
Sample ID : Raw Sample # : 1

TEST PARAMETER	RESULTS	UNITS
CBOD	252 A	mg/L
TSS	306	mg/L

Date Collected: 05/25/99 Matrix : Water
Sample ID : Effluent Sample # : 2

TEST PARAMETER	RESULTS	UNITS
CBOD	5.1 A	mg/L
TSS	5.7	mg/L
Nitrate	5.4	mg/L
*Fecal	1 U	cfu's/100mls.

*Date & Time Of Setup: 05/25/99 2:00pm
*Date & Time Read....: 05/26/99 4:00pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

RECEIVED JUN 4 1999

QUALITY CONTROL PAGE

PARAMETER	METHOD #	%REC	%RSD	DATE & TIME	ANALYST
				SETUP	
CBOD	EPA 405.1	99	1.6	05/26/99 11am-5pm	CC
				READ	
				05/31/99 11:30am	CC
TSS	EPA 160.2	102.5	0.2	05/26/99 -------	CC
NITRATE	EPA 353.3	102.9	0.0*	05/26/99 8:30am	HD
FECAL	SM 9222 D	---	---	05/25/99 2:00pm	RS/MM

*Calculated in RPD.

Reviewed By: Tamara Tridico
Title : Quality Control Director

FINAL REPORT

REPORT OF ANALYSIS

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: JUNE 1 1999 To JUNE 30 1999
LIMIT: Final
REPORT: Monthly
CLASS SIZE: N/A
GROUP: Domestic

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

FACILITY ID: FLA010865
GMS ID NO.: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC

WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12578

COUNTY: Orange

RECEIVED JUL 1999 DEP CENTRAL DISTRICT

ENTERED NOV 09 1999

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.180	.162	MGD						7/7	FLOWMETER
STORET No. 50050 Y Mon.Site No. EFF-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement				8.0			MGL		2/30	8HRCOM.
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement				11.6	17.6		MGL		2/30	8HRCOM
STORET No. 80082 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				8.9			MGL		2/30	8HRCOM.
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				11.8	19.3		MGL		2/30	8HRCOM
STORET No. 00530 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement				6.7	7.1		SU		7/7	GRAB
STORET No. 00406 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
WA RESTALL UTS. MGR.	W A Restall uts mgr	407886 0000	7/12/9

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITOR REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1 U			100mL		2/30	GRAB
STORET No. 31613 Y Mon.Site No. EFA-1	Permit Measurement				200 (Ari.Avg.)			#/100mL		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1 U	1 U		100mL		2/30	GRAB
STORET No. 31613 Y Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Cl2 for disinfection	Sample Measurement				2.0			MGL		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				9.3			MGL		1/30	8HR.COMP
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
$CBOD_5$	Sample Measurement				231			MGL		2/30	8HR.COMP
STORET No. 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				203			MGL		2/30	8HR.COMP
STORET No. 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865

Month/Year: JUNE 1999

Facility: Zellwood Station MHP WWTF

Three-month Average Daily Flow: .176 MGD

Daily Flow % of Permitted Capacity: 54 %

Days of the Months / Parameter/Unit/Monitoring Location Site Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Flow (mgd), EFF-1	189	180	170	177	177	190	168	166	165	159	167	169	166	166	160	154	152	153	158	153	150	151	150	150	151	150	151	153	152	149
CBOD$_5$ (mg/L), EFA-1							17.6								5.5															
CBOD$_5$ (mg/L), INF-1							177								285															
TSS (mg/L), EFA-1							19.5								4.3															
TSS (mg/L), INF-1							153								252															
Minimum pH (std. units), EFA-1	6.8	6.8	7.0	6.9	6.8	6.7	6.8	6.9	7.0	6.7	6.8	6.8	6.7	6.8	6.9	6.9	6.8	6.9	7.1	7.0	6.8	6.9	7.0	7.0	7.0	7.0	6.9	6.8	6.7	6.8
Maximum pH (std. units), EFA-1	6.8	6.9	7.0	6.9	6.8	6.7	6.9	6.9	7.0	6.7	6.8	6.8	6.7	6.8	6.9	6.9	6.8	6.9	7.1	7.0	6.8	6.9	7.0	7.0	7.0	7.0	6.7	6.8	6.7	6.8
Fecal Coliform Bacteria (#/100 mL), EFA-1							<1								<1															
TRC (For Disinfection) (mg/L), EFA-1	5.0	5.0	3.5	4.0	4.0	5.0	3.0	3.0	3.5	4.5	4.5	4.5	5.0	2.0	2.5	3.0	3.5	2.0	3.0	5.0	5.0	5.0	3.5	3.0	3.5	3.0	3.5	5.0	5.0	4.5
Nitrate (as N) (mg/L), EFA-1															9.3															

Plan Staffing:

Day Shift Operator	Class A	Certificate No.	7322	Name:	W A RESTALL
Evening Shift Operator	Class C	Certificate No.	9407	Name:	D LAND
Night Shift Operator	Class	Certificate No.		Name:	
Lead Operator	Class	Certificate No.		Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EUP - PERC

Limited Wet Weather Discharge Activated: Yes____ No ✓ Not Applicable____ If yes, cumulative days of wet weather discharge: -0-

*Attach additional sheets necessary to list all certified operators necessary for required operations.

RECEIVED JUN - 4 1999

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REPORT OF ANALYSIS

Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. WaRestall

Work Order # : 99-06-224
Date Received: 06/07/99
Date Reported: 06/15/99
TTA Contact : C.Young

Work ID : Zellwood Station
Total Samples: 2

SAMPLE ID	DATE COLLECTED	TEST CODE
1. Raw	06/07/99	CBOD Analysis TSS Analysis
2. Effluent	06/07/99	CBOD Analysis TSS Analysis Fecal Coliform

Respectfully Submitted,
Tri-Tech Laboratories, Inc.

Linda Trytek
Laboratory Director

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!

DHRS #83359 & #E83294
DEP #900405G
AIHA # 169077

RECEIVED JUN 2 4 1999

REPORT OF ANALYSIS

RESULTS BY SAMPLES

Tri-Tech Laboratories, Inc. Work Order #: 99-06-224
Date Received : 06/07/99

Date Collected: 06/07/99 10am Matrix : Water
Sample ID : Raw Sample # : 1

TEST PARAMETER	RESULTS	UNITS
CBOD	177 A	mg/L
TSS	153	mg/L

Date Collected: 06/07/99 10am Matrix : Water
Sample ID : Effluent Sample # : 2

TEST PARAMETER	RESULTS	UNITS
CBOD	17.6 A	mg/L
TSS	19.3	mg/L
*Fecal	1 U	cfu's/100mls.

*Date & Time Of Setup: 06/07/99 5:10pm
*Date & Time Read....: 06/08/99 4:20pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

QUALITY CONTROL PAGE

PARAMETER	METHOD #	%REC	%RSD	DATE & TIME	ANALYST
				SETUP	
CBOD	SM 5210 B	97	0.0	06/09/99 10:30a-5p	CC
				READ	
				06/14/99 11a	CC
TSS	EPA 160.2	102.5	1.3	06/09/99 -------	CC
FECAL	SM 9222 D	---	---	06/07/99 5:10p	RS

Reviewed By: Tamara Tridico
Title : Quality Control Director

FINAL REPORT

Tri-Tech Analytical
Laboratories, Inc.

RECEIVED JUL 1 1999

P.O. Box 140966 • Orlando, FL 32814-0966 • (407) 275-8463
See us on the web at : http://www.tri-techlabs.com

REPORT OF ANALYSIS

Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. WaRestall

Work Order # : 99-06-545
Date Received: 06/15/99
Date Reported: 06/22/99
TTA Contact : J.Focht

Work ID : Zellwood Station
Total Samples: 2

SAMPLE ID	DATE COLLECTED	TEST CODE
1. Raw	06/15/99	CBOD Analysis TSS Analysis
2. Effluent	06/15/99	CBOD Analysis TSS Analysis Nitrate Analysis Fecal Coliform

Respectfully Submitted,
Tri-Tech Laboratories, Inc.

Linda Trytek
Laboratory Director

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DHRS #83359 & #E83294
DEP #900405G
AIHA # 169077

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REPORT OF ANALYSIS
RESULTS BY SAMPLES

Tri-Tech Laboratories, Inc. Work Order #: 99-06-545
Date Received : 06/15/99

Date Collected: 06/15/99 1:00pm Matrix : Water
Sample ID : Raw Sample # : 1

TEST PARAMETER	RESULTS	UNITS
CBOD	285 A	mg/L
TSS	252	mg/L

Date Collected: 06/15/99 1:00pm Matrix : Water
Sample ID : Effluent Sample # : 2

TEST PARAMETER	RESULTS	UNITS
CBOD	5.5 A	mg/L
TSS	4.3	mg/L
Nitrate	9.3	mg/L
*Fecal	1 U	cfu's/100mls.

*Date & Time Of Setup: 06/15/99 4:40pm
*Date & Time Read....: 06/16/99 4:15pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

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QUALITY CONTROL PAGE

PARAMETER	METHOD #	%REC	%RSD	DATE & TIME		ANALYST
				SETUP		
CBOD	EPA 405.1	102	2.3	06/16/99	10:30am-5pm	CC
				READ		
				06/21/99	11:00am	CC
TSS	EPA 160.2	97.5	0.9	06/16/99	-------	CC
NITRATE	EPA 353.3	104.3	0.0*	06/17/99	8:30am	HD
FECAL	SM 9222 D	---	---	06/15/99	4:40pm	RS/MM

*Calculated in RPD.

Reviewed By: Tamara Tridico
Title : Quality Control Director

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

COUNTY: Orange

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: 7/1/99 To: 7/31/99
LIMIT: Final
CLASS SIZE: N/A

FACILITY ID: FLA010865
GMS ID NO.: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC

REPORT: Monthly
GROUP: Domestic

WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12578

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ENTERED NOV 09 1999

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.179	.148	MGD						7/7	FLOW METER
STORET No. 50050 Y Mon.Site No. EFT-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement				9.1			MGL		2/30	8HR COM
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement				10.9	16.3		MGL		2/30	8HR COM
STORET No. 80082 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.7			MGL		2/30	8HR COM
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				10.8	19.0		MGL		2/30	8HR COM
STORET No. 00530 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.1		SU		7/7	GRAB
STORET No. 00406 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W A RESTALL UTS MGR	W A Restall uts mgr	886 0000	8/12/99

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITOR[illegible] REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF

PERMIT NUMBER: FLA010865

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 5841

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U			100 mL		2/30	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				200 (Mo.Avg.)			#/100mL		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1U	1U		100 mL		2/30	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max.)		#/100mL		Every Two Weeks	Grab
[illegible] for disinfection	Sample Measurement				2.0			mGL		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				.6			mGL		1/30	8HR Com.
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
$CBOD_5$	Sample Measurement				246			mGL		2/30	8HR Com.
STORET No. 80082 O Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				210			mGL		2/30	8HR Com
STORET No. 00530 O Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865

Month/Year:

Facility: Zellwood Station MHP WWTF

Three-month Average Daily Flow: .163 MGD

Daily Flow % of Permitted Capacity: 49%

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	148	150	151	159	160	150	149	145	150	147	150	149	144	143	150	141	139	140	148	146	145	148	147	150	148	148	150	148	151	148
CBOD5 (mg/L), EFA-1												5.4														16.3				
CBOD5 (mg/L), INF-1												232.														260.				
TSS (mg/L), EFA-1												2.7														19.				
TSS (mg/L), INF-1												268.														260.				
Minimum pH (std. units), EFA-1	6.8	6.8	6.9	7.0	6.9	7.0	6.9	7.0	6.9	6.8	7.0	6.9	7.0	7.0	6.8	6.7	6.8	6.7	6.8	6.9	7.0	7.0	6.9	6.9	7.0	7.0	6.9	6.9	7.0	7.0
Maximum pH (std. units), EFA-1	6.8	6.8	6.9	7.0	6.9	7.0	6.9	7.0	6.9	6.8	7.0	6.9	7.0	7.0	6.8	6.7	6.8	6.7	6.8	6.9	7.0	7.0	6.9	6.9	7.0	7.0	6.9	6.9	7.0	7.0
Fecal Coliform Bacteria (#/100 mL), EFA-1																											14			
TRC (For Disinfection) (mg/L), EFA-1	5.0	4.6	3.5	3.0	5.0	3.5	2.5	2.0	3.5	3.0	2.5	2.7	2.0	2.5	5.0	3.5	5.0	5.0	3.5	2.0	2.0	2.8	3.5	3.0	3.6	3.0	5.0	3.5	4.0	3.0
Nitrate (as N) (mg/L), EFA-1																											.6			

Plan Staffing:

Day Shift Operator	Class A	Certificate No. 7322	Name:	W. A. RESTAIN
Evening Shift Operator	Class	Certificate No.	Name:	
Night Shift Operator	Class	Certificate No.	Name:	
Lead Operator	Class	Certificate No.	Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EVP - PERC

Limited Wet Weather Discharge Activated: Yes ___ No ✓ Not Applicable ___ If yes, cumulative days of wet weather discharge: -0-

*Attach additional sheets necessary to list all certified operators necessary for required operations.

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Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

RECEIVED AUG 1999 D.E.P. CENTRAL DISTRICT

PROJECT NAME:
Waste Water Monthly Analysis

TTA Contact: J Focht

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT UNITS	DATE/TIME ANALYZED	TECH
07/12/99	99-07-309 -1	07/12/99	CBOD TSS Influent	5210 B 160.2	232 A mg/L 269 mg/L	* 07/14/99	CC CC
07/12/99	99-07-309 -1	07/12/99	CBOD TSS Fecal Effluent	5210 B 160.2 SM 9222 D	5.4 A mg/L 2.7 mg/L 1 U cuf's	* 07/14/99 07/12/99 4:50pm	CC CC RS/MM

*CBOD Date & Time Setup: 07/14/99 11:30am-5pm
Date & Time Read: 07/19/99 11:30am

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

Reviewed By : Samara [signature]
Title : Quality Control Director
Date Reviewed : July 20, 1999

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Zellwood Station Co OP
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

AUG 1999
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PROJECT NAME:
Zellwood Station

TTA Contact: C. Young

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT UNITS	DATE/TIME ANALYZED	TECH
07/27/99	99-07-881-1	07/27/99 1pm	CBOD TSS Influent	5210B 160.2	260 A mg/L 260 mg/L	* 07/28/99	CC CC
07/27/99	99-07-881-2	07/27/99 1pm	CBOD TSS Fecal Nitrate Effluent	5210B 160.2 9222D 353.2	16.3 A mg/L 19.0 mg/L 1 U cfu's 0.62 mg/L	* 07/28/99 07/27/99 3:15pm 07/27/99 4pm	CC CC RS/MM HD

*CBOD Date & Time Setup: 07/28/99 11am-5pm
Date & Time Read : 08/02/99 11:15am

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

Reviewed By :
Title : Quality Control Director
Date Reviewed : August 03, 1999

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DHRS #83359 & #E83294
DEP #900405G
AIHA #169077

DEPARTMENT OF ENVIRONMENTAL PROT TION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

COUNTY: Orange

SEP 1999 RECEIVED D.E.P. CENTRAL DISTRICT

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: _____ To: 8/99
LIMIT: Final REPORT: Monthly
CLASS SIZE: N/A GROUP: Domestic

FACILITY ID: FLA010865 WAFR SITE NO.: 5843
GMS ID NO.: 3048P01438 GMS TEST SITE NO.: 3048X12578
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
...ow	Sample Measurement	.177	.149	MGD						7/7	FLOW METER
STORET No. 50050 Y Mon.Site No. EFF-1	Permit Measurement	0.300 (Av.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement				9.0			MGL		2/30	8HR.COMP.
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (Av.Avg.)			mg/L		Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement				10.3	15.4		MGL		2/30	8HR COMP
STORET No. 80082 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.3			MGL		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (Av.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.9	18.0		MGL		2/30	8HR COMP
STORET No. 00530 1 Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement				6.8	7.2		SU		7/7	GRAB
STORET No. 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max)		S.U.		5-Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W A RESTALL UTS MGR	W A Restall uts mgr	886-0000	9/15/99

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MIP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: SR43

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U			100mL		2/30	GRAB
STORET No. 31613 Y Mon.Site No. EFA-1	Permit Measurement				200 (Mo.Avg.)			#/100mL		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1U	1U		100mL		2/30	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo Mean)	800 (Max)		#/100mL		Every Two Weeks	Grab
TRC for disinfection	Sample Measurement				2.1			MGL		2/2	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				7.7			MGL		1/30	8HRCOMP
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
$CBOD_5$	Sample Measurement				235			MGL		2/30	8HRCOMP
STORET No. 80082 0 Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				234			MGL		2/30	8HRCOMP
STORET No. 00530 0 Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

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DAILY SAMPLE RESULTS - PART B

mit Number: FLA010865

Facility: Zellwood Station MHP WWTF

Three-month Average Daily Flow: .153 MGD

Daily Flow % of Permitted Capacity: 50%

nth/Year:

ys of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
rameter/Unit/Monitoring Location Site Number																														
ow (mgd), EFF-1	143	144	149	146	144	148	148	151	150	148	147	150	149	155	160	152	150	149	148	150	155	156	155	150	148	142	145	149	144	146
BOD_5 (mg/L), EFA-1												3.2												15.4						
BOD_5 (mg/L), INF-1												205												36.7						
/L), EFA-1												1.7												18.0						
SS (mg/L), INF-1												212												255						
inimum pH (std. units), EFA-1	6.8	6.8	6.8	6.8	6.8	7.0	6.9	7.0	7.0	6.9	6.8	6.9	6.8	6.9	6.8	6.9	6.8	6.8	6.9	7.0	7.0	7.1	7.2	7.2	7.0	7.0	7.0	6.9	6.9	6.8
aximum pH (std. units), EFA-1	6.8	6.8	6.8	6.8	6.8	7.0	6.9	7.0	7.0	6.9	6.8	6.9	6.8	6.9	6.8	6.9	6.8	6.8	6.9	7.0	7.0	7.1	7.2	7.2	7.0	7.0	7.0	6.9	6.9	6.8
cal Coliform Bacteria (#/100 mL), EFA-1												10L													10L					
RC (For Disinfection) (mg/L), EFA-1	3.0	2.5	3.0	3.5	5.0	3.5	3.0	2.5	3.5	3.0	3.5	5.0	3.0	3.5	3.0	5.0	3.5	5.0	3.5	3.0	2.1	3.2	2.2	2.2	5.0	5.0	3.6	3.0	2.5	3.0
itrate (as N) (mg/L), EFA-1																									1.7					

Plant Staffing:

Day Shift Operator	Class A	Certificate No. 7322	Name:	W A RESTAIL
Evening Shift Operator	Class	Certificate No.	Name:	
Night Shift Operator	Class	Certificate No.	Name:	
Lead Operator	Class	Certificate No.	Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EUP - PERC

Limited Wet Weather Discharge Activated: Yes ____ No ____ Not Applicable X. If yes, cumulative days of wet weather discharge: ____

Attach additional sheets necessary to list all certified operators necessary for required operations.

Tri-Tech Analytical
Laboratories, Inc.

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Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

PROJECT NAME:
Waste Water Monthly Analysis

TTA Contact: J Focht

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT UNITS	DATE/TIME ANALYZED	TECH
08/12/99	99-08-457 -1	08/12/99 12:30pm	CBOD TSS Influent	5210 B 160.2	203 A mg/L 212 mg/L	* 08/13/99	CC CC
08/12/99	99-08-457 -2	08/12/99 12:30pm	CBOD TSS Fecal Effluent	5210 B 160.2 SM 9222 D	5.2 A mg/L 1.7 mg/L 1 U cuf's	* 08/13/99 08/12/99 3:40pm	CC CC RS/MM

*CBOD Date & Time Setup: 08/12/99 12:00pm-5pm
Date & Time Read: 08/17/99 1:00pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

Reviewed By :
Title : Quality Control Director
Date Reviewed : August 18,1999

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DHRS #83359 & #E83294
DEP #900405G
AIHA #169077

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Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

PROJECT NAME:
Waste Water Monthly Analysis

TTA Contact: J Focht

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT UNITS	DATE/TIME ANALYZED	TECH
08/25/99	99-08-946 -1	08/25/99	CBOD TSS Influent	5210 B 160.2	267 A mg/L 255 mg/L	* 08/26/99	CC CC
08/25/99	99-08-946 -2	08/25/99	CBOD TSS Nitrate Fecal Effluent	5210 B 160.2 353.2 SM 9222 D	15.4 A mg/L 18.0 mg/L 7.7 mg/L 1 U cuf's	* 08/26/99 08/27/99 9:00am 08/25/99 4:00pm	CC CC HD RS/MM

*CBOD Date & Time Setup: 08/26/99 12:30pm-5pm
Date & Time Read: 08/31/99 1:00pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

RECEIVED SEP 1999 D.E.P. CENTRAL DISTRICT

Reviewed By :
Title : Quality Control Director
Date Reviewed : Sept. 01,1999

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DHRS #83359 & #E83294
DEP #900405G
AIHA #169077

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: SEPT 1 1999 To: SEPT 30 1999
LIMIT: Final
CLASS SIZE: N/A
REPORT: Monthly
GROUP: Domestic

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

FACILITY ID: FLA010865
GMS ID NO.: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC

WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12578

COUNTY: Orange

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.176	.148	MGD						7/7	FLOW METER
STORET No. 50050 Y Mon.Site No. EFT-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement				9.3			MGL		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement				9.8	13.6		MGL		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.7			MGL		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				11.5	14.3		MGL		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.0		SU		7/7	GRAB
STORET No. 00400 Y Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		7 Days/Week	Grab

RECEIVED OCT 1999 D.E.P. CENTRAL DISTRICT

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W A RESTALL CTS MGR	W A Restall CTS mgr	8860000	10/15/99

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITOR REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1 U			100mL		2/2	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				200 (Alt Avg)			#/100mL		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1 U	1 U		100mL		2/2	GRAB
STORET No. 31615 I Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max)		#/100mL		Every Two Weeks	Grab
for disinfection	Sample Measurement				2.0			MGL		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		6 Days/Week	Grab
Nitrate (as N)	Sample Measurement				3.5			MGL		1/30	8HR COMP
STORET No. 00620 I Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
$CBOD_5$	Sample Measurement				176			MGL		2/30	8HR COMP
STORET No. 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				153			MGL		2/30	8HR COMP
STORET No. 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865 Facility: Zellwood Station MHP WWTF Three-month Average Daily Flow: .148 MGD

Month/Year: SEPT 1999 Daily Flow % of Permitted Capacity: 49%

Days of the Months / Parameter/Unit/Monitoring Location Site Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Flow (mgd), EFF-1	147	149	145	149	151	158	157	155	150	153	155	157	145	142	150	141	146	148	142	148	142	145	148	146	149	144	146	142	144	148
BOD_5 (mg/L), EFA-1		155													198															
TSS (mg/L), INF-1		100													206															
[illegible] (mg/L), EFA-1		13.6													6.0															
TSS (mg/L), INF-1		14.3													8.7															
Minimum pH (std. units), EFA-1	6.8	6.8	6.9	6.8	6.9	7.0	6.8	6.9	6.8	6.9	6.7	6.6	6.8	6.8	6.9	7.0	6.9	7.0	6.8	7.0	6.9	6.8	6.8	6.8	6.9	7.0	6.9	6.9	6.8	6.8
Maximum pH (std. units), EFA-1	6.8	6.8	6.9	6.8	6.9	7.0	6.8	6.9	6.8	6.9	6.7	6.7	6.8	6.8	6.9	7.0	6.9	7.0	6.8	7.0	6.9	6.8	6.7	6.8	6.9	7.0	6.9	6.9	6.8	6.8
Fecal Coliform Bacteria (#/100 mL), EFA-1		1	U													1	U													
TRC (For Disinfection) (mg/L), EFA-1	5.0	3.5	3.0	3.5	5.0	2.0	5.0	5.0	3.5	4.0	1.0	5.0	5.0	5.0	3.5	3.0	3.0	3.6	3.4	3.0	5.0	3.0	5.0	4.0	3.0	3.5	2.5	3.0	2.5	2.0
Nitrate (as N) (mg/L), EFA-1																3.5														

Plant Staffing:

Day Shift Operator	Class A	Certificate No. 7322	Name:	W A RESTAIL	
Evening Shift Operator	Class	Certificate No.	Name:		
Night Shift Operator	Class	Certificate No.	Name:		
Lead Operator	Class	Certificate No.	Name:		

Type of Effluent Disposal or Reclaimed Water Reuse: EVP - PERC

Limited Wet Weather Discharge Activated: Yes____ No____ Not Applicable____ If yes, cumulative days of wet weather discharge:_____

*Attach additional sheets necessary to list all certified operators necessary for required operations.

RECEIVED SEP 2 0 1999

Tri-Tech Analytical
Laboratories, Inc.

P.O. Box 140966 • Orlando, FL 32814-0966 • (407) 275-8463
See us on the web at : http://www.tri-techlabs.com

RECEIVED OCT 1999 D.E.P. CENTRAL DISTRICT

Zellwood Station Co OP
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

PROJECT NAME:
Zellwood Station

TTA Contact: C. Young

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT UNITS	DATE/TIME ANALYZED	TECH
09/02/99	99-09-129-1	09/02/99 1pm	CBOD TSS Influent	5210B 160.2	155 A mg/L 100 mg/L	* 09/03/99	CC CC
09/02/99	99-09-129-2	09/02/99 1pm	CBOD TSS Fecal	5210B 160.2 9222D	13.6 A mg/L 14.3 mg/L 1 U cfu's	* 09/03/99 09/02/99 4:50pm	CC CC RS/MM

*CBOD Date & Time Setup: 09/03/99 10:15am-5:00pm
Date & Time Read : 09/08/99 11:30am

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

Reviewed By :
Title : Quality Control Director
Date Reviewed : September 09, 1999

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DHRS #83359 & #E83294
DEP #900405G
AIHA #169077

Tri-Tech Analytical
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Zellwood Station Co OP
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

RECEIVED OCT 1999 D.E.P. CENTRAL DISTRICT

PROJECT NAME:
Zellwood Station

TTA Contact: C. Young

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT UNITS	DATE/TIME ANALYZED	TECH
09/16/99	99-09-514-1	09/16/99 11am	CBOD TSS Influent	5210B 160.2	197 A mg/L 206 mg/L	* 09/17/99	CC CC
09/16/99	99-09-514-2	09/16/99 11am	CBOD TSS Fecal Nitrate Effluent	5210B 160.2 9222D 353.2	6.0 A mg/L 8.7 mg/L 1 U cfu's 3.5 mg/L	* 09/17/99 09/16/99 2:15pm 09/17/99 4pm	CC CC RS/MM HD

*CBOD Date & Time Setup: 09/16/99 12:00pm-5:00pm
Date & Time Read : 09/21/99 12:00pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

Reviewed By :
Title : Quality Control Director
Date Reviewed : September 22, 1999

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DHRS #83359 & #E83294
DEP #900405G
AIHA #169077

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

ENTERED DEC

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: OCT 1 1998 To: OCT 31, 1998
LIMIT: Final
REPORT: Monthly
CLASS SIZE: N/A
GROUP: Domestic

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

FACILITY ID: FLA010865
GMS ID NO.: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: HIC

WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12578

COUNTY: Orange

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.173	.151	MGD						7/7	FLOWMETER
STORET No. 50050 Y Mon.Site No. EFI-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement				9.1			MGL		2/30	8HRLCOMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement				5.3	7.5		MGL		2/30	8HRLCOMP
STORET No. 80082 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				10.3			MGL		2/30	8HRLCOMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				10.3	11.3		MGL		2/30	8HRLCOMP
STORET No. 00530 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.8	7.0		S.U.		7/7	GRAB
STORET No. 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Days/Week	Grab

RECEIVED NOV 1998 DEP CENTRAL DISTRICT

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W A RESTAINO MGR	W A Restaino mgr	886-0020	98/11/17

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 58-13

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U			100 ml		2/30	GRAB
STORET No. 31615 Y	Permit Measurement				200 (Mo.Avg.)			#/100ml		Every Two Weeks	Grab
Mon.Site No. EFA-1											
Fecal Coliform Bacteria	Sample Measurement				1U	1U		100 ml		2/30	GRAB
STORET No. 31615 I	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max)		#/100ml		Every Two Weeks	Grab
Mon.Site No. EFA-1											
Chlorine for disinfection	Sample Measurement				2.0			ML		7/7	GRAB
STORET No. 50060 A	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Mon.Site No. EFA-1											
Nitrate (as N)	Sample Measurement				1.5			ML		1/30	8HR COMP
STORET No. 00620 I	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
Mon.Site No. EFA-1											
$CBOD_5$	Sample Measurement				215.			ML		2/30	8HR COMP
STORET No. 80082 O	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
Mon.Site No. INF-1											
TSS	Sample Measurement				255.			ML		2/30	8HR COMP
STORET No. 00530 O	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
Mon.Site No. INF-1											
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility: Zellwood Station MHP WWTF

Three month Average Daily Flow: 0.149 MGD

Daily Flow % of Permitted Capacity: 50%

Unit Number: FLA010865

Month/Year: OCT 1999

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	142	152	142	142	141	142	142	142	152	138	145	144	144	144	150	149	149	156	152	155	153	145	152	154	153	155	160	165	164	170
$CBOD_5$ (mg/L), EFA-1													2.5								2.4									
$CBOD_5$ (mg/L), INF-1													18								2.2									
TSS (mg/L), EFA-1													1.3								10.3									
TSS (mg/L), INF-1													18								22.7									
Minimum pH (std. units), EFA-1	6.8	6.8	6.8	6.8	6.8	6.8	6.8	7.0	7.0	6.8	6.8	6.8	7.0	7.0	7.0	7.0	7.0	6.8	6.8	7.0	7.0	7.0	7.0	7.0	7.0	7.0	7.0	7.0	7.0	7.0
Maximum pH (std. units), EFA-1	6.8	6.8	6.8	6.8	6.8	6.8	6.8	7.0	7.0	6.8	6.8	6.8	7.0	7.0	7.0	7.0	7.0	6.8	6.8	7.0	7.0	7.0	7.0	7.0	7.0	7.0	7.0	7.0	7.0	7.0
Fecal Coliform Bacteria (#/100 mL), EFA-1													14								14									
TRC (For Disinfection) (mg/L), EFA-1	3.5	3.5	3.5	3.0	2.4	3.0	2.8	1.5	3.5	3.0	3.5	3.0	2.8	2.2	2.4	3.5	3.0	3.0	3.0	3.0	3.5	3.0	3.5	3.0	3.5	3.0	3.5	3.0	3.5	3.0
Nitrate (as N) (mg/L), EFA-1																					1.5									

Plant Staffing:

Day Shift Operator	Class A	Certificate No. 7322	Name:	W A RESTALL
Evening Shift Operator	Class	Certificate No.	Name:	
Night Shift Operator	Class	Certificate No.	Name:	
Lead Operator	Class	Certificate No.	Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EUP - RERL

Limited Wet Weather Discharge Activated: Yes ___ No ___ Not Applicable X If yes, cumulative days of wet weather discharge: ___

Attach additional sheets necessary to list all certified operators necessary for required operations.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

ENTERED DEC

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive, Zellwood, FL 32798-9799

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: NOV 1 1999 To: NOV 30 1999
LIMIT: Final
REPORT: Monthly
CLASS SIZE: N/A
GROUP: Domestic

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive, Zellwood, FL

FACILITY ID: FLA010865
GMS ID NO.: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: HC

WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12578

COUNTY: Orange

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.173	.187	MGD						CONT	FLOW METER
STORET No. 50050 Y Mon.Site No. EFA-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
CBOD5	Sample Measurement				9.4			MGL		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				9.2	13.3		MGL		2/30	8HR COMP
STORET No. 80082 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				11.0			MGL		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				12.9	21.7		MGL		2/30	8HR COMP
STORET No. 00530 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.1		SU		7/7	GRAB
STORET No. 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab

DEC 1999
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D.E.P. CENTRAL DISTRICT

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W A RESTAIL UTS. MGR.	W A Restall uts mgr	407 886 0000	12/13/99

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U			100mL		2/30	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				200 (Mo.Avg.)			#/100mL		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1U	1U		100mL		2/30	GRAB
STORET No. 31615 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max.)		#/100mL		Every Two Weeks	Grab
Chlorine disinfection	Sample Measurement				2.0			MGL		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		6 Days/Week	Grab
Nitrate (as N)	Sample Measurement				.2			MGL		1/30	8HRCOMP
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour F/C
$CBOD_5$	Sample Measurement				254			MGL		2/30	8HRCOMP
STORET No. 80082 0 Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour F/C
TSS	Sample Measurement				280			MGL		2/30	8HRCOMP
STORET No. 00530 0 Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour F/C
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

nit Number: FLA010865

ıth/Year:

Facility: Zellwood Station MHP WWTF

Three month Average Daily Flow: .162 M-G-D.

Daily Flow % of Permitted Capacity: 62%

s of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
ameter/Unit/Monitoring Location Site Number																														
w (mgd), EFF-1	165	130	135	167	134	182	201	199	188	137	182	130	197	130	128	130	134	150	138	150	141	159	188	151	155	160	178	151	150	186
OD5 (mg/L), EFA-1										13.3									5.1											
CF (mg/L), INF-1										278									229											
S (mg/L), EFA-1										21.7									4.0											
S (mg/L), INF-1										16									250											
inimum pH (std. units), EFA-1	6.9	7.0	7.0	6.9	7.0	6.9	6.9	6.8	6.9	7.0	6.9	6.8	6.7	6.8	6.9	7.0	6.9	7.0	6.8	7.1	7.0	6.9	6.8	6.8	6.8	6.9	6.8	6.9	6.8	6.9
aximum pH (std. units), EFA-1	6.9	7.0	7.0	6.9	7.0	6.9	6.9	6.8	6.9	7.0	6.9	6.8	6.7	6.8	6.9	7.0	6.9	7.0	6.8	7.1	7.0	6.9	6.8	6.9	6.8	6.9	6.8	6.9	6.8	6.9
cal Coliform Bacteria (#/100 mL), EFA-1										16									16											
C (For Disinfection) (mg/L), EFA-1	5.0	3.0	2.5	3.5	3.0	3.5	4.0	4.0	5.0	3.5	3.5	3.0	3.1	3.1	3.0	2.8	3.0	2.0	2.5	3.0	3.0	2.5	3.0	2.5	3.5	3.0	2.5	4.0	3.5	3.0
trate (as N) (mg/L), EFA-1																			0.2											

Plant Staffing:

Day Shift Operator	Class A	Certificate No. 7322	Name: W.A. RESTALL		
Evening Shift Operator	Class	Certificate No.	Name:		
Night Shift Operator	Class	Certificate No.	Name:		
Lead Operator	Class	Certificate No.	Name:		

Type of Effluent Disposal or Reclaimed Water Reuse: EVIP - PERC

Limited Wet Weather Discharge Activated: Yes___ No___ Not Applicable X If yes, cumulative days of wet weather discharge:

Attach additional sheets necessary to list all certified operators necessary for required operations.

Tri-Tech Analytical
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Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

PROJECT NAME:
Waste Water Monthly Analysis

TTA Contact: J Focht

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT UNITS	DATE/TIME ANALYZED	TECH
11/08/99	99-11-281 -1	11/08/99 11:00am	CBOD TSS Influent	5210 B 160.2	278 A mg/L 310 mg/L	* 11/11/99	CC CC
11/08/99	99-11-281 -2	11/08/99 11:00am	CBOD TSS Fecal Effluent	5210 B 160.2 SM 9222 D	13.3A mg/L 21.7 mg/L 1 U cuf's	* 11/11/99 11/08/99 4:44pm	CC CC RS/MM

*CBOD Date & Time Setup: 11/10/99 12:30pm-5pm
Date & Time Read: 11/15/99 1:30pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

Reviewed By : Seman Trilicio
Title : Quality Control Director
Date Reviewed : November 16,1999

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DHRS #83359 & #E83294
DEP #900405G
AIHA #169077

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See us on the web at : http://www.tri-techlabs.com

Zellwood Station Co OP
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

PROJECT NAME:
Zellwood Station

TTA Contact: C. Young

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT UNITS	DATE/TIME ANALYZED	TECH
11/18/99	99-11-752-1	11/18/99 11am	CBOD TSS Influent	5210B 160.2	229 A mg/L 250 mg/L	* 11/19/99	CC CC
11/18/99	99-11-752-2	11/18/99 11am	CBOD TSS Fecal Nitrate Effluent	5210B 160.2 9222D 353.2	5.1 A mg/L 4.0 mg/L 1 U cfu's 0.02 U mg/L	* 11/19/99 11/18/99 4:00pm 11/19/99 2:30pm	CC CC RS/MM HD

*CBOD Date & Time Setup: 11/19/99 11:30am
Date & Time Read : 11/24/99 12:00pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

RECEIVED DEC 1999 D.E.P. CENTRAL DISTRICT

Reviewed By :
Title : Quality Control Director
Date Reviewed : November 29, 1999

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DHRS #83359 & #E83294
DEP #900405G
AIHA #169077

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: DEC 1 1999 To: DEC 31 1999
LIMIT: Final
CLASS SIZE: N/A
REPORT: Monthly
GROUP: Domestic

ENTERED

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

FACILITY ID: FLA010865
GMS ID NO.: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC

WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12578

COUNTY: Orange

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.173	.190	MGD						7/7	FLOW METER
STORET No. 50050 Y Mon.Site No. EFT-1	Permit Measurement	0.300 (Av.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
CBOD$_5$	Sample Measurement				9.7			MGL		2/30	8HRCOMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (Av.Avg.)			mg/L		Every Two Weeks	8-hour FPC
CBOD$_5$	Sample Measurement				6.2	6.3		MGL		2/30	8HRCOMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				11.6			MGL		2/30	8HRCOMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (Av.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.8	10.3		MGL		2/30	8HRCOMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.2		S.U.		7/7	GRAB
STORET No. 00400 Y Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Days/Week	Grab

RECEIVED JAN 2000 D.E.P. CENTRAL DISTRICT

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
WA RESTALL UTS MGR	Wa Restall uts mgr	407886 0000	1/10/2000

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1			100ml		2/30	GRAB
STORET No. 31613 Y Mon.Site No. EFA-1	Permit Measurement				200 (Mo.Avg.)			#/100ml		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1	1		100ml		2/30	GRAB
STORET No. 31615 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max)		#/100ml		Every Two Weeks	Grab
Cl for disinfection	Sample Measurement				1.4			MGL		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		Days/Week	Grab
Nitrate (as N)	Sample Measurement				240.			MGL		2/30	8HRCOMP
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
$CBOD_5$	Sample Measurement				234			MGL		2/30	8HRCOMP
STORET No. 80082 C Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				1.5			MGL		1/30	8HRCOMP
STORET No. 00530 C Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865

Facility: Zellwood Station MHP WWTF

Three-month Average Daily Flow: .176 M-G-D.

Daily Flow % of Permitted Capacity: 63%

Month/Year: DEC 1999

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	.190	.192	.188	.191	.189	.185	.184	.185	.185	.190	.192	.187	.190	.188	.185	.192	.195	.198	.189	.186	.188	.190	.195	.191	.190	.196	.190	.189	.187	.193
BOD5 (mg/L), EFA-1			6.3														6.1													
TSS (mg/L), INF-1			227.														252													
[illegible] (mg/L), EFA-1			10.3														9.3													
TSS (mg/L), INF-1			202														266													
Minimum pH (std. units), EFA-1	6.8	6.9	7.1	7.1	7.2	7.0	6.9	6.8	6.9	6.8	6.9	6.7	6.8	6.7	6.8	6.8	6.9	6.8	6.7	6.8	6.9	7.0	6.9	7.0	6.9	6.8	6.9	6.8	6.9	7.0
Maximum pH (std. units), EFA-1	6.8	6.9	7.1	7.1	7.2	7.0	6.9	6.8	6.9	6.8	6.9	6.7	6.8	6.7	6.8	6.8	6.9	6.8	6.7	6.8	6.9	7.0	6.9	7.0	6.9	6.8	6.9	6.8	6.9	7.0
Fecal Coliform Bacteria (#/100 mL), EFA-1			10														10													
TRC (For Disinfection) (mg/L), EFA-1	3.0	3.5	1.4	2.0	1.5	2.5	2.8	3.5	5.0	5.0	5.0	4.5	3.5	3.0	2.5	3.0	3.5	2.6	1.8	2.0	3.5	3.0	3.5	1.5	5.0	5.0	3.0	3.5	3.0	2.5
Nitrate (as N) (mg/L), EFA-1																	1.5													

Plant Staffing:

Day Shift Operator	Class A	Certificate No. 7322	Name:	W A RESTALL
Evening Shift Operator	Class A	Certificate No. 3347	Name:	RUSS CARSON
Night Shift Operator	Class	Certificate No.	Name:	
Lead Operator	Class	Certificate No.	Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EVP - PERC

Limited Wet Weather Discharge Activated: Yes ___ No ___ Not Applicable X If yes, cumulative days of wet weather discharge: ___

*Attach additional sheets necessary to list all certified operators necessary for required operations.

DEPARTMENT OF ENVIRONMENTAL PRO CTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: JAN 1 2000 To: JAN. 31 2000
LIMIT: Final
CLASS SIZE: N/A

REPORT: Monthly
GROUP: Domestic

ENTERED DEC - 7 2000

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

FACILITY ID: FLA010865
GMS ID NO.: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC

WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12578

COUNTY: Orange

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.122	.188	MGD						7/7	FLOW METER
STORET No. 50050 Y Mon.Site No. EFA-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement				10.4			MGL		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement				14.7	20.7		MGL		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				12.7			MGL		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				16.7	22.3		MGL		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.1		SU		7/7	GRAB
STORET No. 00400 Y Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Days/Week	Grab

FEB 2000 RECEIVED D.E.P. - CENTRAL DISTRICT

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
WA RESTAIN UTS MGR	Wa Restall uts mgr	4078860000	2/8/2000

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U			100mL		2/30	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				200 (Arl Avg)			#/100mL		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1U	1U		100mL		2/30	GRAB
STORET No. 31615 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max)		#/100mL		Every Two Weeks	Grab
TRC for disinfection	Sample Measurement				1.5			MGL		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				10.6			MGL		1/30	8HRCOMP
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
$CBOD_5$	Sample Measurement				309.					2/30	8HRCOMP
STORET No. 80082 0 Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				370.					2/30	8HRCOMP
STORET No. 00530 0 Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility: Zellwood Station MIP WWTF

Three month Average Daily Flow: .189 MGD

Daily Flow % of Permitted Capacity: 63%

Permit Number: FLA010865

Month/Year: JAN 2000

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	.192	.196	.190	.187	.188	.190	.188	.187	.181	.184	.189	.186	.183	.188	.186	.185	.190	.189	.189	.189	.190	.192	.189	.188	.185	.187	.188	.187	.190	.187
BOD_5 (mg/L), EFF-1				20.7																8.6										
(mg/L), INF-1				300.																319.										
TSS (mg/L), EFF-1				32.3																1.0										
TSS (mg/L), INF-1				334.																406.										
Minimum pH (std. units), EFF-1	6.9	7.0	6.9	6.8	6.9	6.8	6.8	6.7	6.8	6.9	7.0	6.9	7.0	7.1	7.0	6.9	7.0	6.9	7.0	6.8	7.1	6.8	6.9	6.8	6.9	7.0	6.9	7.0	6.9	6.9
Maximum pH (std. units), EFF-1	6.9	7.0	6.9	6.8	6.9	6.8	6.8	6.7	6.8	6.9	7.0	6.9	7.0	7.1	7.0	6.9	7.0	6.9	7.0	6.8	7.1	6.8	6.9	6.8	6.9	7.0	6.9	7.0	6.9	6.9
Fecal Coliform Bacteria (#/100 mL), EFF-1				10																10										
TRC (For Disinfection) (mg/L), EFF-1	3.5	2.5	3.0	3.5	3.0	5.0	6.0	3.4	3.0	3.5	4.5	3.9	3.0	2.0	3.0	3.5	3.0	3.5	3.0	3.0	2.5	3.5	5.0	1.8	1.8	2.5	3.0	3.0	5.0	4.0
Nitrate (as N) (mg/L), EFF-1																				10.6										

Plant Staffing:

Day Shift Operator	Class A	Certificate No. 7322	Name: W A RESTALL
Evening Shift Operator	Class A	Certificate No. 5347	Name: J R CARSON
Night Shift Operator	Class	Certificate No.	Name:
Lead Operator	Class	Certificate No.	Name:

Type of Effluent Disposal or Reclaimed Water Reuse: EVP-PERC

Limited Wet Weather Discharge Activated: Yes___ No___ Not Applicable___ If yes, cumulative days of wet weather discharge: -0-

*Attach additional sheets necessary to list all certified operators necessary for required operations.

Tri-Tech Analytical
Laboratories, Inc.

P.O. Box 140966 • Orlando, FL 32814-0966 • (407) 275-8463
See us on the web at : http://www.tri-techlabs.com

Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

PROJECT NAME:
Waste Water Monthly Analysis

TTA Contact: J Carpenter

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT UNITS	DATE/TIME ANALYZED	TECH
01/04/99	00-01-064 -1	01/04/00 11:00am	CBOD TSS Influent	5210 B 160.2	300 A mg/L 334 mg/L	* 01/05/00	CC CC
01/04/00	00-01-064 -2	01/04/00 11:00am	CBOD TSS Fecal Effluent	5210 B 160.2 SM 9222 D	20.7A mg/L 22.3 mg/L 1 U cuf's	* 01/05/00 01/04/00 3:00pm	CC CC RS/MM

*CBOD Date & Time Setup: 01/05/00 11:40am5pm
Date & Time Read: 01/10/00 11:20am

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

Reviewed By :
Title : Quality Control Director
Date Reviewed : January 11,2000

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DHRS #83359 & #E83294
DEP #900405G
AIHA #169077

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P.O. Box 140966 • Orlando, FL 32814-0966 • (407) 275-8463
See us on the web at : http://www.tri-techlabs.com

Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

FEB 2000 RECEIVED D.E.P. CENTRAL DISTRICT

PROJECT NAME:
Waste Water Monthly Analysis

TTA Contact: J Carpenter

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT UNITS	DATE/TIME ANALYZED	TECH
01/20/00	00-01-858 -1	01/20/00 12:00pm	CBOD TSS Influent	5210 B 160.2	319 A mg/L 406 mg/L	* 01/20/00	CC CC
01/20/00	00-01-858 -2	01/20/00 12:00pm	CBOD TSS Nitrate Fecal Effluent	5210 B 160.2 353.2 SM 9222 D	8.6 A mg/L 11.0 mg/L 10.6 mg/L 1 U cfu's	* 01/20/00 01/20/00 01/20/00 4:30pm	CC CC CL RS/MM

*CBOD Date & Time Setup: 01/21/00 11:00am-5pm
Date & Time Read: 01/26/00 12:00pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

Reviewed By :
Title : Quality Control Director
Date Reviewed : January 27,2000

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DHRS #83359 & #E83294
DEP #900405G
AIHA #169077

DEPARTMENT OF ENVIRONMENTAL PROT TION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: FEB 1 2000 To: FEB 29 2000
LIMIT: Final
CLASS SIZE: N/A
REPORT: Monthly
GROUP: Domestic

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

FACILITY ID: FLA010865
GMS ID NO.: 3048F01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC
WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12578

COUNTY: Orange

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.172	.183	MGD						7/7	FLOW METER
STORET No. 50050 Y Mon.Site No. EFA-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement				12.5			MGL		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement				15.7	18.5		MGL		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				10.6			MGL		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				12.8	13.3		MGL		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.1		S.U.		7/7	GRAB
STORET No. 00400 Y Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5-Days/Week	Grab

MAR 2000 RECEIVED D.E.P. CENTRAL DISTRICT

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
WA RESTALL UTS MGR	Wa Restall uts mgr 407	8860000	3/15/2000

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1 U			100 mL		2/30	GRAB
STORET No. 31613 Y Mon.Site No. EFA-1	Permit Measurement				200 (Mo Avg)			#/100mL		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1 U	1 U		100 mL		2/30	GRAB
STORET No. 31613 Y Mon.Site No. EFA-1	Permit Measurement				Report (Mo Geo.Mean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Cl2 for disinfection	Sample Measurement				2.1			MGL		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				2.2			MGL		1/30	8HR COMP
STORET No. 00620 Y Mon.Site No. EFA-1	Permit Measurement				12.0 (Max)			mg/L		Monthly	8-hour FPC
CBOD5	Sample Measurement				195			MGL		2/30	8HR COMP
STORET No. 80082 Q Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC 8HR
TSS	Sample Measurement				174			MGL		2/30	COMP
STORET No. 00530 Q Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865

Facility: Zellwood Station MHP WWTF

Month/Year: FEB. 2000

Three-month Average Daily Flow: .187 MGD

Daily Flow % of Permitted Capacity: 57%

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	.188	.170	.185	.188	.186	.182	.185	.186	.184	.185	.186	.190	.185	.180	.186	.180	.171	.176	.182	.170	.182	.185	.180	.182	.176	.175	.180	.182	.190	
CBOD5 (mg/L), EFA-1								12.9													18.5									
CBOD5 (mg/L), INF-1								20.7													180									
TSS (mg/L), EFA-1								12.3													13.5									
TSS (mg/L), INF-1								124													123									
Minimum pH (std. units), EFA-1	6.9	6.8	6.9	7.1	7.0	6.8	6.7	6.8	6.8	6.8	6.9	6.8	6.7	6.8	6.9	7.0	7.1	7.0	6.9	6.9	7.0	7.0	6.9	6.9	7.0	7.0	6.9	6.8	6.9	
Maximum pH (std. units), EFA-1	6.9	6.8	6.9	7.1	7.0	6.8	6.7	6.8	6.8	6.8	6.9	6.8	6.7	6.8	6.9	7.0	7.1	7.0	6.9	6.9	7.0	7.0	6.9	6.9	7.0	7.0	6.9	6.8	6.9	
Fecal Coliform Bacteria (#/100 mL), EFA-1								11													11									
TRC (For Disinfection) (mg/L), EFA-1	3.0	4.1	3.4	2.0	3.5	5.0	4.6	4.0	4.1	4.0	5.0	4.2	3.5	4.0	3.0	2.5	2.1	3.0	3.5	3.0	2.5	3.0	3.0	3.5	3.0	2.5	3.0	3.5	3.0	
Nitrate (as N) (mg/L), EFA-1																					2.2									

Plan Staffing:

Day Shift Operator	Class A	Certificate No. 7322	Name:	W A RESTAIL
Evening Shift Operator	Class A	Certificate No 3347	Name:	RUSS CARSON
Night Shift Operator	Class	Certificate No.	Name:	
Lead Operator	Class	Certificate No.	Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EVIP-PERC

Limited Wet Weather Discharge Activated: Yes ___ No ✓ Not Applicable ___ If yes, cumulative days of wet weather discharge: -0-

*Attach additional sheets necessary to list all certified operators necessary for required operations

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

COUNTY: Orange

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: MARCH 1 To: MARCH 31 2000
LIMIT: Final REPORT: Monthly
CLASS SIZE: N/A GROUP: Domestic

FACILITY ID: FLA010865 WAFR SITE NO.: 5843
GMS ID NO.: 3048P01438 GMS TEST SITE NO.: 3048X12578
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC

RECEIVED APR 2000 DEP. CENTRAL DISTRICT

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.171	.178	MGD						7/7 FLOW METER	
STORET No. 50050 Y Mon.Site No. EFA-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
CBOD5	Sample Measurement				11.9			mg/L		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				5.3	5.9		mg/L		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.9			mg/L		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				2.9	3.7		mg/L		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.0		SU		7/7 GRAB	
STORET No. 00400 Y Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		SU		5-Day/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
WA RESTALL UTS MGR	[signature]	407 8860000	4/17/2000

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORI REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U			100 ml		2/30	GRAB
STORET No. 31613 Y Mon.Site No. EFA-1	Permit Measurement				200 (Arit.Avg.)			#/100ml		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1U	1U		100 ml		2/30	GRAB
STORET No. 31613 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max)		#/100ml		Every Two Weeks	Grab
Chlor disinfection	Sample Measurement				1.0			ML		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		7/5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				1.5			ML		1/30	8HRCOMP
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
CBOD5	Sample Measurement				245.			ML		2/30	8HRCOMP
STORET No. 80082 Q Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				301.			ML		2/30	8HR COMP
STORET No. 00530 Q Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865

Facility: Zellwood Station MHP WWTF

Three month Average Daily Flow: .183 MGD

Daily Flow % of Permitted Capacity: 59%

Month/Year: MARCH 2000

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	.186	.185	.186	.185	.180	.180	.181	.179	.185	.172	.185	.178	.155	.170	.188	.185	.186	.185	.190	.186	.185	.185	.184	.185	.184	.180	.184	.185	.182	.184
CBOD5 (mg/L), EFA-1		4.6																		5.8										
CBOD5 (mg/L), INF-1		272																		218										
(mg/L), EFA-1		3.7																		2.0										
TSS (mg/L), INF-1		306																		296										
Minimum pH (std. units), EFA-1	6.8	6.8	6.8	6.8	6.8	6.8	6.9	7.0	6.8	6.9	6.8	6.9	6.8	6.8	6.8	6.8	6.8	7.0	6.9	7.0	7.0	6.8	6.8	6.8	6.8	6.7	6.7	6.8	6.8	6.8
Maximum pH (std. units), EFA-1	6.8	6.8	6.8	6.8	6.8	6.8	6.8	7.0	6.9	6.9	6.8	6.9	6.8	6.8	6.8	6.8	6.8	7.0	6.9	7.0	7.0	6.8	6.8	6.8	6.8	6.7	6.7	6.8	6.8	6.8
Fecal Coliform Bacteria (#/100 mL), EFA-1			1UL																		1UL									
TRC (For Disinfection) (mg/L), EFA-1	3.5	4.0	3.5	3.0	4.0	3.5	3.0	3.0	2.5	2.0	2.5	2.8	3.0	2.5	3.0	2.7	2.0	2.0	2.5	5.0	5.0	5.0	5.0	5.0	5.0	5.0	5.0	5.0	5.0	3.5
Nitrate (as N) (mg/L), EFA-1																					1.5									

Plan Staffing:

Day Shift Operator	Class A	Certificate No.	7322	Name:	W.A. RESTAIL
Evening Shift Operator	Class B	Certificate No.	3347	Name:	R. CARSON
Night Shift Operator	Class B	Certificate No.	5557	Name:	P. STORY
Lead Operator	Class	Certificate No.		Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EVP PERC

Limited Wet Weather Discharge Activated: Yes ___ No X Not Applicable ___ If yes, cumulative days of wet weather discharge: NO

*Attach additional sheets necessary to list all certified operators necessary for required operations

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

COUNTY: Orange

MAY 2000
RECEIVED
D.E.P. CENTRAL DISTRICT

ENTERED DEC - 7 2000

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: APRIL 1 To: APRIL 30 2000
LIMIT: Final
CLASS SIZE: N/A
FACILITY ID: FLA010865
GMS ID NO.: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC

REPORT: Monthly
GROUP: Domestic
WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12578

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	170.	.180	MGD						2/2 FLOWMETER	
STORET No. 50050 Y Mon.Site No. EFA-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
CBOD5	Sample Measurement				11.1					2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				15.4	11.2				2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.8					2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				15.4	20.				2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.2	7.1				2/2	GRAB
STORET No. 00400 Y Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W A RESTALL UTS MGR	W A Restall Uts mgr	8860000	5/10/2000

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U			100mL		2/30	6RAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				200 (Mo.Avg.)			#/100mL		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1U	1U		100mL		2/30	6RAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max.)		#/100mL		Every Two Weeks	Grab
Cl2 for disinfection	Sample Measurement				2.0			mg/L		7/7	6RAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				1.7			mg/L		1/30	8HRCOMP
STORET No. 00620 Y Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour F/C
CBOD5	Sample Measurement				208.			mg/L		2/30	8HRCOMP
STORET No. 80082 O Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour F/C
TSS	Sample Measurement				158.			mg/L		2/30	8HRCOMP
STORET No. 00530 O Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour F/C
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

MAY 2000 RECEIVED D.E.P. CENTRAL DISTRICT

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865

Month/Year:

Facility: Zellwood Station MHP WWTF

Three month Average Daily Flow: 0.180 MGD

Daily Flow % of Permitted Capacity: 60%

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	188	186	180	179	176	174	176	184	180	180	178	175	180	170	171	181	176	178	180	185	188	190	185	184	185	180	178	176	170	172
CBOD$_5$ (mg/L), EFA-1						4.3																		1.5						
CBOD$_5$ (mg/L), INF-1						24																		24.						
[illegible] (mg/L), EFA-1						10.7																		20.						
TSS (mg/L), INF-1						9.4																		23.						
Minimum pH (std. units), EFA-1	6.8	6.7	6.7	6.7	6.8	6.8	6.7	6.9	6.8	6.8	6.8	7.0	6.7	6.9	6.8	6.8	6.8	6.9	6.8	6.8	6.8	6.8	6.9	6.8	7.0	6.9	7.1	7.0	7.1	7.1
Maximum pH (std. units), EFA-1	6.8	6.7	6.7	6.7	6.8	6.8	6.7	6.9	6.8	6.8	6.8	7.0	6.9	6.9	6.8	6.8	6.8	6.9	6.8	6.8	6.8	6.8	6.9	6.8	7.0	6.9	7.1	7.0	7.1	7.1
Fecal Coliform Bacteria (#/100 mL), EFA-1						16																		16						
TRC (For Disinfection) (mg/L), EFA-1	5.0	4.0	3.5	4.0	5.0	3.4	5.0	5.0	2.0	4.7	4.0	2.0	2.5	3.0	3.5	3.0	3.0	2.5	2.8	3.0	3.8	3.0	3.0	2.3	2.5	5.0	3.0	2.0	2.0	2.0
Nitrate (as N) (mg/L), EFA-1																								1.7						

Plan Staffing:

Day Shift Operator	Class A	Certificate No	2322	Name:	W A RESTAIL
Evening Shift Operator	Class A	Certificate No	3347	Name:	R. CARSON
Night Shift Operator	Class	Certificate No.		Name:	
Lead Operator	Class	Certificate No.		Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EUP PERC

Limited Wet Weather Discharge Activated: Yes ___ No X Not Applicable ___ If yes, cumulative days of wet weather discharge: ___

*Attach additional sheets necessary to list all certified operators necessary for required operations

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: MAY 1 To: MAY 31 2000
CLASS SIZE: Final N/A
REPORT: Monthly
GROUP: Domestic

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

FACILITY ID: FLA010865
GMS ID NO.: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: HIC

WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12378

COUNTY: Orange

RECEIVED JUN 2000 D.E.P. CENTRAL DISTRICT

RECEIVED DEC - 7 2000

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.169	0.165	MGD						7/7	FLOW METER
STORET No. 50050 Y Mon. Site No. EFA-1	Permit Measurement	0.300 (Av. Avg.)	Report (Mo. Avg.)	mgd						Continuous	Flow Meter
CBOD5	Sample Measurement				11.0			MGL		2/30	8 HR COMP
STORET No. 80082 Y Mon. Site No. EFA-1	Permit Measurement				20.0 (Av. Avg.)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				8.1	8.9		MGL		2/30	8 HR COMP
STORET No. 80082 Y Mon. Site No. EFA-1	Permit Measurement				30.0 (Mo. Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.8			MGL		2/30	8 HR COMP
STORET No. 00530 Y Mon. Site No. EFA-1	Permit Measurement				20.0 (Av. Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				5.7	10.3		MGL		2/30	8 HR COMP
STORET No. 00530 Y Mon. Site No. EFA-1	Permit Measurement				30.0 (Mo. Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.5	7.1		S.U.		7/7	GRAB
STORET No. 00400 Y Mon. Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W A RESTAIL UTS MGR	W A Restail	407 886 0000	6/14/2000

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

FACILITY NAME: Zellwood Station MHP WWTF

PERMIT NUMBER: FLA010865

DISCHARGE POINT NUMBER: R001

WATR SITE 3843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U			100mL		2/30 6	GRAB
STORET No. 31613 X Mon.Site No. EFA-1	Permit Measurement				200 (Mo.Avg.)			#/100ml		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1U	1U		100mL		2/30 6	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max)		#/100ml		Every Two Weeks	Grab
for disinfection	Sample Measurement				2.0			MGL		7/7 6	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				6.5					1/30	8 HR COMP
STORET No. 00620 Y Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
CBOD5	Sample Measurement				178					2/30	8 HR COMP
STORET No. 80082 Q Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				.193					2/30	8 HR COMP
STORET No. 00530 U Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865

Facility: Zellwood Station MHP WWTF

Three month Average Daily Flow: .174 MGD

Daily Flow % of Permitted Capacity: 55%

Month/Year: MAY 2000

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	.170	.171	.165	.166	.164	.168	.162	.159	.159	.165	.162	.163	.165	.167	.160	.164	.162	.166	.165	.169	.170	.168	.165	.161	.165	.164	.165	.168	.169	
CBOD5 (mg/L), EFA-1										7.2													8.9							
CBOD5 (mg/L), INF-1										181													174							
S (mg/L), EFA-1										10.3													1.0							
TSS (mg/L), INF-1										234													152							
Minimum pH (std. units), EFA-1	7.06	7.68	7.67	7.67	7.68	7.68	7.68	7.68	7.68	7.69	7.69	7.68	7.69	7.68	7.68	7.65	7.65	7.68	7.70	7.68	7.69	7.68	7.70	7.69	7.70	7.69	7.70	7.69	7.70	7.69
Maximum pH (std. units), EFA-1	7.06	7.68	7.67	7.67	7.68	7.68	7.68	7.68	7.68	7.69	7.69	7.68	7.69	7.68	7.68	7.65	7.65	7.68	7.70	7.68	7.69	7.68	7.70	7.69	7.70	7.69	7.70	7.69	7.70	7.69
Fecal Coliform Bacteria (#/100 mL), EFA-1										14													14							
TRC (For Disinfection) (mg/L), EFA-1	3.0	2.5	2.4	2.5	3.0	3.0	4.0	4.0	4.0	3.0	3.5	5.0	3.5	3.0	5.0	4.0	3.5	2.0	2.0	2.5	3.5	2.0	3.6	3.0	2.5	3.0	2.5	2.5	3.0	3.5
Nitrate (as N) (mg/L), EFA-1																								6.5						

Plan Staffing:

Day Shift Operator	Class A	Certificate No. 7322	Name:	W. A. RESTAI
Evening Shift Operator	Class A	Certificate No. 3347	Name:	J. R. CARSON
Night Shift Operator	Class	Certificate No.	Name:	
Lead Operator	Class	Certificate No.	Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EVP - PERC

Limited Wet Weather Discharge Activated: Yes____ No____ Not Applicable____ If yes, cumulative days of wet weather discharge:____

*Attach additional sheets necessary to list all certified operators necessary for required operations

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

COUNTY: Orange

JUL 2000
RECEIVED
D.E.P. CENTRAL DISTRICT

ENTERED DEC - 7 2000

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: 6/4/2000 To: 6/30/2000
CLASS SIZE: Final N/A
REPORT: Monthly
GROUP: Domestic

FACILITY ID: FLA010865
GMS ID NO.: 3048F01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC
WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12378

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement		.160	MGD						7/7	FLOW METER
STORET No. 50050 Y Mon.Site No. EFA-1	Permit Measurement	0.300 (Mo.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
CBOD5	Sample Measurement				10.8					2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (Av.Avg.)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				9.3	10.4				2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.9					2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (Av.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				13.0	14.3				2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.1				7/7	GRAB
STORET No. 00400 Y Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W A RESTAIL CTS MGR	W A Restall cts mgr	407 886 0000	7/15/200

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FL0010865 | DISCHARGE POINT NUMBER: R001 | WAFR STI . 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U			100mL		2/30	GRAB
STORET No. 31613 Y Mon.Site No. EFA-1	Permit Measurement				200 (Mo Avg)			#/100mL		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1U	1U		100mL		2/30	GRAB
STORET No. 31613 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo Geo Mean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Cl2 for disinfection	Sample Measurement				1.5			mg/L		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				2.1			mg/L		1/30	8HR COMP
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
CBOD5	Sample Measurement				210.			mg/L		1/30	8HR COMP
STORET No. 80082 0 Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				120.			mg/L		1/30	8HR COMP
STORET No. 00530 0 Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865

Facility: Yellowood Station MHP WWTF

Three month Average Daily Flow: 0.168 MGD

Daily Flow % of Permitted Capacity: 53%

Month/Year: JUNE 2000

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	170	168	166	170	172	161	160	159	161	172	165	160	162	160	161	159	155	156	152	153	151	150	152	158	138	170	159	160	162	165
CBOD5 (mg/L), EFA-1							8.2																					10.4		
CBOD5 (mg/L), INF-1							210																							
TSS (mg/L), EFA-1							14.7																					14.3		
TSS (mg/L), INF-1							160																							
Minimum pH (std. units), EFA-1	6.9	6.8	6.7	6.8	6.8	6.8	6.9	7.0	7.0	7.1	7.0	6.9	6.9	7.0	6.9	7.0	7.1	7.0	7.0	6.9	6.8	6.9	7.0	7.1	7.0	6.9	6.8	7.0	7.1	7.0
Maximum pH (std. units), EFA-1	6.9	6.8	6.7	6.8	6.8	6.8	6.9	7.0	7.0	7.1	7.0	6.9	6.9	7.0	6.9	7.0	7.1	7.0	7.0	6.9	6.8	6.9	7.0	7.1	7.0	6.9	6.8	7.0	7.1	7.0
Fecal Coliform Bacteria (#/100 mL), EFA-1							1U																							
TRC (For Disinfection) (mg/L), EFA-1	35	36	50	50	40	35	30	38	35	28	38	25	30	32	30	25	20	25	30	35	30	25	20	15	25	30	3.0	3.0	2.0	2.4
Nitrate (as N) (mg/L), EFA-1							2.1																							

Plant Staffing:

Day Shift Operator	Class A	Certificate No 2322	Name:	WARESTAIL
Evening Shift Operator	Class A	Certificate No 3342	Name:	R. CARSON
Night Shift Operator	Class	Certificate No	Name:	
Lead Operator	Class	Certificate No.	Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EVIP - PERC

Limited Wet Weather Discharge Activated: Yes ___ No ✓ Not Applicable ___ If yes, cumulative days of wet weather discharge: ___

*Attach additional sheets necessary to list all certified operators necessary for required operations

RECEIVED 2 2 2000

Tri-Tech Analytical Laboratories, Inc.

P.O. Box 140966 • Orlando, FL 32814-0966 • (407) 275-8463

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REPORT OF ANALYSIS

Zellwood Station
2126 Spillman Drive
Zellwood, FL 32798
Attention: Mr. Bill Restall

Work Order # : 00-06-189
Date Received: 06/06/00
Date Reported: 06/30/00
TTA Contact : T. Lal

Work ID : 503 Sludge Analysis
Total Samples: 1

Sampling information is based upon data supplied by the Client.

SAMPLE ID	DATE COLLECTED	TEST PARAMETER
1.Sludge Sample	06/06/00 8:00am	Total Nitrogen
		Total Phosphorus
		Total Solids
		pH
		Total Potassium
		Cadmium
		Copper
		Lead
		Nickel
		Zinc
		Arsenic
		Chromium
		Mercury
		Selenium
		Molybdenum

Analyzed under HRS #E83018.

Respectfully Submitted,
Tri-Tech Laboratories, Inc.

Linda Trytek
Laboratory Director

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!

DHRS #83359 & #E83294
DEP #900405G
AIHA #169077

RECEIVED JUL 2 2 2000

REPORT OF ANALYSIS

RESULTS BY SAMPLES

Tri-Tech Laboratories, Inc. Work Order #: 00-06-189

Date Received : 06/06/00 Location: Zellwood Station

Date Collected: 06/06/00 8:00am Matrix : Sludge

Sample ID : Sludge Sample

Test Name : 503 Analysis

PROFILE	RESULTS	UNITS
pH	7.16	Units
Total Solids	0.397	% S
Copper	341.0	mg/kg
Zinc	875.0	mg/kg
Cadmium	1.25	mg/kg
Lead	21.3	mg/kg
Nickel	10.4	mg/kg
Chromium	10.2	mg/kg
Arsenic	0.728	mg/kg
Mercury	2.77	mg/kg
Selenium	4.21	mg/kg
Molybdenum	10.1	mg/kg
Total Potassium	0.596	% DW
Total Phosphorus	1.05	% DW
Total Nitrogen	0.775	% DW

CLASS A SLUDGE FOR CU, NI, ZN, CD AND PB.

Reviewed By: Linda Trytek

FINAL REPORT

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

AUG 2000 RECEIVED D.E.P. CENTRAL DISTRICT

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive, Zellwood, FL 32798-9799

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: JULY 1 2000 To: JULY 31 2000
LIMIT: Final
CLASS/SIZE: N/A
REPORT: Monthly
GROUP: Domestic

FACILITY: Zellwood Station MHP WWTP
LOCATION: 2126 Spillman Drive, Zellwood, FL

FACILITY ID: FLA010865
GMS ID NO.: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIIC
WAFR SITE NO.: 5843
GMS TEST SITE NO.: 3048X12578

COUNTY: Orange

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.170	.160	MGD						7/7	FLOWMETER
STORET No. 50050 Y Mon.Site No. EFP-1	Permit Measurement	0.300 (Av.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
CBOD5	Sample Measurement				10.7			mg/l		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (Av.Avg.)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				9.8	13.8		mg/l		2/30	8HR COMP
STORET No. 80082 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.9			mg/l		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (Av.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				10.8	14.5		mg/l		2/30	8HR COMP
STORET No. 00530 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.0		S.U.		7/7	GRAB
STORET No. 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Day/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W A RESTALL UTS MGR	W A Restall UTS mgr	407886 0000	8/15/2000

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MIIP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U			100mL		2/30	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				200 (Art Avg.)			#/100mL		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1U	1U		100mL		2/30	GRAB
STORET No. 31615 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max.)		#/100mL		Every Two Weeks	Grab
TRC for disinfection	Sample Measurement				2.0			MGL		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				9.7			MGL		1/30	8HR.COMP
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
$CBOD_5$	Sample Measurement				186					1/30	8HR.COMP
STORET No. 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				222					1/30	8HR.COMP
STORET No. 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility: Zellwood Station MHP WWTF

Permit Number: FLA010865

Month/Year: JULY 2000

Three month Average Daily Flow: .162 MGD

Daily Flow % of Permitted Capacity: 53%

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	.168	.165	.162	.165	.162	.165	.166	.172	.167	.161	.157	.160	.156	.153	.160	.156	.155	.159	.160	.162	.165	.168	.150	.149	.153	.150	.150	.153	.158	.161
CBOD$_5$ (mg/L), EFA-1							13.8																5.9							
CBOD$_5$ (mg/L), INF-1																							186							
TSS (mg/L), EFA-1							14.5																7.0							
TSS (mg/L), INF-1																							222							
Minimum pH (std. units), EFA-1	7.06	7.16	7.06	7.06	7.16	7.06	7.06	7.16	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06
Maximum pH (std. units), EFA-1	7.06	7.16	7.06	7.06	7.16	7.06	7.06	7.16	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06
Fecal Coliform Bacteria (#/100 mL), EFA-1							14																	14						
TRC (For Disinfection) (mg/L), EFA-1	3.0	<3.0	2.0	<3.0	2.0	<3.0	3.0	<2.5	2.0	<2.5	2.0	3.0	2.0	<3.0	2.0	3.0	2.0	<3.0	2.5	<3.0	2.5	3.0	<3.0	2.5	3.0	<3.0	2.5	3.0	<3.0	3.5
Nitrate (as N) (mg/L), EFA-1																								7.9						

Plan Staffing:

Day Shift Operator	Class A	Certificate No 2322	Name:	W A RESTAIN
Evening Shift Operator	Class A	Certificate No 3347	Name:	J R CARSON
Night Shift Operator	Class	Certificate No.	Name:	
Lead Operator	Class	Certificate No.	Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EVP. PERC

Limited Wet Weather Discharge Activated: Yes ___ No X Not Applicable ___ If yes, cumulative days of wet weather discharge: ___

*Attach additional sheets necessary to list all certified operators necessary for required operations

Tri-Tech Analytical
Laboratories, Inc.

P.O. Box 140966 • Orlando, FL 32814-0966 • (407) 275-8463
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Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

PROJECT NAME:
Waste Water Monthly Analysis

TTA Contact: J Carpenter

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT	UNITS	DATE/TIME ANALYZED	TECH
07/06/00	00-07-125-1	07/06/00 1:00pm	CBOD	5210 B	13.8 A	mg/L	*	CC
			TSS	160.2	14.5	mg/L	07/07/00	CC
				353.2		mg/L		CL
			Fecal Effluent	9222 D	1U	cfu's/100MLS	07/06/00 4:30pm	RS/MM

CBOD Date & Time Setup: 07/07/00 12:00pm5pm
Date & Time Read: 07/12/00 1:00pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

Reviewed By :
Title : Quality Control Director
Date Reviewed : July 13,2000

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DHRS #83359 & #E83294
DEP #900405G
AIHA #169077

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See us on the web at : http://www.tri-techlabs.com

Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

PROJECT NAME:
Waste Water Monthly Analysis

TTA Contact: J Carpenter

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT	UNITS	DATE/TIME ANALYZED	TECH
07/24/00	00-07-790-1	07/24/00 10.00am	CBOD TSS Influent	5210 B 160.2	186 A 222	mg/L mg/L	* 07/25/00	CC CC
07/24/00	00-07-790-2 00-07-790-3	07/24/00 10:00am	CBOD TSS Nitrate Fecal Effluent	5210 B 160.2 353.2 9222 D	5.8 A 7.0 9.97 1 U	mg/L mg/L mg/L cfu's/100MLS	* 07/25/00 07/26/00 07/24/00 2:45pm	CC CC CL RS//MM

*CBOD Date & Time Setup: 07/26/00 9:00am5pm
Date & Time Read: 07/31/00 10:00am

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported in the minimum detection limit.

Reviewed By :
Title : Quality Control Director
Date Reviewed : August 02, 2000

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DHRS #83359 & #E83294
DEP #900405G
AIHA #169077

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulev Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

COUNTY: Orange

SEP 2000 RECEIVED D.E.P. CENTRAL DISTRICT

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: AUG 1 2000 To: AUG 31 2000
LIMIT: Final
REPORT: Monthly
CLASS SIZE: N/A
GROUP: Domestic

FACILITY ID: FLA010865
GMS ID NO: 3048P01-13R
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: HIC
WATER SITE NO: 5841
GMS TEST SITE NO: 3048X12578

DEC - 1 2000

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
	Sample Measurement	.170	.146	MGD					7/7	FLOW METER	
STORET No. 50050 Y Mon.Site No. EFA-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement				10.4			mg/L		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)					Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement				7.2	7.1		mg/L		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max)				Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.7			mg/L		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)					Every Two Weeks	8-hour FPC
TSS	Sample Measurement				7.3	11.3		mg/L		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max)				Every Two Weeks	8-hour FPC
	Sample Measurement				6.7	7.1		S.U.		7/7	GRAB
STORET No. 00406 Y Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max)		S.U.		7 Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W A RESTALL UTS MGR	W A Restall uts mgr	407 886 0000	9/15/2000

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1 U			100ml		2/30	GRAB
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				200 (Mo.Avg.)			#/100ml		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1 U	1 U		100ml		2/30	GRAB
STORET No. 31615 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max)		#/100ml		Every Two Weeks	Grab
TRC for disinfection	Sample Measurement				2.0			MGL		7/7	GRAB
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		7 Days/Week	Grab
Nitrate (as N)	Sample Measurement				1.4			MGL		1/30	8HRCOMP
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
CBOD5	Sample Measurement				243.			MGL		1/30	8HRCOMP
STORET No. 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				252.			MGL		1/30	8HRCOMP
STORET No. 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Three month Average Daily Flow: 0.155 MGD

Daily Flow % of Permitted Capacity: 49%

it Number: FLA010865

Facility: Zellwood Station MHP WWTF

d/Year: AUG 2000

s of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
meter/Unit/Monitoring Location Site Number																														
w (mgd), EFF-1	1.06	1.60	1.52	1.54	1.50	1.48	1.46	1.44	1.45	1.42	1.46	1.39	1.47	1.45	1.49	1.49	1.45	1.49	1.50	1.54	1.50	1.55	1.58	1.55	1.50	1.58	1.55	1.60	1.61	1.55
CO_D (mg/L), EFA-1									9.1													5.2								
(mg/L), INF-1																						2.8								
(mg/L), EFA-1									11.3													3.3								
(mg/L), INF-1																						252								
inimum pH (std. units), EFA-1	6.86	7.02	7.01	7.06	7.02	7.02	7.01	7.02	7.02	7.01	7.06	7.02	7.02	7.01	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06
ximum pH (std. units), EFA-1	6.86	7.02	7.01	7.06	7.02	7.02	7.01	7.02	7.02	7.01	7.06	7.02	7.02	7.01	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06	7.06
al Coliform Bacteria (#/100 mL), EFA-1									14													16								
C (For Disinfection) (mg/L), EFA-1	3.0	3.0	2.0	3.0	3.5	3.0	3.5	3.0	2.5	3.0	3.5	3.5	3.5	3.0	3.5	3.5	3.0	3.0	3.0	4.5	4.0	3.5	3.0	2.5	3.0	3.5	3.0	2.8	3.0	3.0
rate (as N) (mg/L), EFA-1																						1.4								

on Staffing:

ay Shift Operator	Class A	Certificate No 7322	Name:	W A RESTALL
vening Shift Operator	Class A	Certificate No 3347	Name:	J R CARSON
ight Shift Operator	Class	Certificate No.	Name:	
ead Operator	Class	Certificate No.	Name:	

ype of Effluent Disposal or Reclaimed Water Reuse: EUIP - PERC

mited Wet Weather Discharge Activated: Yes ___ No ___ Not Applicable ___ If yes, cumulative days of wet weather discharge: -0-

Attach additional sheets necessary to list all certified operators necessary for required operations.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32801-3767

OCT 2000, RECEIVED D.E.P. CENTRAL DISTRICT

PERMITTEE NAME: Zellwood Station Co-Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

COUNTY: Orange

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: SEPT 1, 2000 To: SEPT 30 2000
LIMIT: Final
CLASS SIZE: N/A

FACILITY ID: FLA010865
GMS ID NO.: 3048P01418
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: HIC

REPORT: Monthly
GROUP: Domestic

WATER SITE NO.: 5843
GMS TEST SITE NO.: 3048X12528

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.177	.166	MGD						7/7	FLOWMETER
STORET No. 50050 Y Mon.Site No. EFF-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement				10.1			MGL		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement				7.6	7.8		MGL		2/30	8HR COMP
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				10.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.6			MGL		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.1	13.7		MGL		2/30	8HR COMP
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.0		S.U.		7/7	GRAB
STORET No. 00400 Y Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		7 Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
WA RESTALL MGR	Wa Restall	407 8860000	10/15/2000

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITOR ? REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1U		100mL			2/30	GRAB
STORET No. 31615 Y	Permit Measurement				200 (Mo Avg.)			#/100ml		Every Two Weeks	Grab
Mon Site No. EFA-1											
Fecal Coliform Bacteria	Sample Measurement				1U	1U	100mL			2/30	GRAB
STORET No. 31615 1	Permit Measurement				Report (Mo Geo Mean)	800 (Max)		#/100ml		Every Two Weeks	Grab
Mon Site No. EFA-1											
TRC for disinfection	Sample Measurement				2.0		ml			7/7	GRAB
STORET No. 50060 A	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Mon.Site No. EFA-1											
Nitrate (as N)	Sample Measurement				9.7		ml			1/30	8HR COMP
STORET No. 00620 1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
Mon Site No. EFA-1											
CBOD5	Sample Measurement				266.		ml			1/30	8HR COMP
STORET No. 80082 Q	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
Mon Site No. INF-1											
TSS	Sample Measurement				402.		ml			1/30	8HR COMP
STORET No. 00530 Q	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
Mon Site No. INF-1											
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

RECEIVED D.E.P. CENTRAL DISTRICT OCT 2000

DAILY SAMPLE RESULTS - PART B

Facility: Zellwood Station-MHP WWTF

Three month Average Daily Flow: .157 MGD

Daily Flow % of Permitted Capacity: 55%

...ut Number: FLA010865

...th/Year: SEPT 2000

...s of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
...meter/Unit/Monitoring Location Site Number																														
...w (mgd), EFF-1	.16	.170	.171	.157	.170	.16	.159	.165	.160	.159	.159	.150	.162	.166	.161	.158	.160	.162	.166	.166	.166	.165	.160	.165	.168	.167	.168	.166	.162	.164
...OD5 (mg/L), EFF-1													7.8															23		
...OD5 (mg/L), INF-1																												266		
...S (mg/L), EFF-1													13.7															4.4		
...S (mg/L), INF-1																												402		
...inimum pH (std. units), EFF-1	6.9	7.0	6.9	6.9	6.9	6.9	7.0	6.8	6.7	6.8	6.7	6.8	6.9	6.8	6.8	6.9	6.8	7.0	6.8	6.9	6.8	6.9	6.8	6.8	6.8	6.9	7.0	6.7	6.8	6.9
...aximum pH (std. units), EFF-1	6.9	7.0	6.9	6.9	6.9	7.0	6.8	6.7	6.8	6.7	6.8	6.9	6.8	6.8	6.9	6.8	7.0	6.8	6.9	6.8	6.7	6.8	6.8	6.8	6.9	7.0	6.9	6.7	6.8	6.9
...cal Coliform Bacteria (#/100 mL), EFF-1													14.															14		
...RC (For Disinfection) (mg/L), EFF-1	3.0	3.5	4.0	5.0	5.0	3.5	3.0	2.8	2.5	3.2	3.8	3.0	3.0	3.5	3.0	3.5	3.0	2.5	3.0	2.5	4.0	3.5	3.0	3.5	4.0	3.5	3.0	2.5	3.0	3.5
...trate (as N) (mg/L), EFF-1													9.7																	

RECEIVED
OCT 2000
D.E.P. CENTRAL DISTRICT

Plant Staffing:

Day Shift Operator	Class A	Certificate No 7322	Name:	WA RESTAIN
Evening Shift Operator	Class A	Certificate No 3347	Name:	JR CARSON
Night Shift Operator	Class	Certificate No	Name:	
Lead Operator	Class	Certificate No.	Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EUP - PERC

Limited Wet Weather Discharge Activated: Yes ____ No X Not Applicable ____ If yes, cumulative days of wet weather discharge: N/A

* Attach additional sheets necessary to list all certified operators necessary for required operations.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT

When Completed mail this report to: Department of Environmental Protection, 1319 Magnolia Boulevard Suite 232, Orlando FL, 32801-3767

DEC 2000 RECEIVED D.E.P. CENTRAL DISTRICT

PERMITTEE NAME: Zellwood Station Co Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

COUNTY: Orange

PERMIT NUMBER: FL0010863
MONITORING PERIOD From: Nov 1 To: Nov 30 2000
LIMIT: Final
CLASS SIZE: N/A

FACILITY ID: FL0010863
GMS ID NO.: 3018P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: HIC

REPORT: Monthly
GROUP: Domestic

WAFR SITE NO.: 5843
OMS TEST SITE NO.: 3048X12578

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.173	.188	MGD						CONT. FLOWMETER	
STORET No. 50050 Y Mon Site No. EFA-1	Permit Measurement	0.300 (An Avg.)	Report (Mo Avg.)	mgd						Continuous	Flow Meter
CBOD5	Sample Measurement				9.6			MGL		2/30	8 HR COMP
STORET No. 80082 Y Mon Site No. EFA-1	Permit Measurement				20.0 (An Avg.)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				6.9	7.5		MGL		2/30	8 HR COMP
STORET No. 80082 Y Mon Site No. EFA-1	Permit Measurement				30.0 (Mo Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				9.7			MGL		2/30	8 HR COMP
STORET No. 00530 Y Mon Site No. EFA-1	Permit Measurement				20.0 (An Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				7.1	9.4		MGL		2/30	8 HR COMP
STORET No. 00530 Y Mon Site No. EFA-1	Permit Measurement				30.0 (Mo Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.0		S.U.		2/7	GRAB
STORET No. 00400 Y Mon Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max)		S.U.		5 days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
WA RESTALL UTS MGR	Wa Restall	4078860000	12/15/20

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

FACILITY NAME: Yellowood Station MHP WWTF | PERMIT NUMBER: FLA010863 | DISCHARGE POINT NUMBER: R001 | WAFR ST. ...5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1 U			100 mL		2/30	GRAB
STORET No. 31613 Y	Permit Requirement				200 (Mo Avg.)			#/100ml		Every Two Weeks	Grab
Mon Site No. EFA-1											
Fecal Coliform Bacteria	Sample Measurement				1 U	1 U		100 mL		2/30	GRAB
STORET No. 31613 Y	Permit Requirement				Report (Mo Geo. Mean)	800 (Max)		#/100ml		Every Two Weeks	Grab
Mon Site No. EFA-1											
TRC for disinfection	Sample Measurement				2.0			mg/L		7/7	GRAB
STORET No. 50060 A	Permit Requirement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Mon Site No. EFA-1											
Nitrate (as N)	Sample Measurement				4.7			mg/L		1/30	8 HR COMP
STORET No. 00620 Y	Permit Requirement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
Mon Site No. EFA-1											
CBOD5	Sample Measurement				2.4			mg/L		1/30	8 HR COMP
STORET No. 80082 Q	Permit Requirement				Report (Mo. Avg.)			mg/L		Monthly	8-hour FPC
Mon Site No. INF-1											
TSS	Sample Measurement				19.6			mg/L		1/30	8 HR COMP
STORET No. 00530 Q	Permit Requirement				Report (Mo. Avg.)			mg/L		Monthly	8-hour FPC
Mon Site No. INF-1											
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865

Facility: Zellwood Station MHP WWTF

Three month Average Daily Flow: 176 MGD

Daily Flow % of Permitted Capacity: 63%

Month/Year: Nov 2000

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	182	180	176	180	185	186	188	190	191	189	185	193	190	191	190	191	192	185	191	186	185	187	192	190	188	189	187	189	188	191
BOD5 (mg/L), EFF-1									6.3							7.5														
BOD5 (mg/L), INF-1																214														
TSS (mg/L), EFF-1									2.4							4.9														
TSS (mg/L), INF-1																196														
Minimum pH (std. units), EFF-1	6.8	6.8	6.8	7.0	6.9	7.0	7.0	7.0	6.8	6.8	7.0	6.9	7.0	6.9	7.0	6.8	7.0	6.9	7.0	7.0	6.8	7.0	6.9	6.8	6.8	7.0	6.9	7.0	7.0	6.8
Maximum pH (std. units), EFF-1	6.8	6.8	6.8	7.0	6.9	7.0	7.0	7.0	6.8	6.7	7.0	6.9	7.0	6.9	7.0	6.8	7.0	6.9	7.0	7.0	6.8	7.0	6.9	6.8	6.8	7.0	6.9	7.0	7.0	6.8
Fecal Coliform Bacteria (#/100 mL), EFF-1																10														
TRC (For Disinfection) (mg/L), EFF-1	3.5	3.0	2.5	3.0	2.8	3.0	2.8	2.5	2.2	2.5	2.8	2.0	3.0	2.5	3.5	4.0	2.5	2.1	2.3	2.2	3.0	2.8	3.2	3.2	2.0	2.5	2.0	4.0	2.5	4.7
Nitrate (as N) (mg/L), EFF-1																														

Plan Staffing:

Day Shift Operator	Class A	Certificate No 7322	Name:	W A RESTAIL
Evening Shift Operator	Class A	Certificate No 3347	Name:	J R CARSON
Night Shift Operator	Class	Certificate No.	Name:	
Lead Operator	Class	Certificate No.	Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EUP - PERC

Limited Wet Weather Discharge Activated: Yes ___ No X Not Applicable ___ If yes, cumulative days of wet weather discharge: ___

*Attach additional sheets necessary to list all certified operators necessary for required operations.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT

When Completed mail this report to: Department of Environmental Protection, Central District, 1119 Magnolia Boulevard Suite 212, Orlando FL, 32803-3767

PERMITTEE NAME: Zellwood Station Co Op, Inc.
MAILING ADDRESS: 2126 Spillman Drive
Zellwood, FL 32798-9799

FACILITY: Zellwood Station MHP WWTF
LOCATION: 2126 Spillman Drive
Zellwood, FL

COUNTY: Orange

JAN 2001 RECEIVED D.E.P. CENTRAL DISTRICT

PERMIT NUMBER: FLA010865
MONITORING PERIOD From: DEC 1 To: DEC 31 2000
LIMIT: Final
REPORT: Monthly
CLASS SIZE: N/A
GROUP: Domestic

FACILITY ID: FLA010865
GMS ID NO: 3048P01438
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: HRC

WAFR SITE NO.: 5843
OMS TEST SITE NO: 3048X12578

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.173	.192	MGD						CONT	FLOWMETER
STORET No. 50050 Y Mon Site No. EFA-1	Permit Measurement	0.200 (An Avg.)	Report (Mo Avg.)	mgd						Continuous	Flow Meter
CBOD5	Sample Measurement				5.5			mg/L		2/30	8HR COMP
STORET No. 80082 Y Mon Site No. EFA-1	Permit Measurement				20.0 (An Avg.)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				2.6	2.9		mg/L		2/30	8HR COMP
STORET No. 80082 Y Mon Site No. EFA-1	Permit Measurement				30.0 (Mo Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				8.9			mg/L		2/30	8HR COMP
STORET No. 00530 Y Mon Site No. EFA-1	Permit Measurement				20.0 (An Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				7.5	14.0		mg/L		2/30	8HR COMP
STORET No. 00530 Y Mon Site No. EFA-1	Permit Measurement				30.0 (Mo Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement				6.7	7.0		S.U.		7/7	GRAB
STORET No. 00400 Y Mon Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max)		S.U.		5 Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
W A RESTALL CTS MGR	W A Restall	407 886 0000	1/21/2001

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

FACILITY NAME: Zellwood Station MHP WWTF

PERMIT NUMBER: FL0010863

DISCHARGE POINT NUMBER: R001

WAFR 511 : 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement				1L			ml		2/30	GRAB
STORET No. 31613 Y Mon Site No. EFA-1	Permit Requirement				200 (Mo Avg)			#/100ml		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement				1L	1L		ml		2/30	GRAB
STORET No. 31616 1 Mon Site No. EFA-1	Permit Requirement				Report (Mo Geo Mean)	800 (Max)		#/100ml		Every Two Weeks	Grab
TRC for disinfection	Sample Measurement				2.0			mL		2/2	GRAB
STORET No. 50060 A Mon Site No. EFA-1	Permit Requirement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement				10.7			mL		2/30	8HR Comp
STORET No. 00620 1 Mon Site No. EFA-1	Permit Requirement				12.0 (Max)			mg/L		Monthly	8-hour FPC
CBOD5	Sample Measurement				26.8			mL		1/30	8HR Comp
STORET No. 80082 0 Mon Site No. INF-1	Permit Requirement				Report (Mo Avg)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement				6.0			mL		1/30	8HR Comp
STORET No. 00530 1 Mon Site No. INF-1	Permit Requirement				Report (Mo Avg)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865

Facility: Zellwood Station MFP WWTF

Three month Average Daily Flow: .184 mgd

Daily Flow % of Permitted Capacity: 64%

Month/Year: DEC 2001

Days of the Months	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Parameter/Unit/Monitoring Location Site Number																														
Flow (mgd), EFF-1	.190	.186	.182	.189	.189	.191	.185	.174	.196	.192	.183	.190	.174	.185	.188	.184	.190	.185	.174	.187	.196	.192	.200	.202	.205	.201	.192	.187		
BOD_5 (mg/L), EFA-1												7.3																2.5		
BOD_5 (mg/L), INF-1																												2.5		
TSS (mg/L), EFA-1												14.0																1.0		
TSS (mg/L), INF-1																												6.0		
Minimum pH (std. units), EFA-1	6.8	6.9	6.8	6.9	7.0	6.8	6.8	6.7	6.8	6.7	6.8	6.7	6.8	6.7	6.8	6.7	6.9	7.0	7.0	6.8	6.8	6.9	6.8	6.9	6.7	6.7	6.8	6.9	6.9	6.9
Maximum pH (std. units), EFA-1	6.8	6.9	6.8	6.9	7.0	6.8	6.8	6.7	6.8	6.7	6.8	6.7	6.8	6.7	6.8	6.7	6.9	7.0	7.0	6.8	6.8	6.9	6.8	6.9	6.7	6.7	6.8	6.9	6.9	6.9
Fecal Coliform Bacteria (#/100 mL), EFA-1												LL																14		
TRC (For Disinfection) (mg/L), EFA-1	3.5	2.0	2.6	3.0	3.5	3.0	3.2	3.0	3.2	2.8	3.0	5.0	5.9	3.5	3.0	3.5	2.8	2.9	3.0	3.5	3.5	3.0	3.5	3.0	2.8	3.5	4.0	3.5	3.0	3.0
Nitrate (as N) (mg/L), EFA-1												7.2																10.7		

Plant Staffing:

Day Shift Operator	Class A	Certificate No. 7322	Name:	WA RESTALL
Evening Shift Operator	Class A	Certificate No 3347	Name:	J.R. CARSON
Night Shift Operator	Class	Certificate No	Name:	
Lead Operator	Class	Certificate No.	Name:	

Type of Effluent Disposal or Reclaimed Water Reuse: EVP - PERC

Limited Wet Weather Discharge Activated: Yes ___ No ___ Not Applicable X If yes, cumulative days of wet weather discharge: ___

* Attach additional sheets necessary to list all certified operators necessary for required operations.

Tri-Tech Analytical
Laboratories, Inc.

P.O. Box 140966 • Orlando, FL 32814-0966 • (407) 275-8463
See us on the web at : http://www.tri-techlabs.com

Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

PROJECT NAME:
Waste Water Monthly Analysis

TTA Contact: C. Tiger

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT	UNITS	DATE/TIME ANALYZED	TECH
12/12/00	00-12-441-1	12/12/00 11am	CBOD	5210 B	7.3 A	mg/L	*	LT
			TSS	160.2	14.0	mg/L	12/13/00	CL
			Nitrate	353.3	7.24	mg/L	12/13/00 4:00pm	CL
			Fecal	9222 D	1U	cfu's/100MLS	12/12/00 4:30pm	RS/MM
			Effluent					

CBOD Date & Time Setup: 12/13/00 8:00am-2:00pm
Date & Time Read: 12/18/00 2:00pm

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported is the minimum detection limit.

Reviewed By : Tamara Rae
Title : Quality Control Director
Date Reviewed : December 19, 2000

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DOH #E83294
DEP #900405G
AIHA #169077

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Zellwood Station
2126 Spillman Dr.
Zellwood, Florida 32798
Attention: Mr. Bill WaRestall

PROJECT NAME:
Waste Water Monthly Analysis

TTA Contact: C. Tiger

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT	UNITS	DATE/TIME ANALYZED	TECH
12/28/00	00-12-1017-1	12/28/00 11:00am	CBOD TSS Influent	5210 B 160.2	268 A 610	mg/L mg/L	* 01/02/01	LT CL
09/28/00	00-12-1017-2	12/28/00 11:00am	CBOD TSS Nitrate Effluent	5210 B 160.2 353.3	7.9 A 1.0 U 10.7	mg/L mg/L cfu's/100MLS	* 01/02/01 12/29/00 2:00pm	LT CL RS//MM

*CBOD Date & Time Setup: 12/28/00 8:00am5pm
Date & Time Read: 01/02/01 8:00am

A - Value reported is the mean of two determinations.
U - Material was analyzed for but not detected;
The value reported is the minimum detection limit.

Reviewed By :
Title : Quality Control Director
Date Reviewed : January 22, 2001

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DOH #E83294
DEP #900405G
AIHA #169077

SF 9/15

Department of Environmental Protection

Jeb Bush
Governor

Central District
3319 Maguire Boulevard, Suite 232
Orlando, Florida 32803-3767

David B. Struhs
Secretary

September 15, 2000

Zellwood Station
2126 Spillman Drive
Zellwood, FL 32798

OCD-PW-SS-00-0647

Attention: William Restall

Orange County - PW
PWS Name: Zellwood Station
PWS ID Number: 3481506

Dear Mr. Restall:

The Department conducted a sanitary survey of your public water system on September 13, 2000. This inspection was conducted by Mary Pace in your presence. A copy of the sanitary survey report is enclosed for your reference and records.

There were no deficiencies at your water plant at the time of our visit. The overall operation of the water plant was good, which is a credit to both you and your operator. The Department appreciates the excellent work being done on your water system and values your continued spirit of cooperation in complying with Department rules.

If you have any questions concerning this letter, please contact Mary Pace at the above address, or by phone at (407) 893-3319, extension 2294.

Sincerely,

Roberto C. Ansag
Roberto C. Ansag, Environmental Manager
Drinking Water Compliance/Enforcement

RCA/mp
Enclosure

cc: Orange County Public Health Unit

State of Florida
Department of Environmental Protection
Central District

SANITARY SURVEY REPORT

Plant Name ZELLWOOD STATION County Orange PWS ID # 3481506
Plant Location 2126 Spillman Dr. Zellwood, Phone 407-886-0000
Owner Name same Phone
Owner Address same
Contact Person Bill Restall Title Operator Phone same
This Survey Date 9/13/00 Last Survey Date 4/8/97 Last C.I. Date 3/23/99

PWS TYPE & CLASS
- [x] Community (4C)
- [ ] Non-transient Non-community
- [ ] Non-Community

PWS STATUS
- [x] Approved system with approval number & date
  B-14862 7-8-74
  WD48-162476 9-8-89
- [ ] Unapproved system

SERVICE AREA CHARACTERISTICS
residential mobile home park

Food Service: [ ] Yes [x] No [ ] N/A

OPERATION & MAINTENANCE
Certified Operator: [x] Yes [ ] No [ ] Not required
Operator(s) & Certification Class-Number
Bill Restall B-6839

O & M Log: [x] Yes [ ] No [ ] Not required
Operator Visitation Frequency
Hrs/day: *Required* 1 *Actual*
Days/wk: *Required* 6 *Actual* 7
Non-consecutive Days? [ ] Yes [ ] No [x] N/A
MORs submitted regularly? [x] Yes [ ] No [ ] N/A
Data missing from MORs? [x] No [ ] Yes [ ] N/A

Number of Service Connections 1115
Population Served 2230 Basis Util. records
Average Day (from MORs) 381,167 gpd
Max. Day (from MORs) 919,000 gpd
Max-day Design Capacity 1.25 MGD
Comments

COMET: SITE ID PROJECT ID

RAW WATER SOURCE
- [x] GROUND; Number of Wells 2
- [ ] SURFACE/UDI; Source
- [ ] PURCHASED from PWS ID #
- [ ] Emergency Water Source
  Emergency Water Capacity

AUXILIARY POWER SOURCE
[x] Yes [ ] None [ ] Not Required
Source Diesel
Capacity of Standby (kW)
Switchover: [x] Automatic [ ] Manual
Standby Plan: [x] Yes [ ] No
Hrs Operated Under Load 1 hr/wk.
What equipment does it operate?
- [x] Well pumps
- [x] High Service Pumps
- [x] Treatment Equipment

Satisfy 1/2 max-day demand? [x] Yes [ ] No [ ] Unk
Comments

TREATMENT PROCESSES IN USE
Pre & post chlorination
aeration
What additional treatment is needed?

For control of what deficiencies?

DISTRIBUTION SYSTEM
Flow Measuring Device Flow Meter
Meter Size & Type Water Specialties
Backflow Prevention Devices: [x] Yes [ ] No
Cross-connections none noted
Written Cross-connection Control Program: Yes
Coliform Sampling Plan: [x] Yes [ ] No [ ] N/A
Comments

PWS ID # 3481506
Date 9/13/00

GROUND WATER SOURCE

Well Number		1	2		
Year Drilled		1974	1981		
Depth Drilled		420 ft.	560 ft.		
Drilling Method			Cable tool		
Type of Grout			Neat cement		
Static Water Level		73 ft.	80 ft.		
Pumping Water Level			89 ft.		
Design Well Yield					
Test Yield		1430 gpm	1600 gpm		
Actual Yield (if different than rated capacity)					
Strainer					
Length (outside casing)		317 ft.	231 ft.		
Diameter (outside casing)		12 in.	12 in.		
Material (outside casing)		Blk iron	Blk iron		
Well Contamination History		None	None		
Is inundation of well possible?		No	No		
6' X 6' X 4" Concrete Pad		OK	OK		
SET BACKS	Septic Tank	>200 ft.	>200 ft.		
	Reuse Water				
	WW Plumbing				
	Other Sanitary Hazard				
PUMP	Type	V. Turbine	V. Turbine		
	Manufacturer Name	Worthington	Worthington		
	Model Number				
	Rated Capacity (gpm)	1200	1200		
	Motor Horsepower	50	50		
Well casing 12" above grade?		OK	OK		
Well Casing Sanitary Seal		OK	OK		
Raw Water Sampling Tap		OK	OK		
Above Ground Check Valve		OK	OK		
Fence/Housing		OK	OK		
Well Vent Protection					

COMMENTS Well #1 has pre-chlorination and a propane-fed auxillary generator.

PWS ID # 3481506
Date 9/13/00

CHLORINATION (Disinfection)
Type: ☒ Gas ☐ Hypo
Make Regal Capacity 100 gpd
Chlorine Feed Rate _____
Avg. Amount of Cl_2 gas used N/A
Chlorine Residuals: Plant 1.28 Remote _____
Remote tap location _____
DPD Test Kit: ☒ On-site ☐ With operator
☐ None ☐ Not Used Daily
Injection Points _____
Booster Pump Info _____
Comments continous chlorine analyzer in use.
Operator also has manual DPD-type test kit.

Chlorine Gas Use Requirements	YES	NO	Comments
Dual System	☒	☐	
Auto-switchover	☒	☐	
Alarms:			
Loss of Cl_2 capability	☒	☐	
Loss of Cl_2 residual	☒	☐	
Cl_2 leak detection	☒	☐	
Scale	☒	☐	
Chained Cylinders	☒	☐	
Reserve Supply	☒	☐	
Adequate Air-pak	☒	☐	
Sign of Leaks	☐	☒	
Fresh Ammonia	☒	☐	
Ventilation	☒	☐	
Room Lighting	☒	☐	
Warning Signs	☒	☐	
Repair Kits	☒	☐	
Fitted Wrench	☒	☐	
Housing/Protection	☒	☐	

AERATION (Gases, Fe, & Mn Removal)
Type cascade Capacity 1800 gpm
Aerator Condition good
Bloodworm Presence none
Visible Algae Growth none
Protective Screen Condition good
Comments _____

STORAGE FACILITIES
(G) Ground (H) Hydropneumatic (E) Elevated
(B) Bladder (C) Clearwell

Tank Type/Number	G	H	
Capacity (gal)	250,000	15,000	
Material	concrete	steel	
Gravity Drain		Yes	
By-pass Piping		Yes	
Pressure Gauge		Yes	
Sight Glass or Level Indicator	Yes	Yes	
Fittings for Sight Glass			
Protected Openings		Yes	
PRV/ARV		Both	
On/Off Pressure		45/60	
Access Padlocked		Yes	
Height to Bottom of Elevated Tank			
Height to Max. Water Level			

Comments _____

HIGH SERVICE PUMPS

Pump Number	1	2	3
Type	centri	centri	centri
Make	Peerless	Sta-Rite	Bell Gos
Model			
Capacity (gpm)	500	840	1000
Motor HP	25	50	50
Date Installed	1974	1986	1999
Maintenance			

Comments _____

PWS ID # 3481506
Date 9/13/00

COMPLIANCE MONITORING
COMMUNITY PUBLIC WATER SYSTEMS

CONTAMINANT	PWS Screen	# Samples Required	Sampling Location	C > 3300			C ≤ 3300		
				Frequency	Sample Date	Due Date	Frequency	Sample Date	Due Date
Microbiological (Bacte)	024	1	Each well	monthly			monthly	7/00	Each month
		2	Distribution					7/00	2000
Volatile Organics	028	*(Note A)*	*(Note H)*	*(Notes A, 1)*			*(Notes A, 2)*	3/00	2003
Pesticides & PCBs	029	*(Notes B, E)*	*(Note H)*	3 years *(Note 1)*			3 years *(Note 2)*	3/99	1st qtr. 2003
Nitrate & Nitrite (as N)	030	1	POE	annually			annually	3/00	2001
Inorganics	030	1	POE	3 years *(Note 1)*			3 years *(Note 2)*	3/00	2003
Asbestos	030	1 *(Note F)*	Distribution	9 years *(Note 7)*			9 years *(Note 8)*	1/94	2003
Secondaries	031	1	POE	3 years *(Note 1)*			3 years *(Note 2)*	3/00	2003
Radionuclides	033	*(Note C)*	POE	3 years *(Note 1)*			3 years *(Note 2)*	3/00	2003
Group I UOCs	035	*(Notes B, E, G)*	POE	*(Note 4)*			*(Note 5)*		Per EPA
Group II UOCs	034	1 *(Notes E,G)*	POE	3 years *(Note 1)*			3 years *(Note 2)*		Per EPA
Group III UOCs	036, 037	1 *(Note G)*	POE	*(Note 4)*			*(Note 5)*		Per EPA
Lead and Copper	047	*(Note D)*	---	---			---	6/99-9/99	6/02-9/02
TTHM (≥ 10,000 persons)	027	4/plant	Distribution	Quarterly			N/A	N/A	N/A

POE = Point of Entry (Samples shall be taken at each entry point to the distribution system that is representative of each source after treatment.)

See Page 5 for description of italicized notes.

PWS ID # 3481506
Date 9/13/00

NOTES:

SAMPLES REQUIRED/SAMPLING LOCATION:

Note A See Rule 62-550.515(1), F.A.C. Each system shall take four consecutive quarterly samples during its assigned year in the system's first compliance period. If no contaminant is detected, the system shall monitor annually during the next three-year compliance period. If still no contaminants are detected, systems shall take one sample during each subsequent three-year compliance period.

If the initial monitoring for contaminants listed in Rule 62-550.310(2)(b), F.A.C., was completed prior to December 31, 1992, then each system shall take one sample annually beginning January 1, 1993.

Note B 4 consecutive quarterly samples. Credit will be given for samples taken before January 1, 1993.

Note C See Rule 62-550.519, F.A.C. Compliance shall be based on the average of analyses of four consecutive quarterly samples. A maximum of two quarterly samples may be composited. Subsequent samples shall be collected once every three years.

Note D Contact the Central District's Drinking Water Program at (407) 894-7555 or contact the Florida Rural Water Association.

Note E Contact Ms. Marie Carrasquillo of the Central District's Drinking Water Program at (407) 894-7555, extension 2242, to obtain an application for reduced monitoring.

Note F See Rule 62-550.511(4), F.A.C. A system without asbestos-containing components shall certify to the Department in writing, using DEP Form No. 62-555.910(10), that it is asbestos free. Certification shall satisfy subsections (1), (2), and (3) of the referenced rule, and shall be submitted each nine-year compliance cycle during the specified year the system is required to monitor.

Note G See Rule 62-550.521(4), F.A.C. Systems serving less than 150 service connections and serving fewer than 350 persons should notify the Department, by submitting DEP Form No. 62-555.910(11), that their system is available for testing. Normally, these small systems will not be required to monitor for UOCs. Do not send such samples to the Department unless required to do so by the Department.

Note H First quarter samples shall be representative of each well. Subsequent samples shall be taken at each entry point to the distribution system that is representative of each source after treatment.

FREQUENCY:

Note 1 First year of each three-year compliance period (calendar years 1993, 1996, 1999, etc.)

Note 2 Second year of each three-year compliance period (calendar years 1994, 1997, 2000, etc.)

Note 3 Third year of each three-year compliance period (calendar years 1995, 1998, 2001, etc.)

Note 4 First year of the first three-year compliance period (i.e. calendar year 1993)

Note 5 Second year of the first three-year compliance period (i.e. calendar year 1994)

Note 6 Third year of the first three-year compliance period (i.e. calendar year 1995)

Note 7 First year of each nine-year compliance cycle (calendar years 1993, 2002, etc.)

Note 8 Second year of each nine-year compliance cycle (calendar years 1994, 2003, etc.)

Note 9 Third year of each nine-year compliance cycle (calendar years 1995, 2004, etc.)

PWS ID # 3481506
Date 9/13/00

DEFICIENCIES:

None noted at time of visit. Thanks!! System looks good.

Inspector [illegible] Title Env. Specialist III Date 9-15-00

Approved by Roberto C. Camacho Title Environmental Manager Date 9/15/00

ENVIRONMENTA 'ROTECTION DIVISION
ANNA H. LONG, *Manager*
Leeds Commerce Center
800 Mercy Drive, Suite 4
Orlando, Florida 32808-7896
407-836-1400 ▪ Fax 407-836-1499
www.onetgov.net

Emailed
PW 10/16

CERTIFIED MAIL: 7099 3220 0002 8770 2716

RECEIVED
DEP CENTRAL DISTRICT

September 26, 2000

Mr. William Rustall
Zellwood Station
2126 Spillman Drive
Zellwood, Florida 32798

RE: Domestic Wastewater Treatment Facility -- Zellwood Station
OCEPD Permit: DO96-03 Expires: June 19, 2002

Dear Mr. Rustall:

On September 18, 2000, an inspection of the above-referenced facility was conducted by a representative of this Division. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from a review of the records on file in this office, the following permit non-compliance issues were noted.

1. The clarifier surface skimmer was not operational and is in need of repair or replacement.

2. A severe air leak has developed in the air header at the diffuser.

3. The R.A.S. splitter box has deteriorated and also needs to be repaired or replaced.

Your written response is required within ten (10) days of receipt of this letter indicating the corrective actions initiated.

Sincerely,

Mark Overstreet
Environmental Specialist

(2)MO/CS/DW:ra

Enclosure

cc: Florida Department of Environmental Protection
Central File

001-068-2420-4343
INVOICE TO FOLLOW

ORANGE COUNTY ENVIRONMENTAL PROTECTION DEPARTMENT
COMPLIANCE INVESTIGATION CHECKLIST
WASTEWATER TREATMENT FACILITIES (DOMESTIC)

Facility Name: ZELLWOOD STATION
Mailing Address: 2126 SPILLMAN DR. ZELLWOOD FL
Orange Co. Permit # 32798
State Permit # D096-03

Date: 9-18-00
Owner:
Attn: William Rustall
Expires: 6-19-2002
Type: 3C

Permit Verification:

1.	Has permit been reviewed prior to inspection?	~~Yes~~	No	N/A
2.	Correct name and mailing address of permittee.	~~Yes~~	No	N/A
3.	Facility is as described in permit	~~Yes~~	No	N/A
4.	Amendments to permit	Yes	~~No~~	N/A
	Explain:			

Compliance Schedules:

1.	Permittee meeting compliance schedules?	~~Yes~~	No	N/A
2.	Facility submitting all monitoring data as required by the permit?	~~Yes~~	No	N/A
3.	Extenuating circumstances which would affect the permittee's Compliance schedules?	Yes	~~No~~	N/A

Records and Reports:

1.	Records and reports maintained as required by permit. If no explain:	~~Yes~~	No	N/A
2.	Is Monthly Operating Report complete and received in a timely manner?	~~Yes~~	No	N/A
3.	Is operator's daily log on site and up to date?	~~Yes~~	No	N/A
4.	Sludge analysis on file	~~Yes~~	No	N/A
5.	Current well monitoring data, if required.	~~Yes~~	No	N/A

Facility Site Review:

Headworks

1.	Lift station, (grease build up)	Yes	~~No~~	N/A
2.	Evidence of lift station overflow	Yes	~~No~~	N/A
3.	Are pumps adequate, maintained?	~~Yes~~	No	N/A
4.	Are the bar screens/comminutors maintained?	~~Yes~~	No	N/A
5.	Rags/Trash collected/stored/ properly disposed of?	~~Yes~~	No	N/A
6.	Are the grit chambers routinely cleaned?	Yes	No	~~N/A~~
7.	Offensive/obnoxious odors	Yes	~~No~~	N/A

Flow Equalization:

1.	Sufficient capacity	Yes	No	N/A
2.	Adequate aeration	Yes	No	N/A
3.	Odor Control	Yes	No	N/A

Secondary Clarifiers:

1.	Is there [illegible]idence of solids loss?	~~Yes~~	No	N/A
2.	Is there a [illegible]oblem with bulking?	Yes	~~No~~	N/A

3.	Is the depth of the sludge blanket acceptable?	~~Yes~~	No	N/A
4.	Are the skimmers functioning properly?	Yes	~~No~~	N/A BROKEN ARM
5.	Are the weirs level?	~~Yes~~	No	N/A
6.	Are the effluent weirs clean?	~~Yes~~	No	N/A
7.	Does tank surface indicate poor sludge management (i.e. floating solids, gas)	Yes	~~No~~	N/A

Aeration Basins:

1. Aerator type: Mechanical_____, Blower ✓.
2. Mixed liquor Color: Black_____, Dark Brown_____, Medium Brown ✓, Light Brown_____.
3. Foaming: Heavy_____, Moderate_____, Light ✓.
4. Odors: Strong_____, Moderate_____, Light ✓.
5. Air distribution: Excellent_____, Adequate ✓, Poor_____.

Return Sludge Unit:

1.	Is there adequate sludge return back to the head of the plant?	~~Yes~~	No	N/A

2. Sludge Color: Black_____, Brown ✓, Light Brown_____.

Digestors:

1. Digestor Type: Alnaerobic_____, Aerobic ✓.
2. Digestor Sludge Color: Black_____, Dark Brown_____, Brown ✓.
3. Digestor Odor: None ✓, Musty_____, Hydrogen Sulfide_____.

4.	Does the facility have dewatering devices?	Yes	~~No~~	N/A
5.	Are they functional?	Yes	No	~~N/A~~
6.	Is the facility wasting sludge properly?	~~Yes~~	No	N/A

Final Filters:

1.	Performing satisfactory	Yes	No	N/A

2. General Conditions of Process:
   Explain:_____

Disinfection:

1. Chlorinator Type: Gas ✓, Hypochlorination_____, Other_____, Explain_____

2.	Adequate baffles in contact chamber. (Minimum of 2)	~~Yes~~	No	N/A
3.	Is there solids evident in the chlorine contact chamber?	~~Yes~~	No	N/A
4.	Is chlorine residual adequate?	~~Yes~~	No	N/A
5.	Is there adequate ventilation, proper location of exhaust fan in the chlorine room?	~~Yes~~	No	N/A
6.	Is there a gas mask available?	Yes	~~No~~	N/A
7.	Are there duel scales and automatic switch over devices available?	~~Yes~~	No	N/A

Effluent:

1. The quality of the effluent appears: Excellent_____, Good ✓, Poor_____.

2.	Is there solids carry-over in the effluent?	~~Yes~~	No	N/A

Perc Pond Disposal Sites:

1.	Are the ponds being maintained and rotated routinely?	~~Yes~~	No	N/A
2.	Are the ponds overgrown?	Yes	~~No~~	N/A
3.	Do the pond bottoms need cleaning out?	Yes	~~No~~	N/A
4.	Are the ponds exceeding capacity?	Yes	~~No~~	N/A
5.	Are there odors?	Yes	~~No~~	N/A

6. Appearance of pond surface: Weeds_____, Algae_____, Scum_____, Bubbles_____, Other_____.

7. Appearance of pond water: Black_____, Brown_____, Cloudy_____, Clear ✓.

Spray Field Disposal Site:

1.	Is there adequate field rotation?	Yes	No	N/A
2.	Is there evidence of ponding?	Yes	No	N/A
3.	Is there evidence of runoff?	Yes	No	N/A
4.	Is there an accumulation of solids in the fields?	Yes	No	N/A
5.	Are the field maintained (i.e. mowed, no broken spray heads, etc.)?	Yes	No	N/A

General Plant Conditions:

1.	Is plant staffed properly by certified operators?	~~Yes~~	No	N/A
2.	Are the site grounds adequately maintained?	~~Yes~~	No	N/A
3.	Is water supply adequate for chlorination systems?	~~Yes~~	No	N/A
4.	Is water provided for plant wash down?	~~Yes~~	No	N/A
5.	Is there adequate potable water protection?	~~Yes~~	No	N/A
6.	Is auxiliary power exercised periodically?	Yes	No	~~N/A~~
7.	Is the site fenced and locked?	~~Yes~~	No	N/A

Inspectors' Comments:

SKIMMER ARM NEEDS REPAIR
SPLITTER BOX NEEDS REPAIR OR REPLACEMENT
AIR LEAK AT THE AIR HEADER

M. OVERSTREET
Inspected by

9-18-00
Date

45-18 (7/99)

ZELLWOOD STATION CO-OP, INC.
2126 SPILLMAN DRIVE
ZELLWOOD, FLORIDA 32798-9799
407-886-0000
Fax (407) 886-4711

EQUAL HOUSING OPPORTUNITY

April 12, 2001

Mr. Mark Overstreet
Orange County
Environmental Protection Division
Leeds Commerce Center
800 Mercy Drive, Suite 4
Orlando, FL 32808-7896

RE: Domestic Wastewater Treatment Facility – Zellwood Station WWTF

OCEPD Permit: DO96-03 Expires: June 19, 2002

Dear Mr. Overstreet:

This letter hereby notifies you that Zellwood Station has made the following repairs which, were completed on April 3, 2001 to their wastewater treatment facilities pursuant to your letter dated January 18, 2001:

1) Splitter box for the R.A.S. has been replaced.
2) The skimmer arm in the clarifier has been replaced.
3) The handrails at the clarifier have been repaired.
4) The chlorine pump was replaced.

Should you have any questions, please do not hesitate to contact me at 407-886-0000, ext. 29.

Sincerely,

Gloria Holt
Community Manager

cc: Florida Department of Environmental Protection
Bill Restall, Utility Operator
Bill Rowell, Water/Sewer Liaison

ORANGE COUNTY GOVERNMENT
ORIDA

ENVIRONMENTAL PROTECTION DIVISION
BRUCE R. EAST AN, *Interim Manager*
Leeds Commerce Center
800 Mercy Drive, Suite 4
Orlando, Florida 32808-7896
407-836-1400 ▪ Fax 407-836-1499
www.onetgov.net

CERTIFIED MAIL: 7099 3220 0002 4714 5508

January 18, 2001

Mr. William Rustall
Zellwood Station, Inc.
2126 Spillman Drive
Zellwood, Florida 33798-9799

RE: Domestic Wastewater Treatment Facility- Zellwood Station WWTF

OCEPD Permit: DO96-03 Expires: June 19, 2002

Dear Mr. Rustall:

On December 20, an inspection of the above-referenced facility was conducted by a representative of this Division. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from a review of the records on file in this office, the following permit non-compliance issue(s) were noted:

1. The spliter box for the R.A.S. is in need of repair or replacement.
2. The skimmer arm in the clarifier needs to be repaired or replaced.
3. The hand rails at the clarifier need to be repaired.
4. The chlorine pump was making noise and needs to be repaired or replaced.

Your written response is required within ten (10) days of receipt of this letter indicating the corrective action(s) initiated.

Sincerely,

Mark Overstreet
Environmental Specialist

(2)MO/CS/JMD:djc

Enclosure

cc: Florida Department of Environmental Protection
Central File

ORANGE COUNTY GOVERNMENT
FLORIDA

ENVIRONMENTAL PROTECTION DIVISION
BRUCE R. EASTMAN, *Interim Manager*
Leeds Commerce Center
800 Mercy Drive, Suite 4
Orlando, Florida 32808-7896
407-836-1400 ▪ Fax 407-836-1499
www.onetgov.net

March 20, 2001

Mr. William Rustall
Zellwood Station
2126 Spillman Drive
Zellwood, Florida 32798

RE: Domestic Wastewater Treatment Facility –Zellwood Station

OCEPD Permit: DO96-03 Expires: June 19, 2002

Dear Mr. Rustall:

On March 14, 2001, a representative of this Division conducted an inspection of the above-referenced facility. At the time of inspection, the overall operation of your facility was found to be in compliance with the terms and conditions of the referenced permit.

Please review the enclosed inspection report for any comments and recommendations that may have been noted during the course of the inspection and record review.

Your efforts to help maintain our environment are appreciated. If you have any questions, contact me at the above address or at (407) 836-1440.

Sincerely,

Mark Overstreet
Environmental Specialist

(2)MO/CS/JMD:djc

Enclosure

C: Florida Department of Environmental Protection
Central File

001-068-2420-4343
INVOICE TO FOLLOW

[X] Sampling

1. CBOD5 2. TSS 3. Nitrate as N 4. Fecal Coliform

Department of
Environmental Protection

Lawton Chiles
Governor

Central District
3319 Maguire Boulevard, Suite 232
Orlando, Florida 32803-3767

Virginia B. Wetherell
Secretary

ZELLWOOD STATION CO OP INC
2126 SPILLMAN DRIVE
ORLANDO FLORIDA 32798

OCD-C-WW-98-0933

ATTENTION CARL AHLSTROM
PRESIDENT

Orange County - DW
Zellwood Station
Wastewater Facility - Permit No. FLA010865
Noncompliance Letter

Dear Mr. Ahlstrom:

On December 10, 1998, Department personnel conducted a routine inspection of your wastewater facility. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from records on file in this office, the following deficiencies were noted:

1. Part A of the Discharge Monitoring Report (DMR) was not fully completed. Annual average for Carbonaceous Biochemical Oxygen Demand ($CBOD_5$) and Total Suspended Solids (TSS) should be calculated and entered in the appropriate field.
2. The chlorine and pH meters did not have logbooks recording the daily calibration of these meters.
3. A review of the groundwater files for this facility indicates the following deficiencies:
   a. The groundwater levels were not reported correctly in compliance wells MW-3, MW-4, MW-5 for the third quarter of 1998. Please provide a summary of the groundwater elevation data in a tabular format for the last eight quarters. At a minimum, the table will include each monitoring well's top of casing in feet NGVD, ground surface elevation in feet NGVD, depth to groundwater in feet, and water level elevation in feet NGVD. Accuracy of the elevation data shall be to 0.10 feet.
   b. The groundwater monitoring reports for the first and third quarters of 1997 are missing. Please submit these reports. Please ensure that the quarterly monitoring reports are submitted to the Department according to permit requirements.
   c. The fecal coliform in MW-1 and MW-3 for the third quarter of 1998 is elevated. Please ensure that fecal coliform levels stay lower than their maximum contaminant level of <4cfu/100mL.

d. Please explain the elevated chloride levels in MW-2 and propose a course of action to reduce chloride to less than its maximum contaminant level of 250 mg/L.

e. The Groundwater Monitoring Report - Part D is not being fully completed. Please ensure that the analytical "Units" are reported with the "Analysis Result" and the "Detection Limits/Units" column contains the appropriate information.

Please respond to these items, in writing, with a schedule of corrective action. Pursuant to Rule 62-4.100(2), F.A.C., failure to comply with pollution control rules shall be grounds for permit suspension or revocation and initiation of formal enforcement action. Your reply is requested within 14 days from the date of this letter. Your reply and any questions should be addressed to Michael E. Hall at (407) 893-3313.

Sincerely,

for Gary P. Miller
Program Manager
Wastewater Compliance/Enforcement

Date: January 4, 1999

GM/mh/ww

Enclosure

cc: Orange County Environmental Protection Department
Groundwater Section, FDEP

ENTERED DEC 16 1998

FLORIDA DEPARTMENT OF ENVIRONMENTAL ROTECTION

WASTEWATER COMPLIANCE INSPECTION REPORT

FACILITY AND INSPECTION INFORMATION

@ = Optional

Name and Physical Location of Facility	WAFR ID:	County	Entry Date/Time
ZELLWOOD STATION	FLA010865	ORANGE	10DEC1998 10:45 AM
2126 SPILLMAN DRIVE		Phone	@ Exit Date/Time
ZELLWOOD, FL		886-0000	11:15 AM 10DEC1998

Name(s) of Field Representatives(s)	Title	Phone
BILL WESTALL	LEAD OPERATOR	

Name and Address of Permittee or Designated Representative	Title	Phone	@ Operator Certification #
ZELLWOOD STATION CO-OP, INC / CARL AHLSTROM	PRESIDENT		B. WESTALL

Inspection Type C E I | Samples Taken(Y/N): N | @ Sample ID#: NA | Samples Split (Y/N): N

☒ Domestic ☐ Industrial

FACILITY COMPLIANCE AREAS EVALUATED

S=Satisfactory; M=Minor; U=Unsatisfactory; Blank=Not Evaluated

Unsatisfactory Ratings in Areas Marked by a "Diamond (♦)" Will Always put the Facility Status in Significant Non-Compliance

S	1.♦ Permit FLA010865		3. Laboratory	S	6. Facility Site Review	S	9.♦ Effluent
	2.♦ Compliance Schedules	M	4. Sampling	S	7. Flow Measurement	S	10.♦ Disposal
		M	5.♦ Records & Reports		8.♦ Operation & Maintenance	S	11. Residuals Management
	13. Other:					M	12. Groundwater

Facility and/or Order Compliance Status: ☐ In-Compliance ☒ Minor-Out-Of-Compliance ☐ Significant-Out-Of-Compliance

Recommended Actions NONCOMPLIANCE LETTER

Name(s) and Signature(s) of Inspector(s)	District Office/Phone Number	Date
Michael E. Hall *Michael Hall*	Central (407) 893-3313	12/30/98

@ Signature of Reviewer	District Office/Phone Number	Date
Karen Gottwald *Karen Gottwald*	Central (407) 893-3313	12/31/98

Fill Out This Section For All Surface Water Discharger Inspections (CEI, CSI, CBI, PAI, XSI, RI)

Transaction Code	NPDES Number	YR/MO/DA	Insp Type	Inspector	Fac Type
N 5			1	2	3

ADDITIONAL NPDES COMMENTS

Inspection Type (Field 1): A=PAI, B=CBI, C=CEI, S=CSI, X=XSI, R=RI

Inspection Code (Field 2): S=State, J=Joint EPA/State-EPA Lead, T=Joint State/EPA-State Lead, L=Local Program

Facility Type (Field 3): 1=Municipal (Publicly Owned), 2=Industrial and Privately Owned Domestic, 3= Agricultural, 4=Federal

Every other field is self explanatory

Revised 8/98

INSPECTION COMMENTS

DESIGN CAPACITY: 0.300 MGD permitted capacity extended aeration activated sludge domestic wastewater atment plant consisting of flow equalization, influent screening, aeration, secondary clarification, chlorinati and aerobic digestion of residuals with two percolation ponds.

PERMIT: Satisfactory Permit Number FLA010865 on site, expires 6/19/2002.

RECORDS AND REPORTS: Minor Bound log book on site with at least 1 yr. of data available. Operator W A Restall A-7322 on site as required. DMRs reviewed 2/98 - 10/98, all submitted as required. DMRs are being submitted with incorrect values entered for annual average for $CBOD_5$ and TSS.

LABORATORY: Satisfactory Tri Tech Analytical HRS# E83294

SAMPLING: Minor HACH meters for D.O., pH and Chlorine being used. Each calibrated daily, but no record of calibration being kept. Chlorine and pH meters must be calibrated daily.

FACILITY SITE REVIEW: Satisfactory

Access - Fenced and locked
Headworks - Barscreen
Blowers - Two blowers, one on at time of inspection
Mixed Liquor - Medium brown, some foam, good air distribution, no odor
Return Activated Sludge Line - Working
Chlorination - Two gas cylinders, chained to scale with auto switchover.
Clarifier - Some sludge pop ups, solids over weir
Chlorine Contact Chamber - Turbid, clear to ponds
Digester - Storage capacity available
RPZ - There but no potable water lines connected.

FLOW MEASUREMENT: Satisfactory Steven's Total Flow meter at CCC, last calibration 3/7/98.

EFFLUENT: Satisfactory DMRs reviewed 2/98 - 10/98 (less than 12 months reviewed due to overlap with last inspection), with no effluent parameter violations noted.

GROUNDWATER: Minor The groundwater levels were not reported correctly in compliance wells MW-3, MW-4, MW-5 for the third quarter of 1998. Please provide a summary of the groundwater elevation data in a tabular format for the last eight quarters. At a minimum, the table will include each monitoring well's top of casing in feet NGVD, ground surface elevation in feet NGVD, depth to groundwater in feet, and water level elevation in feet NGVD. Accuracy of the elevation data shall be to 0.10 feet. The groundwater monitoring reports for the first and third quarters of 1997 are missing. Please submit these reports. Please ensure that the quarterly monitoring reports are submitted to the Department according to permit requirements. The Fecal Coliform in MW-1 and MW-3 for the third quarter of 1998 is elevated. Please ensure that fecal coliform levels stay lower than their maximum contaminant level of <4cfu/100mL. Please explain the elevated chloride levels in MW-2 and propose a course of action to reduce chloride to less than its maximum contaminant level of 250 mg/L. The Groundwater Monitoring Report - Part D is not being fully completed. Please ensure that the analytical "Units" are reported with the "Analysis Result" and the "Detection Limits/Units" column contains the appropriate information.

DISPOSAL METHOD: Satisfactory Two percolation ponds, both well maintained with over 15 ft. of freeboard.

RESIDUALS MANAGEMENT: Contract with Shelly's Septic for sludge hauling on file. Sludge analysis for 5' on file.

ZELLWOOD STATION CO-OP, INC.
2126 SPILLMAN DRIVE
ZELLWOOD, FLORIDA 32798-9799
407-886-0000

January 20, 1999

Mr. Gary Miller
Programmer - Wastewater Compliance
DEPARTMENT OF ENVIRONMENTAL PROTECTION
3319 Maguire Boulevard
Suite 232
Orlando, Florida 32803-3767

Dear Mr. Miller:

Enclosed is the response to your January 4, 1999 letter.

Item 1: Annual average for C.B.O.D. is 6.3.
Annual average for T.S.S. in 1998 is 7.0.
They were entered on DEC 1998 DMR and entered in appropriate column.

Item 2: Calibration standards for CL2 and PH have been ordered. Upon arrival, both meters will be calibrated and logged on a daily basis.

Item 3: Data formatted and enclosed as requested.

Item 3-B: Ground water reports for one quarter - 1997 are enclosed. My staff is still looking for the third quarter report and will send it at a later date.

Item 3-C: Sampling procedures, along with handling procedures have been re-evaluated. Also, CL2 residuals are being held to at least 2.0 PPM per MGL at discharge. This should help keep fecal levels down to less than 4C FU-100 ML.

Item 3-D: CL2 levels are to be held to 2 PPM per ML instead of 5. Also chloride levels were down to 65 - fourth quarter.

Item 3-E: Detection limits enclosed fourth quarter 1998 results.

Sincerely,

W. A. Restall
Utilities Manager

Department of
Environmental Protection

Lawton Chiles
Governor

Central District
3319 Maguire Boulevard, Suite 232
Orlando, Florida 32803-3767

Virginia B. Wetherell
Secretary

ZELLWOOD STATION CO OP INC
2126 SPILLMAN DRIVE
ZELLWOOD FLORIDA 32798

OCD-C-WW-98-0298

ATTENTION MR CARL AHLSTROM
PRESIDENT

Orange County - DW
Zellwood Station Mobile Home Park
Wastewater Facility - Permit No. FLA010865
Noncompliance Letter

Dear Mr. Ahlstrom:

On March 23, 1998, Department personnel conducted a routine inspection of your wastewater facility. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from records on file in this office, the following unsatisfactory conditions were noted:

1. Monthly Operating Reports (MORs) are being submitted to the Department. Discharge Monitoring Reports (DMRs) should have been submitted instead starting with July 1997. Please use DEP Form 62-620.910(10), which was issued with your permit.
2. The MORs which were submitted to the Department did not have the original signature of the certified operator.
3. Floatable material removed from the sewage treatment plant is not being stored properly. Prior to disposal, floatables must be stored in a covered container.

Please respond to these items, in writing, with a schedule of corrective action. Pursuant to Rule 62-4.100(2), F.A.C., failure to comply with pollution control rules shall be grounds for permit suspension or revocation and initiation of formal enforcement action. Your reply is requested within 14 days from the date of this letter. Your reply and any questions should be addressed to Michael E. Hall at (407) 893-3313.

Sincerely,

Karen Gottwald

Karen Gottwald
Supervisor
Wastewater Compliance/Enforcement

Date: May 5, 1998

KG/mh/ww
Enclosure
cc: Orange County Environmental Protection Department

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

WASTEWATER COMPLIANCE INSPECTION REPORT

FACILITY AND INSPECTION INFORMATION

@ = Optional

Name and Physical Location of Facility	GMS ID:	County	Entry Date/Time
Zellwood Station	3048P01438	Orange	23MAR1998 11:01 am
2126 Spillman Drive		Phone	@ Exit Time/Date
Zellwood, Florida 32798		886-0000 #4	11:35 am 23MAR1998

Name(s) of Field Representatives(s)	Title	Phone
W.A. Restall	Lead Operator	

Name and Address of Permittee or Designated Representative	Title	Phone	@ Operator Certification #
Zellwood Station Co-Op, Inc./ Carl Ahlstrom	President		W.A. Restall
2126 Spillman Drive			A-7322
Zellwood, Florida 32798			

Inspection Type | C | E | I | Samples Taken(Y/N): N @ Sample ID#: NA Samples Split (Y/N): N

☒ Domestic ☐ Industrial Were Photos Taken(Y/N): N @ Log book Volume : 1 @ Page 54

In Compliance With Permit Conditions (Y/N): N

Recommended Actions: NON COMPLIANCE LETTER

Name(s) and Signature(s) of Inspector(s)	District Office/Phone Number	Date
Michael E. Hall *Michael Hall*	Central (407) 893-3313	4/1/98

@ Signature of Reviewer	District Office/Phone Number	Date
Karen Gottwald *Karen Gottwald*	Central / (407) 893-3313	5/1/98

FACILITY COMPLIANCE AREAS EVALUATED

S=Satisfactory; M=Marginal; U=Unsatisfactory; Blank=Not Evaluated *See Comments

S	1. Permit FLA010865		6. Sampling	S	11. Effluent
	2. Compliance Schedule		7. Self-Monitoring Program		12. Groundwater
	3. Pretreatment	U	8. Facility Site Review	S	13. Disposal Method
M	4. Records and Reports	S	9. Flow Measurement	S	14. Residuals Management
S	5. Laboratory		10. Operation and Maintenance		15. Other

Fill Out This Section For All Surface Water Discharger Inspections (CEI, CSI, PAI, XSI, RI)

Transaction Code	NPDES Number	YR/MO/DA	Insp Type	Inspector	Fac Type
1	2 3 11	12 17	18	19	20

Remarks

21 66

Inspection Type (Field 18) A=PAI, B=CBI, S=CSI, X=XSI, R=RI

Inspection Code (Field 19): S=State, J=Joint EPA/State-EPA Lead, T=Joint State/EPA-State Lead

Facility Type (Field 20): 1=Municipal (Publicly Owned), 2=Industrial and Privately Owned Domestic, 3= Agricultural, 4=Federal

Every other field is self explanatory

INSPECTION COMMENTS

DESIGN CAPACITY: 0.300 MGD permitted capacity extended aeration activated sludge domestic wastewater treatment plant consisting of flow equalization, influent screening, aeration, secondary clarification, chlorination and aerobic digestion of residuals with two percolation ponds.

PERMIT: Satisfactory Permit Number FLA010865 on site, expires 6/19/2002.

RECORDS AND REPORTS: **Marginal MORs being submitted instead of DMRs during issuance of new permit on 6/25/97 to current MOR of January 1998. MORs are being submitted without original signature of certified operator.** MORs are being submitted monthly as required during Jan 97 - Jan 98. Bound log book on site with at least 1 yr. of data available. Operator W A Restall A-7322 on site as required.

LABORATORY: Satisfactory Tri Tech Analytical HRS# E83294

SAMPLING: Satisfactory HACH meters for D.O., pH and Chlorine being used. Each calibrated daily.

FACILITY SITE REVIEW: **Unsatisfactory**

Access - Fenced and locked
Headworks - Barscreen, **skimmings left in uncovered container.**
Blowers - Two blowers, one on at time of inspection
Mixed Liquor - Medium brown, some foam, good air distribution, no odor
Return Activated Sludge Line - Working
Chlorination - Two gas cylinders, chained to scale with auto switchover.
Clarifier - Some sludge pop ups, solids over weir
Chlorine Contact Chamber - Slightly turbid, no solids over weir
Digester - Storage capacity available
RPZ - There but no potable water lines connected.

FLOW MEASUREMENT: Satisfactory Steven's Total Flow meter at CCC, last calibration 3/7/98.

EFFLUENT: Satisfactory MORs reviewed Jan 97 - Jan 98 with no effluent parameter violations noted.

DISPOSAL METHOD: Satisfactory Two percolation ponds, both well maintained with over 15 ft. of freeboard.

RESIDUALS MANAGEMENT: Contract with Shelly's Septic for sludge hauling on file. Sludge analysis for 3/97 on file.

ZELLWOOD STATION CO-OP, INC.
2126 SPILLMAN DRIVE
ZELLWOOD, FLORIDA 32798-9799
407-886-0000

EQUAL HOUSING OPPORTUNITY

Gm 5/27
KG 5/27
MEH 6/3

E P
319 MAGUIRE BLVD
ORLANDO FL
ATTENTION
KAREN GOTTWALD

RECEIVED MAY 1998 D.E.P. CENTRAL DISTRICT

MS. GOTTWALD
THIS IS A FOLLOW UP LETTER OF UNSATISFACTORY CONDITIONS FROM YOUR PLANT INSPECTIONS REPORT. THE FIRST AND SECOND UNSATISFACTORY ITEMS HAVE BEEN CORRECTED BY USING NEW D.M.R. REPORT SHEETS. THE SIGNATURE IS BY ME IN BLUE INK. THIRD CONDITION HAS BEEN CORRECTED BY PURCHASING A NEW TRASH CAN WITH LID.

THANKYOU FOR YOUR CONCERN IT THESE UNFORSEEN ITEMS.

Wm Rentall
utilities mgr.
5/16/98

Department of
Environmental Protection

Jeb Bush
Governor

Central District
3319 Maguire Boulevard, Suite 232
Orlando, Florida 32803-3767

David B. Struhs
Secretary

ZELLWOOD STATION CO OP INC
2126 SPILLMAN DRIVE
ORLANDO FLORIDA 32798

OCD-C-WW-00-0043

ATTENTION CARL AHLSTROM
PRESIDENT

Orange County - DW
Zellwood Station Mobile Home Park WWTP
Wastewater Facility - Permit No. FLA010865
Noncompliance Letter

Dear Mr. Ahlstrom:

On December 28, 1999, Department personnel conducted a routine inspection of your wastewater facility. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from records on file in this office, the following deficiencies were noted:

1. A review of the Discharge Monitoring Reports (DMRs) from November 1998 to July 1999 indicated that fecal coliform, carbonaceous biochemical oxygen demand and total suspended solids were not being consistently reported once every two weeks as required during the months of December 1998, March 1999, and April 1999.
2. The chlorine meter and pH meters did not have logbooks recording the daily calibration of these meters. This deficiency was noted in non-compliance letter OCD-C-W-98-0933. In the response letter dated January 20, 1999, it stated that this deficiency was being corrected.
3. Fan and light did not function. A ground level exhaust fan (for forced ventilation) and a light must be provided in the gas chlorine enclosure. The switch for this equipment should be located outside the enclosure.
4. The scales used in the chlorine enclosure were in disrepair and inoperable.
5. A review of the groundwater files for this facility indicates the following deficiencies:
   a. Fecal coliform concentrations above the primary standard of 4 fecal coliform colonies per 100 milliliters were reported in the groundwater from background well MW-1 and compliance well MW-3 for the third quarter of 1998. In addition, fecal coliform concentrations above the primary standard were reported in the groundwater from background well MW-1 for the fourth quarter of 1999. There is no indication that groundwater from the background well should be affected by the effluent discharge. Please inspect conditions around the background well to determine if there is any cause for the fecal coliform concentrations. In addition,

please review fecal coliform collection procedures and the use of sterile containers to determine the cause of the fecal coliform concentrations above the primary standard.

b. Nitrate concentrations above the primary standard of 10 milligrams per Liter (mg/L) were reported in the groundwater from background well MW-1 and compliance well MW-5 for the fourth quarter of 1998 and from background well MW-1 for the third quarter of 1999. There is no indication that the background well should be affected by the effluent discharge. Please review the conditions around the background well to determine the possible cause of the nitrate concentrations above the primary standard at this location. Also the facility is reminded that it is a violation of permit conditions when the groundwater standards are exceeded at compliance well locations at any time.

c. Groundwater elevations for all monitoring locations were incorrectly calculated for all quarters of 1999. The measurements reported appear to be depth to groundwater measurements. In addition, the summary of groundwater elevations submitted with the groundwater monitoring report for the fourth quarter of 1998 contained incorrectly calculated groundwater elevations for background well MW-1. The elevations were calculated using the top of casing elevation from monitoring well MW-2. Please provide a summary of groundwater elevation data for 1999 in tabular format. The table should include each monitoring well's top of casing elevation in feet to National Geodetic Vertical Datum of 1929 (NGVD), ground surface elevation in feet NGVD, depth to groundwater in feet, and groundwater elevation in feet NGVD. Accuracy of the elevation data should be to 0.10 feet.

Please respond to these items, in writing, with a schedule of corrective action. Pursuant to Rule 62-4.100(2), F.A.C., failure to comply with pollution control rules shall be grounds for permit suspension or revocation and initiation of formal enforcement action. Your reply is requested within 14 days from the date of this letter. Your reply and any questions should be addressed to Michael E. Hall at (407) 893-3313.

Sincerely,

Gary P. Miller
Program Manager
Wastewater Compliance/Enforcement

Date: January 20, 2000

GM/meh/ww

Enclosure

cc: Orange County Environmental Protection Division
Groundwater Section, FDEP

COMET ENTRY DATE 1/7/00

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

WASTEWATER COMPLIANCE INSPECTION REPORT

FACILITY AND INSPECTION INFORMATION

@ = Optional

Name and Physical Location of Facility	WAFR ID:	County	Entry Date/Time
ZELLWOOD STATION	FLA010865	ORANGE	28DEC1999 10:50 AM
2126 SPILLMAN DRIVE		Phone	@ Exit Date/Time
ZELLWOOD, FL		886-0000	11:15 AM 10DEC1998

Name(s) of Field Representatives(s)	Title	Phone
BILL WESTALL	LEAD OPERATOR	

Inspection Type | C | E | I | Samples Taken(Y/N): N @ Sample ID#: NA Samples Split (Y/N): N

☒ Domestic ☐ Industrial Were Photos Taken(Y/N): N @ Log book Volume : 3 @ Page 118-119

FACILITY COMPLIANCE AREAS EVALUATED

S=Satisfactory; M=Minor; U=Unsatisfactory; Blank=Not Evaluated

Unsatisfactory Ratings In Areas Marked by a "Diamond (♦)" Will Always put the Facility Status In Significant Non-Compliance.

S	1. ♦ Permit FLA010865		3. Laboratory	M	6. Facility Site Review	S	9. ♦ Effluent
	2. ♦ Compliance Schedules	M	4. Sampling	S	7. Flow Measurement	S	10. ♦ Disposal
		M	5. ♦ Records & Reports		8. ♦ Operation & Maintenance	S	11. Residuals Management
	13. Other:					U	12. Groundwater

Facility and/or Order Compliance Status: ☐ In-Compliance ☒ Minor-Out-Of-Compliance ☐ Significant-Out-Of-Compliance

Recommended Actions NONCOMPLIANCE LETTER

Name(s) and Signature(s) of Inspector(s)	District Office/Phone Number	Date
Michael E. Hall	Central (407) 893-3313	1/14/00

@ Signature of Reviewer	District Office/Phone Number	Date
Kalina Warren	Central (407) 893-3313	1/14/00

Fill Out This Section For All Surface Water Discharger Inspections (CEI, CSI, CBI, PAI, XSI, RI)

Transaction Code	NPDES Number	YR/MO/DA	Insp Type	Inspector	Fac Type
N 5			1	2	3

ADDITIONAL NPDES COMMENTS

Inspection Type (Field 1) A=PAI, B=CBI, C=CEI, S=CSI, X=XSI, R=RI

Inspection Code (Field 2): S=State, J=Joint EPA/State-EPA Lead, T=Joint State/EPA-State Lead, L=Local Program

Facility Type (Field 3): 1=Municipal (Publicly Owned), 2=Industrial and Privately Owned Domestic, 3= Agricultural, 4=Federal

Every other field is self explanatory

Revised 8/98

INSPECTION COMMENTS

:SIGN CAPACITY: 0.300 MGD permitted capacity extended aeration activated sludge domestic wastewater ıeatment plant consisting of flow equalization, influent screening, aeration, secondary clarification, chlorination and aerobic digestion of residuals with two percolation ponds.

PERMIT: Satisfactory Permit Number FLA010865 on site, expires 6/19/2002.

RECORDS AND REPORTS: **Minor** Bound log book on site with at least 1 yr. of data available. Operator W A Restall A-7322 on site as required. DMRs reviewed 11/98 – 7/99, all submitted as required. **Fecal coliform, $CBOD_5$ and TSS were sampled 2 times per 30 days (which resulted in no samples collected the last 18 days of the month) for the months of 12/98, 3/99 and 4/99, permit requires that the samples be collect once every two weeks.**

LABORATORY: Tri Tech Analytical HRS# E83294

SAMPLING: **Minor** HACH meters for D.O., pH and Chlorine being used. Each calibrated daily, **but no record of calibration being kept. Chlorine and pH meters must being calibrated daily. This deficiency was noted on Non-compliance letter dated 1/4/99. The response letter dated 1/20/99, stated that standards were ordered and calibration would be logged.**

FACILITY SITE REVIEW: **Minor**

Access - Fenced and locked
Headworks - Barscreen
Blowers - Two blowers, one on at time of inspection
Mixed Liquor - Medium brown, some foam, good air distribution, no odor
Return Activated Sludge Line - Working
Chlorination - Two gas cylinders, chained to scale with auto switchover. **The scales were in disrepair and inoperable. Fan and light did not function.**
Clarifier - Some sludge pop ups, no solids over weir
Chlorine Contact Chamber – Slightly turbid, clear to ponds
Digester - Storage capacity available
RPZ – Present, but no potable water used on the WWTP.

FLOW MEASUREMENT: Satisfactory Steven's Total Flow meter at CCC, last calibration 4/99.

EFFLUENT: Satisfactory DMRs reviewed 11/98 – 7/99 (less than 12 months reviewed due to overlap with last inspection), with no effluent parameter violations noted.

GROUNDWATER: **Unsatisfactory**

A review of groundwater files for this facility indicates the following deficiencies:

Fecal coliform concentrations above the primary standard of 4 fecal coliform colonies per 100 milliliters were reported in the groundwater from background well MW-1 and compliance well MW-3 for the third quarter of 1998. In addition, fecal coliform concentrations above the primary standard were reported in the groundwater from background well MW-1 for the fourth quarter of 1999. There is no indication that groundwater from the background well should be affected by the effluent discharge. Please inspect conditions around the background well to determine if there is any cause for the fecal coliform concentrations. In addition, please review fecal coliform collection procedures and the use of sterile containers to determine the cause of the fecal coliform concentrations above the primary standard.

Nitrate concentrations above the primary standard of 10 milligrams per Liter (mg/L) were reported in the groundwater from background well MW-1 and compliance well MW-5 for the fourth quarter of 1998 and m background well MW-1 for the third quarter of 1999. There is no indication that the background well should be affected by the effluent discharge. Please review the conditions around the background well to determine the possible cause of the nitrate concentrations above the primary standard at this location. Also the facility is reminded that it is a violation of permit conditions when the groundwater standards are exceeded at compliance well locations at any time.

Groundwater elevations for all monitoring locations were incorrectly calculated for all quarters of 1999. The measurements reported appear to be depth to groundwater measurements. In addition, the summary of groundwater elevations submitted with the groundwater monitoring report for the fourth quarter of 1998 contained incorrectly calculated groundwater elevations for background well MW-1. The elevations were calculated using the top of casing elevation from monitoring well MW-2. Please provide a summary of groundwater elevation data for 1999 in tabular format. The table should include each monitoring well's top of casing elevation in feet to National Geodetic Vertical Datum of 1929 (NGVD), ground surface elevation in feet NGVD, depth to groundwater in feet, and groundwater elevation in feet NGVD. Accuracy of the elevation data should be to 0.10 feet.

DISPOSAL METHOD: Satisfactory Two percolation ponds, both well maintained with over 15 ft. of freeboard.

RESIDUALS MANAGEMENT: Contract with Shelly's Septic for sludge hauling on file. Sludge analysis for 7/99 on file.

ZELLWOOD STATION CO-OP, INC.

2126 SPILLMAN DRIVE
ZELLWOOD, FLORIDA 32798-9799
407-886-0000

EQUAL HOUSING OPPORTUNITY

February 8, 2000

Mr. Gary Miller
Program Manager
Waste Water Compliance Enforcement
DEPARTMENT OF ENVIRONMENTAL PROTECTION
3319 Maguire Boulevard
Suite 232
Orlando, Florida 32803-3767

Dear Mr. Miller:

In response to your letter dated January 20, 2000 in regards to your inspection of December 28, 1999, five (5) deficiencies were noted. The corrections requested are as follows:

1) Fecals, C.B.O.D. and T.S.S. samples will be pulled and reported on a more regular basis. Once every two weeks as required.

2) New chlorine and P.H. meters have been purchased and installed. New set of standards were also purchased and are in place and being used. New calibration log began January 1, 2000.

3) Exhaust fan and light fixture have been re-wired. The switch is located outside the enclosure.

4) A new set of chlorine scales was purchased and installed. The gas equipment was also overhauled and re-installed at this time.

5) (a) M.W-1 and M.W-3 are located outside fenced compound area and may be under outside influence beyond our control. A review of procedures was taken to try to eliminate any sampling errors.

5) (b) Conditions around wells M.W-1 and M.W-5 --- attempt to find the temporary rise in nitrate levels has been conducted. This facility is located on a golf course and could have been under

temporary influence of fertilizer or other nitrogen based chemicals being used or stored. Further review of this situation will be conducted.

C Table requested is enclosed.

Sincerely,

W. A. Restall
Facility Operator

2/8/2000

Zillwood Station COP Monitoring Wells

MW1 WAFR 5849

Elevations quote 1,2,3,4 NGVD

999	Limits	Top of Well	Ground Surface Level	Dept To Groundwat	Water Level Elevation
ST ater	0.10 Ft	94.62	92.70	46.10	46.60
l ater	0.10	94.62	92.70	45.40	47.30
rd ater	0.10 Ft	94.62	92.70	41.4	51.3
th ater	0.10 Ft	94.62	92.70	43.5	49.2

Zullwood Station COP Monitoring Wells

MW2 WAFR 5848

Elevations quaters 1, 2, 3, 4 NGVD

999	Limits	Top of Well	Ground Surface Level	Dist To Groundwat	Water Level Elevation
ST ater	0.10 Ft	91.31	89.81	42.21	47.60
1 ater	0.10	91.31	89.81	44.01	45.80
rd ater	0.10 Ft	91.31	89.81	41.8	48.11
th ater	0.10 Ft	91.31	89.81	43.9	46.01

Zellwood Station CO OP Monitoring Wells

MW3 WAFR 5847

Elevations quaters 1,2,3,4 NGVD

99	Limits	Top of Well	Ground Surface Level	Debt To Groundwater	Water level Elevation
T ater	0.10 Ft	88.18	86.85	39.55	47.30
d ater	0.10	88.18	86.85	40.85	46.00
d ater	0.10 Ft	88.18	86.85	40.49	46.36
h ater	0.10 Ft	88.18	86.85	40.23	46.62

Zellwood Station CO OP Monitoring Wells

MW4 WAFR 5846

Elevations quarters 1, 2, 3, 4 NGVD

99	Limits	Top of Well	Ground Surface Level	Debt To Groundwater	Water Level Elevation
T ater	0.10 Ft	91.14	89.31	36.41	52.90
nd ater	0.10	91.14	89.31	37.51	51.80
rd ater	0.10 Ft	91.14	89.31	36.00	53.31
th ater	0.10 Ft	91.14	89.31	38.80	50.51

Zullwood Station C O P Monitoring Wells

MW5 WAFR 5845

Elevations quarter 1,2,3,4 N6V10

999	Limits	Top of Well	Ground Surface Level	Dist To Groundwat	Water Level Elevation
ST ater	0.10 Ft	85.73	84.48	32.38	52.10
l ater	0.10	85.73	84.48	34.68	49.80
rd ater	0.10 Ft	85.73	84.48	34.90	49.58
th ater	0.10 Ft	85.73	84.48	37.47	46.99

Department of
Environmental Protection

Lawton Chiles
Governor

Central District
3319 Maguire Boulevard, Suite 232
Orlando, Florida 32803-3767

Virginia B. Wetherell
Secretary

NOTICE OF PERMIT ISSUANCE

CERTIFIED MAIL
Z 422 476 251

ZELLWOOD STATION CO-OP INC
2126 SPILLMAN DRIVE
ZELLWOOD FL 32798-9799

ATTENTION CARL AHLSTROM
PRESIDENT

Orange County - DW
Zellwood Station MHP WWTF

Enclosed is Permit Number FLA010865 to operate a domestic wastewater facility issued under Section(s) 403.087 and 403.0885 of the Florida Statutes.

A person whose substantial interests are affected by the Department's proposed permitting decision may petition for an administrative hearing in accordance with sections 120.569 and 120.57 of the Florida Statutes.

The petition must contain the information set forth below and must be filed (received) in the Department's Office of General Counsel, 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida, 32399-3000. Petitions filed by the permit applicant or any of the parties listed below must be filed within fourteen days of receipt of this notice of intent. Petitions filed by any other person must be filed within fourteen days of publication of the public notice or within fourteen days of receipt of this notice of intent, whichever occurs first. A petitioner must mail a copy of the petition to the applicant at the address indicated above, at the time of filing. The failure of any person to file a petition within the appropriate time period shall constitute a waiver of that person's right to request an administrative determination (hearing) under sections 120.569 and 120.57 of the Florida Statutes. Any subsequent intervention will be only at the discretion of the presiding officer upon the filing of a motion in compliance with rule 28-5.207 of the Florida Administrative Code.

A petition must contain the following information:

(a) The name, address, and telephone number of each petitioner; the Department's permit identification number and the county in which the subject matter or activity is located;

(b) a statement of how and when each petitioner received notice of the Department's action;

(c) a statement of how each petitioner's substantial interests are affected by the department's action;

(d) a statement of the material facts disputed by the petitioner, if any;

(e) a statement of facts that the petitioner contends warrant reversal or modification of the Department's action;

(f) a statement of which rules or statutes the petitioner contends require reversal or modification of the Department's action; and

(g) a statement of the relief sought by the petitioner, stating precisely the action that the petitioner wants the Department to take.

Because the administrative hearing process is designed to formulate final agency action, the filing of a petition means that the Department's final action may be different from the position taken by it in this notice of intent. Persons whose substantial interests will be affected by any such final decision of the Department on the application have the right to petition to become a party to the proceeding, in accordance with the requirements set forth above.

Mediation under section 120.573 of the Florida Statutes is not available for this proceeding.

This action is final and effective on the date filed with the Clerk of the Department unless a petition is filed in accordance with the above. Upon the timely filing of a petition this order will not be effective until further order of the Department.

Any party to the order has the right to seek judicial review of the order under section 120.68 of the Florida Statutes, by the filing of a notice of appeal under rule 9.110 of the Florida Rules of Appellate Procedure with the Clerk of the Department in the Office of General Counsel, 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida, 32399-3000; and by filing a copy of the notice of appeal accompanied by the applicable filing fees with the appropriate district court of appeal. The notice of appeal must be filed within 30 days from the date when the final order is filed with the Clerk of the Department.

Executed in Orlando, Florida.

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION

Christianne C. Ferraro

Christianne C. Ferraro, P.E.
Program Administrator
Water Facilities
3319 Maguire Boulevard, Suite 232
Orlando, FL 32803-3767
Phone: (407)894-7555

Date: June 24, 1997

FILING AND ACKNOWLEDGMENT
FILED, on this date, pursuant to §120.52(11), Florida Statutes, with the designated Department Clerk, receipt of which is hereby acknowledged.

Darlyne Laughon 6/24/97
Clerk Date

CCF/cp/cs

Enclosures: Permit and DMR

Copies furnished to:
Compliance Section
Groundwater Section
Julian R. Coto, P.E.
Orange County Environmental Protection Department

CERTIFICATE OF SERVICE

This is to certify that this NOTICE OF PERMIT ISSUANCE and all copies were mailed before close of business on June 25 1997 to the listed persons, by S. Fitzinger.

Department of Environmental Protection

Lawton Chiles
Governor

Central District
3319 Maguire Boulevard, Suite 232
Orlando, Florida 32803-3767

Virginia B. Wetherell
Secretary

STATE OF FLORIDA
DOMESTIC WASTEWATER FACILITY PERMIT

PERMITTEE:

Zellwood Station Co-Op, Inc.
Mr. Carl Ahlstrom
President
2126 Spillman Drive
Zellwood, FL 32798-9799

PERMIT NUMBER:	FLA010865
ISSUANCE DATE:	6/25/97
EXPIRATION DATE:	June 19, 2002
FACILITY I.D. NO:	FLA010865
PATS NUMBER:	296696
GMS I.D. NO:	3048P01438

FACILITY:

Zellwood Station MHP WWTF
2126 Spillman Drive
Orange County
Zellwood , FL
Latitude: 28° 43' 02" N Longitude: 81° 35' 08" W

This permit is issued under the provisions of Chapter 403, Florida Statutes, and applicable rules of the Florida Administrative Code. The above named permittee is hereby authorized to operate the facilities shown on the application and other documents attached hereto or on file with the Department and made a part hereof and specifically described as follows:

TREATMENT FACILITIES:

An existing 0.300 million gallon per day (MGD) annual average daily flow (AADF) permitted capacity extended aeration activated sludge domestic wastewater treatment plant consisting of flow equalization, influent screening, aeration, secondary clarification, chlorination and aerobic digestion of residuals with:

REUSE:

Land Application: An existing 0.300 MGD AADF permitted capacity rapid rate restricted public access land application system (R001) consisting of two (2) percolation ponds (141,570± square feet total wetted area). Land application system R001 is located approximately at latitude 28° 43' 02" N, longitude 81° 35' 08" W.

IN ACCORDANCE WITH: The limitations, monitoring requirements and other conditions as set forth in Pages 1 through 16 of this permit.

I. RECLAIMED WATER AND EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS

A. Reuse and Land Application Systems

1. During the period beginning on the issuance date and lasting through the expiration date of this permit, the permittee is authorized to direct reclaimed water to Reuse System(s) R001. Such reclaimed water shall be limited and monitored by the permittee as specified below:

			Reclaimed Water Limitations				Monitoring Requirements			
Parameter	Units	Max/Min	Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequency	Sample Type	Monitoring Location Site Number	Notes
Flow	mgd	Maximum	0.300	-	-	-	Continuous	Recording flow meter	EFF-1	See Cond. I.A.3.
Carbonaceous Biochemical Oxygen Demand (5 day)	mg/L	Maximum	20.0	30.0	45.0	60.0	Every Two Weeks	8-hour flow proportioned composite	EFA-1	
Total Suspended Solids	mg/L	Maximum	20.0	30.0	45.0	60.0	Every Two Weeks	8-hour flow proportioned composite	EFA-1	
pH	std. units	Range	-	-	-	6.0 to 8.5	5 Days/Week	Grab	EFA-1	
Fecal Coliform Bacteria	See Permit Condition I.A.4.						Every Two Weeks	Grab	EFA-1	
Total Residual Chlorine (For Disinfection)	mg/L	Minimum	-	-	-	0.5	5 Days/Week	Grab	EFA-1	See Cond. I.A.5.
Nitrate (as N)	mg/L	Maximum	-	-	-	12.0	Monthly	8-hour flow proportioned composite	EFA-1	See Cond. I.A.6.

2. Reclaimed water samples shall be taken at the monitoring site locations listed in Permit Condition I. A. 1. and as described below:

Monitoring Location Site Number	Description of Monitoring Location
EFA-1	Chlorine contact tank effluent.
EFF-1	Flow meter at chlorine contact tank discharge.

3. Recording flow meter shall be utilized to measure flow and calibrated at least annually. *[62-601.200(17) and .500(6), 5-31-93]*

4. The arithmetic mean of the monthly fecal coliform values collected during an annual period shall not exceed 200 per 100 mL of reclaimed water sample. The geometric mean of the fecal coliform values for a minimum of 10 samples of reclaimed water, each collected on a separate day during a period of 30 consecutive days (monthly), shall not exceed 200 per 100 mL of sample. No more than 10 percent of the samples collected (the 90th percentile value) during a period of 30 consecutive days shall exceed 400 fecal coliform values per 100 mL of sample. Any one sample shall not exceed 800 fecal coliform values per 100 mL of sample. Note: To report the 90th percentile value, list the fecal coliform values obtained during the month in ascending order. Report the value of the sample that corresponds to the 90th percentile (multiply the number of samples by 0.9). For example, for 30 samples, report the corresponding fecal coliform number for the 27th value of ascending order. *[62-600.440(4)(c), 6-8-93]*

5. A minimum of 0.5 mg/L total residual chlorine must be maintained for a minimum contact time of 15 minutes based on peak hourly flow. *[62-600.440(4)(b), 6-8-93]*

6. Nitrate nitrogen (NO_3) concentration in the water discharged to the percolation ponds shall not exceed 12.0 mg/L, or as required to comply with Rule 62-610.510, F.A.C. *[62-610.510, 1-9-96]*

B. Other Limitations and Monitoring and Reporting Requirements

1. During the period beginning on the issuance date and lasting through the expiration date of this permit, the treatment facility shall be limited and monitored by the permittee as specified below:

			Limitations				Monitoring Requirements			
Parameter	Units	Max/Min	Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequency	Sample Type	Monitoring Location Site Number	Notes
Carbonaceous Biochemical Oxygen Demand (5 day)	mg/L	Report	-	-	-	-	Monthly	8-hour flow proportioned composite	INF-1	See Cond. I.B.3.
Total Suspended Solids	mg/L	Report	-	-	-	-	Monthly	8-hour flow proportioned composite	INF-1	See Cond. I.B.3.

2. Samples shall be taken at the monitoring site locations listed in Permit Condition I. B. 1 and as described below:

Monitoring Location Site Number	Description of Monitoring Location
INF-1	Raw influent at the bar screen.

3. Influent samples shall be collected so that they do not contain digester supernatant or return activated sludge, or any other plant process recycled waters. *[62-601.500(4), 5-31-93]*

4. Parameters which must be monitored as a result of a surface water discharge shall be analyzed using a sufficiently sensitive method in accordance with 40 CFR Part 136. Parameters which must be monitored as a result of a ground water discharge (i.e., underground injection or land application system) shall be analyzed in accordance with Chapter 62-601, F.A.C. *[62-620.610(18), 11-29-94]*

5. The permittee shall provide safe access points for obtaining representative influent, reclaimed water, and effluent samples which are required by this permit. *[62-601.500(5), 5-31-93]*

6. During the period of operation authorized by this permit, the permittee shall complete and submit to the Department on a monthly basis Discharge Monitoring Report(s) (DMR), Form 62-620.910(10), as attached to this permit. The permittee shall make copies of the attached DMR form(s) and shall submit the completed DMR form(s) to the Central District Office at the address specified in Permit Condition I.B.9. by the twenty-eighth (28th) of the month following the month of operation.

   [62-620.610(18), 11-29-94][62-601.300(1), (2), and (3), 5-31-93]

7. During the period of operation authorized by this permit, reclaimed water or effluent shall be monitored annually for the primary and secondary drinking water standards contained in Chapter 62-550, F.A.C., (except for turbidity, total coliforms, color, and corrosivity). Twenty-four hour composite samples shall be used to analyze reclaimed water or effluent for the primary and secondary drinking water standards. These monitoring results shall be reported to the Department annually on the Reclaimed Water or Effluent Analysis Report, Form 62-601.900(4), or in another format if requested by the permittee and if approved by the Department as being compatible with data entry into the Department's computer system. During years when a permit is not renewed, a certification stating that no new non-domestic wastewater dischargers have been added to the collection system since the last reclaimed water or effluent analysis was conducted may be submitted in lieu of the report. The annual reclaimed water or effluent analysis report or the certification shall be completed and submitted in a timely manner so as to be received by the Department's Central District Office by July 1st of each year. *[62-601.300(4), 5-31-93][62-601.500(3), 5-31-93]*

8. The permittee shall submit an annual report of reclaimed water utilization using Form 62-610.300(4)(a)2. by January 1st of each year. *[62-610.870(3), 1-9-96]*

9. Unless specified otherwise in this permit, all reports and notifications required by this permit, including 24-hour notifications, shall be submitted to or reported to, as appropriate, Orange County Environmental Protection Department and the Department's Central District Office at the address specified below:

   Florida Department of Environmental Protection
   Central District Office
   3319 Maguire Boulevard Suite 232

Orlando, Florida 32803-3767

Phone Number - (407) 894-7555
FAX Number - (407) 897-2966 All FAX copies shall be followed by original copies.

II. RESIDUALS MANAGEMENT REQUIREMENTS

Basic Management Requirements

1. The method of residuals use or disposal by this facility is transport to Shelley's Septic Tank, Inc. Residuals Management Facility (RMF) located in Apopka, Orange County, Florida for lime stabilization and subsequent land spreading by signed Agreement. The Department shall be notified at least sixty (60) days prior to termination of the Agreement between the permittee and Shelley's Septic Tank, Inc. RMF.

2. The wastewater treatment facility permittee shall be responsible for proper handling, use, and disposal of its residuals and will be held responsible for any disposal violations that occur unless the permittee can demonstrate that the treatment facility to which the residuals are transported has legally agreed in writing to accept responsibility for proper treatment and disposal. *[62-640.300(3), 3-1-91]*

3. The permittee shall sample and analyze the residuals at least once every 12 months. All samples shall be representative and shall be taken after final treatment of the residuals but before use or disposal. Sampling and analysis shall be in accordance with the U.S. Environmental Protection Agency publication - POTW Sludge Sampling and Analysis Guidance Document, 1989. The following parameters shall be sampled and analyzed:

Parameter	Maximum Concentration	Maximum Cumulative Loading
Total Nitrogen	(Report only) % dry weight	
Total Phosphorus	(Report only) % dry weight	
Total Potassium	(Report only) % dry weight	
Cadmium	100 mg/kg dry weight	
Copper	3000 mg/kg dry weight	
Lead	1500 mg/kg dry weight	
Nickel	500 mg/kg dry weight	
Zinc	10,000 mg/kg dry weight	
pH	(Report only) standard units	
Total Solids	(Report only) %	

[62-640.700(1)(a), (b), (c),and (f); (2); 3(e); (4)(f) and 62-640.500(2)(d), 3-1-91]

III. GROUND WATER MONITORING REQUIREMENTS

1. During the period of operation authorized by this permit, the permittee shall sample ground water in accordance with this permit and the approved ground water monitoring plan prepared in accordance with Rule 62-522.600, F.A.C. *[62-522.600, 4-14-94][62-610.513, 1-9-96]*

2. The following monitoring wells shall be sampled quarterly for Land Application System R001:

Monitoring Location Site Number	Depth (Feet)	Aquifer Monitored	Well Type	New or Existing
MW-1	48.8	Surficial	Background	Existing
MW-2	48.5	Surficial	Intermediate	Existing
MW-3	38.64	Surficial	Compliance	Existing
MW-4	33.17	Surficial	Compliance	Existing
MW-5	33.75	Surficial	Compliance	Existing

[62-522.600, 4-14-94][62-610.513, 1-9-96]

3. The following parameters shall be analyzed for each of the monitoring wells identified in the Permit Conditions III.2:

   Water level(field measurement)
   Nitrate (as N)
   Total dissolved solids
   Chloride
   Fecal Coliform
   pH
   Turbidity

   [62-522.600 (11) (b), 4-1-94] [62-601.300(3), 62-601.700, and Figure 3 of 62-601, 5-31-93]

4. Ground water monitoring wells shall be purged prior to sampling to obtain representative samples *[62-601.700(5), 5-31-93]*

5. In accordance with Part D of Form 62-620.910(10), water levels shall be recorded before purging wells for sample collection. Elevation references shall include the top of the well casing and land surface at each well site (NVGD) at a precision of plus or minus 0.1 foot. *[62-610.424(3), 4-2-94]*

6. Ground water monitoring parameters shall be analyzed in accordance with Chapter 62-601, F.A.C. *[62-620.610(18), 11-29-94]*

7. Analyses shall be conducted on un-filtered samples, unless filtered samples have been approved by the Department as being more representative of ground water conditions.

8. Ground water monitoring test results shall be submitted on Part D of Form 62-620.910(10). Results shall be submitted with the April, July, October and January DMR's for each year during the period of operation allowed by this permit. *[62-522.600(10) and (11)(b), 4/14/94] [62-601.300(3), 62.601.700, and Figure 3 of 62-601] [62-620.610(18), 11-29-94]*

9. If a monitoring well becomes damaged or cannot be sampled for some reason, the permittee shall notify the Department with a written report within seven days detailing the circumstances and remedial measures taken or proposed to be taken. Replacement of monitoring wells shall be approved in advance by the Department. *[62-620.320(6), 12-24-96]*

10. Note: the facility is <u>not</u> required to provide an annual summary report of ground water monitoring data.

IV. ADDITIONAL REUSE AND LAND APPLICATION REQUIREMENTS

Part IV Rapid Infiltration Basins

1. All ground water quality criteria specified in Chapter 62-520, F.A.C., shall be met at the edge of the zone of discharge. The zone of discharge for this project shall extend horizontally 100 feet from the application site or to the facility's property line, whichever is less, and vertically to the base of the surficial aquifer. *[62-520.200(23), 4-14-94] [62-522.400 and 62-522.410, 4-14-94]*

2. Advisory signs shall be posted around the site boundaries to designate the nature of the project area. *[62-610.518, 1-9-96]*

3. The annual average hydraulic loading rate shall be limited to a maximum of 3.4 inches per day (as applied to the entire bottom area). *[62-610.523(3), 1-9-96]*

4. Rapid infiltration basins, or trenches normally shall be loaded for 7 days and shall be rested for 7 days. Infiltration ponds, basins, or trenches shall be allowed to dry during the resting portion of the cycle. *[62-610.523(4), 1-9-96]*

5. Rapid infiltration basins shall be routinely maintained to control vegetation growth and to maintain percolation capability by scarification or removal of deposited solids. Basin bottoms shall be maintained to be level. *[62-610.523(6) and (7), 1-9-96]*

6. Routine aquatic weed control and regular maintenance of storage pond embankments and access areas are required. *[62-610.514 and 62-610.414, 1-9-96]*

7. Overflows from emergency discharge facilities on storage ponds or on infiltration ponds, basins, or trenches shall be reported as an abnormal event to the Department's Central District Office within 24 hours of an occurrence as an abnormal event. The provisions of Rule 62-610.800(9), F.A.C., shall be met. *[62-610.800(9), 1-9-96]*

V. OPERATION AND MAINTENANCE REQUIREMENTS

1. During the period of operation authorized by this permit, the wastewater facilities shall be operated under the supervision of a(n) operator(s) certified in accordance with Chapter 61E12-41, F.A.C. In accordance with Chapter 62-699, F.A.C., this facility is a Category III, Class C facility and, at a minimum, operators with appropriate certification must be on the site as follows:

   A Class C or higher operator 3 hours/day for 5 days/week and one visit each weekend. The lead operator must be a Class C operator, or higher.

   [62-699, 5-20-94] [62-620.630(3), 11-29-94] [62-699.310, 5-20-92] [62-610.462, 1-9-96]

2. A certified operator shall be on call during periods the plant is unattended. *[62-699.311(1), 5-20-92]*

3. The application to renew this permit shall include an updated capacity analysis report prepared in accordance with Rule 62-600.405, F.A.C. *[62-600.405(5), 6-8-93]*

4. The application to renew this permit shall include a detailed operation and maintenance performance report prepared in accordance with Rule 62-600.735, F.A.C. *[62-600.735(1), 6-8-93]*

5. The permittee shall maintain the following records and make them available for inspection on the site of the permitted facility:

   a. Records of all compliance monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation and a copy of the laboratory certification showing the certification number of the laboratory, for at least three years from the date the sample or measurement was taken;

   b. Copies of all reports required by the permit for at least three years from the date the report was prepared;

   c. Records of all data, including reports and documents, used to complete the application for the permit for at least three years from the date the application was filed;

   d. Monitoring information, including a copy of the laboratory certification showing the laboratory certification number, related to the residuals use and disposal activities for the time period set forth in Chapter 62-640, F.A.C., for at least three years from the date of sampling or measurement;

   e. A copy of the current permit;

   f. A copy of the current operation and maintenance manual as required by Chapter 62-600, F.A.C.;

   g. A copy of the facility record drawings;

   h. Copies of the licenses of the current certified operators; and

   i. Copies of the logs and schedules showing plant operations and equipment maintenance for three years from the date of the logs or schedules. The logs shall, at a minimum, include identification of the plant; the signature and certification number of the operator(s) and the signature of the person(s) making any entries; date and time in and out; specific operation and maintenance activities; tests performed and samples taken; and major repairs made. The logs shall be maintained on-site in a location accessible to 24-hour inspection, protected from weather damage, and current to the last operation and maintenance performed.

[62-620.350, 11-29-94][61E12-41.010(1)(c), 11-02-93]

VI. SCHEDULES

1. The following corrective actions shall be completed according to the following schedule:

	Corrective Action	Completion Date
1	Repair surge tank	August 1, 1997
2	Repair splitter box	August 1,1997
3	Replace aeration system header	August 30, 1997

[62-600.735(1), 6-8-93]

VII. INDUSTRIAL PRETREATMENT PROGRAM REQUIREMENTS

This facility is not required to have a pretreatment program at this time. *[62-625.500, 11-29-94]*

VIII. OTHER SPECIFIC CONDITIONS

1. If the permittee wishes to continue operation of this wastewater facility after the expiration date of this permit, the permittee shall submit an application for renewal, using Department Forms 62-620.910(1) and (2), no later than one-hundred and eighty days (180) prior to the expiration date of this permit. *[62-620.410(5), 11-26-94]*

2. Florida water quality criteria and standards shall not be violated as a result of any discharge or land application of reclaimed water or residuals from this facility. *[62-610.850(1)(a) and (2)(a),1-9-96]*

3. **In the event that the treatment facilities or equipment no longer function as intended, are no longer** safe in terms of public health and safety, or odor, noise, aerosol drift, or lighting adversely affects neighboring developed areas at the levels prohibited by Rule 62-600.400(2)(a), F.A.C., corrective action (which may include additional maintenance or modifications of the permitted facilities) shall be taken by the permittee. Other corrective action may be required to ensure compliance with rules of the Department. *[62-600.410(8), 6-8-93]*

4. The deliberate introduction of stormwater in any amount into collection/transmission systems designed solely for the introduction (and conveyance) of domestic/industrial wastewater; or the deliberate introduction of stormwater into collection/transmission systems designed for the introduction or conveyance of combinations of storm and domestic/industrial wastewater in amounts which may reduce the efficiency of pollutant removal by the treatment plant is prohibited. *[62-604.130(3), 5-31-93]*

5. Collection/transmission system overflows shall be reported to the Department in accordance with Permit Condition IX. 20. *[62-604.550, 5-31-93] [62-620.610(20), 11-29-94]*

6. The operating authority of a collection/transmission system and the permittee of a treatment plant are prohibited from accepting connections of wastewater discharges which have not received necessary pretreatment or which contain materials or pollutants (other than normal domestic wastewater constituents):

   a. Which may cause fire or explosion hazards; or

b. Which may cause excessive corrosion or other deterioration of wastewater facilities due to chemical action or pH levels; or

c. Which are solid or viscous and obstruct flow or otherwise interfere with wastewater facility operations or treatment; or

d. Which result in treatment plant discharges having temperatures above 40°C.

[62-604.130(4), 5-31-93]

7. The treatment facility, storage ponds, rapid infiltration basins, and/or infiltration trenches shall be enclosed with a fence or otherwise provided with features to discourage the entry of animals and unauthorized persons. *[62-610.514(20), 1-9-96] [and 62-600.410, 6-8-93]*

8. Screenings and grit removed from the wastewater facilities shall be collected in suitable containers and hauled to a Department approved Class I landfill or to a landfill approved by the Department for receipt/disposal of screenings and grit. *[62-7.540, 12-10-85]*

9. The permittee shall provide adequate notice to the Department of the following:

   a. Any new introduction of pollutants into the facility from an industrial discharger which would be subject to Chapter 403, F.S., and the requirements of Chapter 62-620, F.A.C. if it were directly discharging those pollutants; and

   b. Any substantial change in the volume or character of pollutants being introduced into that facility by a source which was identified in the permit application and known to be discharging at the time the permit was issued.

   Adequate notice shall include information on the quality and quantity of effluent introduced into the facility and any anticipated impact of the change on the quantity or quality of effluent or reclaimed water to be discharged from the facility.

   [62-620.625(2), 11-29-94]

IX. GENERAL CONDITIONS

1. The terms, conditions, requirements, limitations and restrictions set forth in this permit are binding and enforceable pursuant to Chapter 403, Florida Statutes. Any permit noncompliance constitutes a violation of Chapter 403, Florida Statutes, and is grounds for enforcement action, permit termination, permit revocation and reissuance, or permit revision. *[62-620.610(1), 11-29-94]*

2. This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviations from the approved drawings, exhibits, specifications or conditions of this permit constitutes grounds for revocation and enforcement action by the Department. *[62-620.610(2), 11-29-94]*

3. As provided in Subsection 403.087(6), F.S., the issuance of this permit does not convey any vested rights or any exclusive privileges. Neither does it authorize any injury to public or private property or any invasion of personal rights, nor authorize any infringement of federal, state, or local laws or regulations. This permit is not a waiver of or approval of any other Department permit or authorization that may be required for other aspects of the total project which are not addressed in this permit. *[62-620.610(3), 11-29-94]*

4. This permit conveys no title to land or water, does not constitute state recognition or acknowledgment of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the State. Only the Trustees of the Internal Improvement Trust Fund may express State opinion as to title. *[62-620.610(4), 11-29-94]*

5. This permit does not relieve the permittee from liability and penalties for harm or injury to human health or welfare, animal or plant life, or property caused by the construction or operation of this permitted source; nor does it allow the permittee to cause pollution in contravention of Florida Statutes and Department rules, unless specifically authorized by an order from the Department. The permittee shall take all reasonable steps to minimize or prevent any discharge, reuse of reclaimed water, or residuals use or disposal in violation of this permit which has a reasonable likelihood of adversely affecting human health or the environment. It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit. *[62-620.610(5), 11-29-94]*

6. If the permittee wishes to continue an activity regulated by this permit after its expiration date, the permittee shall apply for and obtain a new permit. *[62-620.610(6), 11-29-94]*

7. The permittee shall at all times properly operate and maintain the facility and systems of treatment and control, and related appurtenances, that are installed and used by the permittee to achieve compliance with the conditions of this permit. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to maintain or achieve compliance with the conditions of the permit. *[62-620.610(7), 11-29-94]*

8. This permit may be modified, revoked and reissued, or terminated for cause. The filing of a request by the permittee for a permit revision, revocation and reissuance, or termination, or a notification of planned changes or anticipated noncompliance does not stay any permit condition. *[62-620.610(8), 11-29-94]*

9. The permittee, by accepting this permit, specifically agrees to allow authorized Department personnel, including an authorized representative of the Department and authorized EPA personnel, when applicable, upon presentation of credentials or other documents as may be required by law, and at reasonable times, depending upon the nature of the concern being investigated, to:

   a. Enter upon the permittee's premises where a regulated facility, system, or activity is located or conducted, or where records shall be kept under the conditions of this permit;

   b. Have access to and copy any records that shall be kept under the conditions of this permit;

   c. Inspect the facilities, equipment, practices, or operations regulated or required under this permit; and

   d. Sample or monitor any substances or parameters at any location necessary to assure compliance with this permit or Department rules.

   [62-620.610(9), 11-29-94]

10. In accepting this permit, the permittee understands and agrees that all records, notes, monitoring data, and other information relating to the construction or operation of this permitted source which are submitted to the Department may be used by the Department as evidence in any enforcement case involving the permitted source arising under the Florida Statutes or Department rules, except as such use is proscribed by Section 403.111, Florida Statutes, or Rule 62-620.302, Florida Administrative

Code. Such evidence shall only be used to the extent that it is consistent with the Florida Rules of Civil Procedure and applicable evidentiary rules. *[62-620.610(10), 11-29-94]*

11. When requested by the Department, the permittee shall within a reasonable time provide any information required by law which is needed to determine whether there is cause for revising, revoking and reissuing, or terminating this permit, or to determine compliance with the permit. The permittee shall also provide to the Department upon request copies of records required by this permit to be kept. If the permittee becomes aware of relevant facts that were not submitted or were incorrect in the permit application or in any report to the Department, such facts or information shall be promptly submitted or corrections promptly reported to the Department. *[62-620.610(11), 11-29-94]*

12. Unless specifically stated otherwise in Department rules, the permittee, in accepting this permit, agrees to comply with changes in Department rules and Florida Statutes after a reasonable time for compliance; provided, however, the permittee does not waive any other rights granted by Florida Statutes or Department rules. A reasonable time for compliance with a new or amended surface water quality standard, other than those standards addressed in Rule 62-302.500, F.A.C., shall include a reasonable time to obtain or be denied a mixing zone for the new or amended standard. *[62-620.610(12), 11-29-94]*

13. The permittee, in accepting this permit, agrees to pay the applicable regulatory program and surveillance fee in accordance with Rule 62-4.052, F.A.C. *[62-620.610(13), 11-29-94]*

14. This permit is transferable only upon Department approval in accordance with Rule 62-620.340, F.A.C. The permittee shall be liable for any noncompliance of the permitted activity until the transfer is approved by the Department. *[62-620.610(14), 11-29-94]*

15. The permittee shall give the Department written notice at least 60 days before inactivation or abandonment of a wastewater facility and shall specify what steps will be taken to safeguard public health and safety during and following inactivation or abandonment. *[62-620.610(15), 11-29-94]*

16. The permittee shall apply for a revision to the Department permit in accordance with Rules 62-620.300, 62-620.420 or 62-620.450, F.A.C., as applicable, at least 90 days before construction of any planned substantial modifications to the permitted facility is to commence or with Rule 62-620.300 for minor modifications to the permitted facility. A revised permit shall be obtained before construction begins except as provided in Rule 62-620.300, F.A.C. *[62-620.610(16), 11-29-94]*

17. The permittee shall give advance notice to the Department of any planned changes in the permitted facility or activity which may result in noncompliance with permit requirements. The permittee shall be responsible for any and all damages which may result from the changes and may be subject to enforcement action by the Department for penalties or revocation of this permit. The notice shall include the following information:

    a. A description of the anticipated noncompliance;

    b. The period of the anticipated noncompliance, including dates and times; and

    c. Steps being taken to prevent future occurrence of the noncompliance.

    [62-620.610(17), 11-29-94]

18. Sampling and monitoring data shall be collected and analyzed in accordance with Rule 62-4.246, Chapters 62-160 and 62-601, F.A.C., and 40 CFR 136, as appropriate.

a. Monitoring results shall be reported at the intervals specified elsewhere in this permit and shall be reported on a Discharge Monitoring Report (DMR), DEP Form 62-620.910(10).

b. If the permittee monitors any contaminant more frequently than required by the permit, using Department approved test procedures, the results of this monitoring shall be included in the calculation and reporting of the data submitted in the DMR.

c. Calculations for all limitations which require averaging of measurements shall use an arithmetic mean unless otherwise specified in this permit.

d. Any laboratory test required by this permit for domestic wastewater facilities shall be performed by a laboratory that has been certified by the Department of Health and Rehabilitative Services (DHRS) under Chapter 10D41, F.A.C., to perform the test. On-site tests for dissolved oxygen, pH, and total chlorine residual shall be performed by a laboratory certified to test for those parameters or under the direction of an operator certified under Chapter 61E12-41, F.A.C.

e. Under Chapter 62-160, F.A.C., sample collection shall be performed by following the protocols outlined in "DER Standard Operating Procedures for Laboratory Operations and Sample Collection Activities" (DER-QA-001/92). Alternatively, sample collection may be performed by an organization who has an approved Comprehensive Quality Assurance Plan (CompQAP) on file with the Department. The CompQAP shall be approved for collection of samples from the required matrices and for the required tests.

[62-620.610(18), 11-29-94]

19. Reports of compliance or noncompliance with, or any progress reports on, interim and final requirements contained in any compliance schedule detailed elsewhere in this permit shall be submitted no later than 14 days following each schedule date. *[62-620.610(19), 11-29-94]*

20. The permittee shall report to the Department any noncompliance which may endanger health or the environment. Any information shall be provided orally within 24 hours from the time the permittee becomes aware of the circumstances. A written submission shall also be provided within five days of the time the permittee becomes aware of the circumstances. The written submission shall contain: a description of the noncompliance and its cause; the period of noncompliance including exact dates and time, and if the noncompliance has not been corrected, the anticipated time it is expected to continue; and steps taken or planned to reduce, eliminate, and prevent recurrence of the noncompliance.

a. The following shall be included as information which must be reported within 24 hours under this condition:

1. Any unanticipated bypass which causes any reclaimed water or effluent to exceed any permit limitation or results in an unpermitted discharge,

2. Any upset which causes any reclaimed water or the effluent to exceed any limitation in the permit,

3. Violation of a maximum daily discharge limitation for any of the pollutants specifically listed in the permit for such notice, and

4. Any unauthorized discharge to surface or ground waters.

b. If the oral report has been received within 24 hours, the noncompliance has been corrected, and the noncompliance did not endanger health or the environment, the Department shall waive the written report.

[62-620.610(20), 11-29-94]

21. The permittee shall report all instances of noncompliance not reported under Permit Conditions IX. 18. and 19. of this permit at the time monitoring reports are submitted. This report shall contain the same information required by Permit Condition IX. 20 of this permit. *[62-620.610(21), 11-29-94]*

22. Bypass Provisions.

a. Bypass is prohibited, and the Department may take enforcement action against a permittee for bypass, unless the permittee affirmatively demonstrates that:

1. Bypass was unavoidable to prevent loss of life, personal injury, or severe property damage; and

2. There were no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime. This condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance; and

3. The permittee submitted notices as required under Permit Condition IX. 22. b. of this permit.

b. If the permittee knows in advance of the need for a bypass, it shall submit prior notice to the Department, if possible at least 10 days before the date of the bypass. The permittee shall submit notice of an unanticipated bypass within 24 hours of learning about the bypass as required in Permit Condition IX. 20. of this permit. A notice shall include a description of the bypass and its cause; the period of the bypass, including exact dates and times; if the bypass has not been corrected, the anticipated time it is expected to continue; and the steps taken or planned to reduce, eliminate, and prevent recurrence of the bypass.

c. The Department shall approve an anticipated bypass, after considering its adverse effect, if the permittee demonstrates that it will meet the three conditions listed in Permit Condition IX. 22. a. 1. through 3. of this permit.

d. A permittee may allow any bypass to occur which does not cause reclaimed water or effluent limitations to be exceeded if it is for essential maintenance to assure efficient operation. These bypasses are not subject to the provisions of Permit Condition IX. 22. a. through c. of this permit.

[62-620.610(22), 11-29-94]

23. Upset Provisions

a. A permittee who wishes to establish the affirmative defense of upset shall demonstrate, through properly signed contemporaneous operating logs, or other relevant evidence that:

1. An upset occurred and that the permittee can identify the cause(s) of the upset;

2. The permitted facility was at the time being properly operated;

3. The permittee submitted notice of the upset as required in Permit Condition IX. 20. of this permit; and

4. The permittee complied with any remedial measures required under Permit Condition IX. 5. of this permit.

b. In any enforcement proceeding, the permittee seeking to establish the occurrence of an upset has the burden of proof.

c. Before an enforcement proceeding is instituted, no representation made during the Department review of a claim that noncompliance was caused by an upset is final agency action subject to judicial review.

[62-620.610(23), 11-29-94]

Executed in Orlando, Florida.

STATE OF FLORIDA DEPARTMENT OF
ENVIRONMENTAL PROTECTION

Christianne C. Ferraro

Christianne C. Ferraro, P.E.
Program Administrator
Water Facilities

DATE: June 24, 1997

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando FL, 32803-3767

PERMITTEE NAME:	Zellwood Station Co-Op, Inc.	PERMIT NUMBER:	FLA010865		
MAILING ADDRESS:	2126 Spillman Drive Zellwood, FL 32798-9799	MONITORING PERIOD From:	_____	To:	_____
		LIMIT:	Final	REPORT:	Monthly
		CLASS SIZE:	N/A	GROUP:	Domestic
FACILITY:	Zellwood Station MHP WWTF	FACILITY ID:	FLA010865	WAFR SITE NO.:	5843
LOCATION:	2126 Spillman Drive Zellwood, FL	GMS ID NO.:	3048P01438	GMS TEST SITE NO.:	3048X12578
		DISCHARGE POINT NUMBER:	R001		
		PLANT SIZE/TREATMENT TYPE:	IIIC		
COUNTY:	Orange				

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement										
STORET No. 50050 Y Mon.Site No. EFF-1	Permit Measurement	0.300 (An.Avg.)	Report (Mo.Avg.)	mgd						Continuous	Flow Meter
$CBOD_5$	Sample Measurement										
STORET No. 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
$CBOD_5$	Sample Measurement										
STORET No. 80082 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement										
STORET No. 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement										
STORET No. 00530 1 Mon.Site No. EFA-1	Permit Measurement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
pH	Sample Measurement										
STORET No. 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		5 Days/Week	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Zellwood Station MHP WWTF | PERMIT NUMBER: FLA010865 | DISCHARGE POINT NUMBER: R001 | WAFR SITE No.: 5843

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Fecal Coliform Bacteria	Sample Measurement										
STORET No. 31615 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Fecal Coliform Bacteria	Sample Measurement										
STORET No. 31615 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Geo.Mean)	800 (Max.)		#/100mL		Every Two Weeks	Grab
TRC for disinfection	Sample Measurement										
STORET No. 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrate (as N)	Sample Measurement										
STORET No. 00620 1 Mon.Site No. EFA-1	Permit Measurement				12.0 (Max.)			mg/L		Monthly	8-hour FPC
$CBOD_5$	Sample Measurement										
STORET No. 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
TSS	Sample Measurement										
STORET No. 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Monthly	8-hour FPC
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010865 Facility: Zellwood Station MHP WWTF Three-month Average Daily Flow:

Month/Year: Daily Flow % of Permitted Capacity:

Days of the Months Parameter/Unit/Monitoring Location Site Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
Flow (mgd), EFF-1																														
$CBOD_5$ (mg/L), EFA-1																														
$CBOD_5$ (mg/L), INF-1																														
TSS (mg/L), EFA-1																														
TSS (mg/L), INF-1																														
Minimum pH (std. units), EFA-1																														
Maximum pH (std. units), EFA-1																														
Fecal Coliform Bacteria (#/100 mL), EFA-1																														
TRC (For Disinfection) (mg/L), EFA-1																														
Nitrate (as N) (mg/L), EFA-1																														

Plan Staffing:

Day Shift Operator	Class	_____	Certificate No.	_____	Name: _____
Evening Shift Operator	Class	_____	Certificate No.	_____	Name: _____
Night Shift Operator	Class	_____	Certificate No.	_____	Name: _____
Lead Operator	Class	_____	Certificate No.	_____	Name: _____

Type of Effluent Disposal or Reclaimed Water Reuse: _____

Limited Wet Weather Discharge Activated: Yes____ No____ Not Applicable____ If yes, cumulative days of wet weather discharge: _____

*Attach additional sheets necessary to list all certified operators necessary for required operations.

GROUNDWATER MONITORING REPORT - PART D (Zellwood Station / Orange County)

Permit Number: FLA010865
Month/Year: _____
Date Sample Obtained: _____
Was the well purged before sampling? ___ Yes ___ No

Monitoring Location Site Number: MW-1
Well Type: Background
Ground Water Class: G-II
WAFR 5849

Parameter	Storet Code	Sampling Method	Samples Filtered (Y/N)	Preservatives Added	Analysis Method	Analysis Result/Units	Detection Limits/Units
Water Level (ft. NGVD)	082545						
Nitrate (mg/L as N)	000620						
TDS (mg/L)	070304						
Chloride (mg/L)	000940						
Fecal Coliform (#/100ML)	031616						
pH (standard units)	000406						
Turbidity (NTU)	082079						

Comments and Explanations:

GROUNDWATER MONITORING REPORT - PART D (Zellwood Station / Orange County)

Permit Number: FLA010865
Month/Year: _____
Date Sample Obtained: _____
Was the well purged before sampling? ___ Yes ___ No

Monitoring Location Site Number: MW-2
Well Type: Intermediate
Ground Water Class: G-II
WAFR 5848

Parameter	Storet Code	Sampling Method	Samples Filtered (Y/N)	Preservatives Added	Analysis Method	Analysis Result/Units	Detection Limits/Units
Water Level (ft. NGVD)	082545						
Nitrate (mg/L as N)	000620						
TDS (mg/L)	070304						
Chloride (mg/L)	000940						
Fecal Coliform (#/100ML)	031616						
pH (standard units)	000406						
Turbidity (NTU)	082079						

Comments and Explanations:

DEP Form 62-620.910(10), Effective November 29, 1994
6/19/97

GROUNDWATER MONITORING REPORT - PART D (Zellwood Station / Orange County)

Permit Number: FLA010865
Month/Year: _____
Date Sample Obtained: _____
Was the well purged before sampling? ___ Yes ___ No

Monitoring Location Site Number: MW-3
Well Type: Compliance
Ground Water Class: G-II
WAFR 5847

Parameter	Storet Code	Sampling Method	Samples Filtered (Y/N)	Preservatives Added	Analysis Method	Analysis Result/Units	Detection Limits/Units
Water Level (ft. NGVD)	082545						
Nitrate (mg/L as N)	000620						
TDS (mg/L)	070304						
Chloride (mg/L)	000940						
Fecal Coliform (#/100ML)	031616						
pH (standard units)	000406						
Turbidity (NTU)	082079						

Comments and Explanations:

DEP Form 62-620.910(10), Effective November 29, 1994
6/19/97

GROUNDWATER MONITORING REPORT - PART D (Zellwood Station / Orange County)

Permit Number: FLA010865
Month/Year: _____
Date Sample Obtained: _____
Was the well purged before sampling? ___ Yes ___ No

Monitoring Location Site Number: MW-4
Well Type: Compliance
Ground Water Class: G-II
WAFR 5846

Parameter	Storet Code	Sampling Method	Samples Filtered (Y/N)	Preservatives Added	Analysis Method	Analysis Result/Units	Detection Limits/Units
Water Level (ft. NGVD)	082545						
Nitrate (mg/L as N)	000620						
TDS (mg/L)	070304						
Chloride (mg/L)	000940						
Fecal Coliform (#/100ML)	031616						
pH (standard units)	000406						
Turbidity (NTU)	082079						

Comments and Explanations:

DEP Form 62-620.910(10), Effective November 29, 1994
6/19/97

GROUNDWATER MONITORING REPORT - PART D (Zellwood Station / Orange County)

Permit Number: FLA010865
Month/Year: _____
Date Sample Obtained: _____
Was the well purged before sampling? ___ Yes ___ No

Monitoring Location Site Number: MW-5
Well Type: Compliance
Ground Water Class: G-II
WAFR 5845

Parameter	Storet Code	Sampling Method	Samples Filtered (Y/N)	Preservatives Added	Analysis Method	Analysis Result/Units	Detection Limits/Units
Water Level (ft NGVD)	082545						
Nitrate (mg/L as N)	000620						
TDS (mg/L)	070304						
Chloride (mg/L)	000940						
Fecal Coliform (#/100ML)	031616						
pH (standard units)	000406						
Turbidity (NTU)	082079						

Comments and Explanations:

DEP Form 62-620.910(10), Effective November 29, 1994
6/19/97

INSTRUCTIONS FOR MONITORING REPORT

PART A - Discharge Monitoring Report

One report shall be completed and submitted for each discharge point, outfall, or testing site listed in the permit. Use additional sheets if necessary. Mail to Department of Environmental Protection at the address shown on the first page of the permit.

Permittee Name/Address: Complete the name as shown on the face of the permit. Complete the mailing address. Place a note beside the mailing address if the address has changed within the past month.
Facility/Location: Complete the name of the facility and the address or location of the facility.
Permit Number: This is the number of the permit issued to the permittee which contains the monitoring requirements in this report.
Monitoring Period: This is the period that the data on this report represents.
Limit: This is blank if the data represents interim limits on a facility under construction. If the data represents final limits achieved after construction, the word FINAL will be here.
Class Size/Group: The facility classification is either major or minor and the group is either industrial or domestic.
Facility ID: This is the identification number of the facility which was assigned by the Department at the time the facility was constructed.
Discharge Point Number: This is the number in the permit assigned to the outfall, discharge point, or test site from which this data was collected. Complete one of these reports for each outfall or discharge point from your facility.
Plant size/Treatment type: If this facility is a domestic wastewater treatment facility, enter a one digit and one letter code to indicate the type of treatment and the plant size. First record the number from the chart below which represents the type of treatment provided by the facility. Then record the letter that indicates the permitted capacity (plant size) as shown on the chart below.

	Type of Treatment	Plant Size (mgd)			
		A	B	C	D
1	Activated Sludge, Attached Growth, or Combined Treatment systems that include nutrient removal processes (Nitrification alone is not considered nutrient removal.)	≥3.0	≥0.5 but <3.0	≥0.002 but <0.5	. . .
2	Activated Sludge or Combined Treatment systems that do not include nutrient removal processes	≥5.0	≥1.0 but <5.0	≥0.002 but <1.0	. . .
3	Activated Sludge operated in the extended aeration mode and oxidation ditches	≥8.0	≥2.0 but <8.0	≥0.025 but <2.0	≥0.002 but <0.025
4	Attached Growth Treatment systems (trickling filters or RBCs) that do not include nutrient removal processes	≥10.0	≥3.0 but <10.0	≥0.025 but <3.0	≥0.002 but <0.025

Parameter: This is the variable or substance which must be monitored.
Sample Measurement: The data which was collected and analyzed.
Permit Requirement: The limit from the permit for that parameter and measurement.
Quantity or Loading: The amount or mass of the parameter discharged during the reporting period in Average quantity discharged during the reporting period after adding each day of discharge, Maximum quantity discharged on the day with the highest amount, and the Unit of measurement (lbs, g, tons, etc.)
Quality or Concentration: The concentration of the parameter discharged during the reporting period in Minimum concentration during the reporting period, Average of all the measurements for the parameter during the reporting period, Maximum or highest concentration discharged during the reporting period, and the Unit of measurement (mg/L, ug/L, etc.)
No. Ex.: The number of sample measurements during the sampling period that exceeded the maximum (minimum or 7-day average, as appropriate) permit requirement for each parameter. If none, enter zero.
Frequency of Analysis: The number of times the measurement is required to be made by the permit and the number of times the measurement was made.
Sample Type: The type of sample (grab, composite, continuous) required to be taken by the permit and the type that was taken.
Certificate, Signature: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Date when the report is signed.
Comment and Explanation: Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation.

PART B - DAILY SAMPLE RESULTS

Complete one sheet for each outfall, discharge point, or test site where daily sampling is required by the permit. Record the results of daily monitoring for the parameters required to be sampled daily by your permit. Record the data in the units indicated. If there are no fecal coliforms detected, enter ND in the row labeled "fecal coliform." Use the blank rows as needed.

List the name, certificate number, and class of all state certified operators. Use additional sheets as necessary.

PART B - DAILY SAMPLE RESULTS contd.

Enter the type of effluent disposal or reclaimed water reuse (surface water discharge, ocean outfall, slow rate land application-public access, slow rate land application-restricted public access, rapid rate land application, absorption field, underground injection).

If this plant does not have a limited wet weather discharge permitted under the provision of Rule 62-610.860, F.A.C., check not applicable. If the plant activated the wet weather discharge during the reporting month, check yes and attach PART C - LIMITED WET WEATHER DISCHARGE.

PART C - LIMITED WET WEATHER DISCHARGE

This part is applicable only to limited wet weather discharges from reuse systems describe in Rule 62-610.860, F.A.C. If applicable, this part is to be completed and submitted each month reclaimed water or effluent is discharged by a limited wet weather discharge. For months with no discharge, Part C need not be submitted. All information is to be provided for each day on which the limited wet weather discharge was activated. All information is to be typed or printed in ink.

Facility ID: This is the identification number assigned by the Department for the facility.
Month/Year: This is the period during which the data on this report was collected and analyzed.
Rainfall Information: Rainfall gauging station requires entry of the name and location of the station. **Source of Climatological** (normal rainfall) data is the source of the information required for **Cumulative rainfall for the average rainfall year** which is the amount of rain, in inches, which falls during an average rainfall year from January through the month for which this part contains data. **Cumulative rainfall to date for this calendar year** is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the month for which this Part contains data.
Date: Enter the date on which the discharge occurred.
Duration of Discharge: Enter the number of hours, to the nearest 0.1 of an hour (0.1 = 6 min.) during each day of discharge that reclaimed water was actually discharged to surface waters.
Gallons Discharged: Enter the quantity in millions of gallons of reclaimed water discharged during the period shown in **Duration of Discharge**. Show the units as millions of gallons (mg), accurate to the nearest 0.01.
Average Discharge Flow Rate: Divide **Gallons Discharged** by **Duration of Discharge**. Record in million gallons per day (MGD).
Average Upstream Flow Rate: Enter the average flow rate in the receiving stream upstream from the point of discharge for the period shown in **Duration of Discharge**. The average flow rate can be calculated based on two measurements; one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit.
Stream Dilution Factor: Enter the stream dilution ratio accurate to the nearest 0.1. To calculate the factor, divide the **Average Upstream Flow Rate** by the **Average Discharge Flow Rate**.
$CBOD_5$: Enter the average $CBOD_5$ of the reclaimed water discharged during the period shown in **Duration of Discharge**.
TKN: Enter the average TKN of the reclaimed water discharged during the period shown in **Duration of Discharge**.
Reason for Discharge: Provide a brief explanation of the factors contributing to the need to activate the limited wet weather discharge.

PART D - GROUNDWATER MONITORING REPORT

This part is applicable only to groundwater monitoring wells. Type or print in ink the required data. All samples shall be collected and analyzed in accordance with Chapter 62-160, F.A.C. Laboratory reports shall be kept on file in the location indicated in your permit and made available for inspection upon request by the Department.

Facility ID: This is the identification number of the facility assigned by the Department.
Test Site ID: This is the identification number of the sampling site listed in your permit.
Month/Year: This is the period during which the data on this report was collected and analyzed. If the period is greater than one month, indicate beginning month to ending month.
Well Type: Indicate if the well being sampled is background, intermediate, compliance, or other. If other, explain in the comment section.
Date Sample Obtained: This is the date the sample was taken.
Ground Water Class: This is the classification of the ground water under Chapter 62-522, F.A.C.
Parameter: Analyze the parameters the permit requires. List any additional parameters from the permit which are not pre-listed here. If there are any parameters listed here which are not required by your permit, enter NR on that line.
Storet Code: Enter the Storet Code associated with the parameter.
Sampling Method: Describe the sampling method used.
Samples Filtered: Indicate whether the sample obtained was filtered (Y) or unfiltered (N).
Preservatives Added: State what preservatives were added to the sample.
Analysis Method: Indicate the analytical method used. Record the number from Chapter 62-160 or Chapter 62-601, F.A.C., or from other sources.
Analysis Result/Units: Record the results of the analysis. If the result was below the minimum detection limit, indicate that. Enter the units associated with the results of the analysis.
Detection Limits/Units: Record the detection limits and the units associated with them.
Comments and Explanations: Use this space to make any comments on or explanations of results which are unexpected.

WATER MANAGEMENT DISTRICT

Henry Dean, Executive Director
John R. Weble, Assistant Executive Director

POST OFFICE BOX 1429 PALATKA, FLORIDA 32178-1429
TELEPHONE 904-329-4500 SUNCOM 904-860-4500
TDD 904-329-4450 TDD SUNCOM 860-4450
FAX (Executive) 329-4125 (Legal) 329-4485 (Permitting) 329-4315 (Administration/Finance) 329-4508

SERVICE CENTERS

618 E. South Street
Orlando, Florida 32801
407-897-4300
TDD 407-897-5960

7775 Baymeadows Way
Suite 102
Jacksonville, Florida 32256
904-730-6270
TDD 904-448-7900

PERMITTING:
305 East Drive
Melbourne, Florida 32904
407-984-4940
TDD 407-722-5368

OPERATIONS:
2133 N. Wickham Road
Melbourne, Florida 32935-6108
407-752-3100
TDD 407-752-3102

August 12, 1997

ZELLWOOD STATION CO-OP INC
2126 SPILLMAN DRIVE
ZELLWOOD, FL 32798

SUBJECT: Consumptive Use Permit No. 2-095-0231NRM2

Enclosed is your permit and the forms necessary for submitting information to comply with conditions of the permit as authorized by the Governing Board of the St. Johns River Water Management District on August 12, 1997. All compliance information must be submitted to the District's Palatka office, P. O. Box 1429, Palatka, Florida 32178-1429.

Permit issuance does not relieve you from the responsibility of obtaining permits from any federal, state, and/or local agencies asserting concurrent jurisdiction for this work. The enclosed permit will expire on August 12, 2002.

In the event you sell your property, the permit will be transferred to the new owner if we are notified by you within thirty days of the recording of the sale. Please assist us in this matter so as to maintain a valid permit for the new property owner.

The permit enclosed is a legal document and should be kept with your other important documents. Please read the permit carefully since you are responsible for compliance with any provisos which are a part of this permit. Proviso compliance is a legal requirement and your assistance in this matter will be greatly appreciated.

According to Chapter 40C-2.401 and Section 6.4 of the Consumptive Water Use Handbook, a permanent tag will be issued by the District for well identification. This tag is prominently displayed at the site of withdrawal by permanently affixing the tag to the pump, headgate, valve, or other withdrawal facility. Failure to display a well tag shall constitute violation of a permit condition and may, if willful, be grounds for revocation of the permit. Please refer to your copy of 40C-2 if you need further clarification.

You will find enclosed a copy of the map submitted with your application, with each well's location and number identified. When placing the tag on the well, refer to this map to ensure proper well identification.

If you have any questions concerning your permit compliance information, the attached forms or well tags, contact me at 904-329-4274.

Thank you for your interest in our water resources.

Sincerely,

Gloria Jean Lewis

Gloria Lewis, Director
Division of Permit Data Services

Enclosures: Permit with compliance forms
Map
Well Tag(s)

cc: District Permit File

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT
Post Office Box 1429
Palatka, Florida 32178-1429

PERMIT NO. 2-095-0231NRM2 DATE ISSUED August 12, 1997

A PERMIT AUTHORIZING:

USE OF GROUND WATER FROM THE FLORIDAN AQUIFER FOR HOUSEHOLD USE FOR AN ESTIMATED POPULATION OF 2,013 IN 5 YEARS FOR IRRIGATION OF 83 ACRES OF GOLF COURSE TURF AND 14.2 ACRES OF LANDSCAPE.

LOCATION:

Sections 25 26, Township 20 South, Range 27 East
Orange County
ZELLWOOD STATION AND COUNTRY CLUB

ISSUED TO:
(owner)

ZELLWOOD STATION CO-OP INC
2126 SPILLMAN DRIVE
ZELLWOOD, FL 32798

Permittee agrees to hold and save the St. Johns River Water Management District and its successors harmless from any and all damages, claims, or liabilities which may arise from permit issuance. Said application, including all plans and specifications attached thereto, is by reference made a part hereof.

This permit does not convey to permittee any property rights nor any rights or privileges other than those specified herein, nor relieve the permittee from complying with any law, regulation or requirement affecting the rights of other bodies or agencies. All structures and works installed by permittee hereunder shall remain the property of the permittee.

This Permit may be revoked, modified or transferred at any time pursuant to the appropriate provisions of Chapter 373 or 403, Florida Statutes and 40C-1, Florida Administrative Codes:

PERMIT IS CONDITIONED UPON:

See conditions on attached "Exhibit A", dated August 12, 1997

AUTHORIZED BY: St. Johns River Water Management District

Department of Resource Management

By: _____
(DIRECTOR)
JEFF ELLEDGE

Governing Board

By: _____
(ASSISTANT SECRETARY)
HENRY DEAN.

"EXHIBIT A"

CONDITIONS FOR ISSUANCE OF PERMIT NUMBER 2-095-0231NRM2

ZELLWOOD STATION CO-OP INC

DATED August 12, 1997

1. District authorized staff, upon proper identification, will have permission to enter, inspect and observe permitted and related facilities in order to determine compliance with the approved plans, specifications and conditions of this permit.

2. Nothing in this permit should be construed to limit the authority of the St. Johns River Water Management District to declare a water shortage and issue orders pursuant to Section 373.175, Florida Statutes, or to formulate a plan for implementation during periods of water shortage, pursuant to Section 373.246, Florida Statutes. In the event a water shortage, as declared by the District Governing Board, the permittee must adhere reductions in water withdrawals as specified by the District.

3. Prior to the construction, modification, or abandonment of a well, the permittee must obtain a Water Well Construction Permit from the St. Johns River Water Management District or the appropriate local government pursuant to Chapter 40C-3, Florida Administrative Code. Construction, Modification, or abandonment of a well will require modification of the consumptive use permit when such construction, modification or abandonment is other than that specified and described on the consumptive use permit application form.

4. Leaking or inoperative well casings, valves, or controls must be repaired or replaced as required to eliminate the leak or make the system fully operational.

5. Legal uses of water existing at the time of permit application may not be significantly adversely impacted by the consumptive use. If unanticipated significant adverse impacts occur, the District shall revoke the permit in whole or in part to curtail or abate the adverse impacts, unless the impacts can be mitigated by the permittee.

6. Off-site land uses existing at the time of permit application may not be significantly adversely impacted as a result of the consumptive use. If unanticipated significant adverse impacts occur, the District shall revoke the permit in whole or in part to curtail or abate the adverse impacts, unless the impacts can be mitigated by the permittee.

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7. The District must be notified, in writing, within 30 days of any sale, conveyance, or other transfer of a well or facility from which the permitted consumptive use is made or within 30 days of any transfer of ownership or control of the real property at which the permitted consumptive use is located. All transfers of ownership or transfers of permits are subject to the provisions of section 40C-1.612, F.A.C..

8. A District-issued identification tag shall be prominently displayed at each withdrawal site by permanently affixing such tag to the pump, headgate, valve or other withdrawal facility as provided by Section 40C-2.401, Florida Administrative Code. Permittee shall notify the District in the event that a replacement tag is needed.

9. The permittee must ensure that all service connections are metered.

10. Landscape irrigation is prohibited between the hours of 10:00 a.m. and 4:00 p.m., except as follows:

    A. Irrigation using a micro-irrigation system is allowed anytime.

    B. The use of reclaimed water for irrigation is allowed anytime, provided appropriate signs are placed on the property to inform the general public and District enforcement personnel of such use. Such signs must be in accordance with local restrictions.

    C. Irrigation of, or in preparation for planting, new landscape is allowed any time of day for one 30 day period provided irrigation is limited to the amount necessary for plant establishment.

    D. Watering in of chemicals, including insecticides, pesticides, fertilizers, fungicides, and herbicides when required by law, the manufacturer, or best management practices is allowed anytime within 24 hours of application.

    E. Irrigation systems may be operated anytime for maintenance and repair purposes not to exceed ten minutes per hour per zone.

11. Golf course and recreational irrigation is prohibited between the hours of 10:00 a.m. and 4:00 p.m., except as follows:

    A. Irrigation using a micro-irrigation system is allowed anytime.

2-095-0231NRM2

B. Facilities using reclaimed water for irrigation may do so at anytime provided appropriate signs are placed on the property to inform the general public and District personnel of such use. Such signs must be in accordance with local restrictions.

C. The use of recycled water from wet detention treatment ponds to irrigate golf courses and recreational areas is allowed anytime provided the ponds are not augmented from any ground or off-site surface water sources.

D. Irrigation of, or in preparation for planting, new golf courses and recreational areas is allowed at any time of day for one 30 day period provided irrigation is limited to the amount necessary for plant establishment. Irrigation of newly seeded or sprigged golf course areas is allowed any time of day for one 60 day period.

E. Chemigation and fertigation are allowed at any time of day one time per week, and anytime during the normal 4:00 p.m. to 10:00 a.m. irrigation hours.

F. Watering in of chemicals, including insecticides, pesticides, fertilizers, fungicides, and herbicides when required by law, the manufacturer or best management practices is allowed anytime within 24 hours of application.

G. Irrigation systems may be operated anytime for maintenance and repair purposes not to exceed ten minutes per hour per zone.

H. The use of water to protect golf course turf from heat stress damage is allowed anytime, provided the watering does not exceed ten minutes per hour per zone.

12. Treated effluent must be used as irrigation water when it becomes available, economically feasible, and permissible under applicable state and federal statutes or regulations promulgated thereunder.

13. If chemicals are injected into the irrigation system, the well or surface pump must be equipped with backflow prevention devices installed pursuant to Section 5E-2.030, F.A.C.

14. Whenever feasible, the permittee must use native vegetation that requires little supplemental irrigation for landscaping within the service area of the project.

2-095-0231NRM2

15. Permittee must enter into a contract with existing and new customers requiring them to install water conserving devices on shower heads, faucets and water closets. For existing users the water conserving devices must be installed within one year of issuance of permit. New users must have these devices installed at the time of construction in accordance with Subsection 553.14, F.S. New connections will not be allowed unless these devices are installed.

16. All submittals made to demonstrate compliance with this permit must include the CUP number 2-095-0231ANRM2 plainly labeled.

17. This permit will expire 5 years from the date of issuance.

18. Total annual ground water withdrawals from all wells must not exceed:
    353.87 million gallons in 1997;
    312.44 million gallons in 1998;
    273.36 million gallons in 1999;
    245.36 million gallons in 2000;
    237.51 million gallons in 2001;
    225.21 million gallons in 2002.

19. Maximum annual ground water withdrawals from wells nos. 1 and 2 must not exceed:
    228.49 million gallons in 1997;
    196.37 million gallons in 1998;
    166.59 million gallons in 1999;
    147.90 million gallons in 2000;
    142.57 million gallons in 2001;
    137.24 million gallons in 2002.

20. Maximum daily ground water withdrawals from well nos. 1 and 2 must not exceed:
    0.984 million gallons in 1997;
    0.798 million gallons in 1998;
    0.717 million gallons in 1999;
    0.636 million gallons in 2000;
    0.614 million gallons in 2001;
    0.591 million gallons in 2002.

21. Maximum annual ground water withdrawals for golf course irrigation (well nos. 5 and 7) must not exceed:
    120.09 million gallons in 1997;
    110.78 million gallons in 1998;
    101.48 million gallons in 1999;
    92.17 million gallons in 2000;
    82.86 million gallons in 2001;
    82.86 million gallons in 2002.

The average annual water use should be less than these amounts in all years except for a 2 in 10 year drought.

22. Maximum annual ground water withdrawals for landscape irrigation from well no. 3, must not exceed 5.29 million gallons. The average annual water use should be less than these amounts in all years except for a 2 in 10 year drought.

23. Maximum annual ground water withdrawals for fire protection, must not exceed 4.07 million gallons. Documentation from the local fire protection department must be received by the District within 30 days of each use of the wells for fire protection. The documentation must include the estimated use for that occurrence.

24. Wells no. 1, 2, 3, and 5, as listed on the application, must continue to be monitored with totalizing flowmeters. These meters must maintain 95% accuracy, be verifiable, and be installed according to the manufacturer s specifications. Prior to beginning usage the backup golf course water supply well, well no. 7, as listed on the application, must be equipped with a totalizing flowmeter. This meter must maintain 95% accuracy, be verifiable and be installed according to the manufacturer's specifications. Documentation (i.e. manufacturer's specifications and a photo) of the proper installation of this meter must be submitted to the District within 30 days of meter installation

25. Total withdrawals from each well, must be recorded continuously, totaled monthly, and reported to the District at least every six months from the initiation of the monitoring using District Form No. EN-50. The reporting dates each year will be as follows for the duration of the permit:

Reporting Period	Report Due Date
January - June	July 31
July - December	January 31

26. The permittee must maintain all flowmeters. In case of failure or breakdown of any meter, the District must be notified in writing within 5 days of its discovery. A defective meter must be repaired or replaced within 30 days of its discovery.

27. The permittee must have all well flowmeters checked for accuracy once every 3 years within 30 days of the anniversary date of permit issuance, and recalibrated if the

difference between the actual flow and the meter reading is greater than 5%. District Form No. EN-51 must be submitted to the District within 10 days of the inspection/recalibration.

28. All water uses and all residential service connections must be individually metered by December 31, 1998. A letter documenting the completion of retrofit project must be submitted to the District within 30 days of completion of this project.

29. The permittee must conduct a detailed water audit of the entire water use system (including residential, commercial, golf course, urban landscape and water utility uses) and submit it to the District by December 31, 2000. All water uses given in the audit must be documented on how the amounts were metered and determined.

30. The permittee must implement the Water Conservation Plan submitted to the District in October 1995, in accordance with the schedule contained therein.

31. Within 6 months of permit issuance, a thorough leak detection and repair program must be initiated on the entire system, including the golf course and the landscape irrigation lines. A report documenting the occurrence of leaks and the repairs which were made must be submitted to the District annually within 30 days of the anniversary date of permit issuance.

32. A Reuse Feasibility Study must be submitted to the District for review and approval by December 31, 2000. This study must address the plans for construction of the new wastewater plant, and must include cost estimates and a construction/implementation schedule for producing public access quality reuse for irrigation use at the golf course and urban landscaped areas.

33. The permittee shall comply with the statutes and rules of the Florida Public Service Commission in the implementation of a residential water use rate structure. Any such residential water rate structure shall be an inclined block rate to promote water use efficiency. Prior to submittal of the proposed rate structure to the FPSC the permittee must submit a copy of the proposed rate structure to the District for review and approval.

34. The permittee must follow the recommendations set forth in the Florida Lawn Maintenance Manual compiled and published by the Institute of Food and Agricultural Sciences at the University of Florida.

2-095-0231NRM2

35. On or before June 1, 2000, the permittee must submit a letter documenting the consistency of the permitted activities with actual water use. This letter must verify the current address of the permittee, total acreage owned at the site, population served, project acreage, irrigated urban landscape and golf course acreage, types of landscape irrigated, and the number and capacities of all wells.

36. The Permittee shall encourage its members and those persons, firms or corporations that receive water and wastewater service from Permittee to utilize xeriscape on their property at every opportunity.

ZELLWOOD STA ON CO-OP, INC.
Salaries and Benefits
2001 Rate Case

Name	Job Description	Annual Hours Allocated	Hourly Rate	Annual Salary	Benefits W/C, Unem. Pyr. Proc. Cost	Employer Health Insur. Contribution	Total Allocated	Explanation	Benefits Factor
Gordon, Dinah	Accounting	520	$ 15.00	$ -	$ 2,148.60	$ -	$ 9,648.60	25% Allocation	1.1237
Holt, Gloria	Manager	520	$ -	$ 53,500.00	$ 3,169.88	$ -	$ 16,544.88	25% Allocation	1.1237
Miller, Paul	Meter Reader	576	$ 10.56	$ -	$ 1,242.67	$ -	$ 7,325.23	6 days mo. X 8 hours	1.2043
Ramsey, Marie	Accounting	2080	$ 11.00	$ -	$ 2,830.26	$ -	$ 25,710.26	100%	1.1237
Restall, William	Operator	2080	$ -	$ 46,800.00	$ 9,562.00	$ -	$ 56,362.00	100%	1.2043
Scharrer, Bessie	Receptionist	208	$ 7.00	$ -	$ 180.11	$ -	$ 1,636.11	4 Hours Week x 52 wks.	1.1237
New Hire	Asst. Oper.	2080	$ 15.00	$ -	$ 6,374.16	$ -	$ 37,574.16	100%	1.2043
TOTAL SALARIES & BENE.							$ 154,801.23		

Note: No increases in salary have been projected. Projected on current rates of pay. Normally Co-op anticipates a 5% increase in pay at anniversary dates.

Prepared 8/2/01

State of Florida
Department of Environmental Protection

LICENSE No.: 0006839 DATE ISSUED: 3/1/01
CLASS: B DRINKING WATER TREATMENT PLANT OPERATOR

William A. Restall
IS LICENSED UNDER THE PROVISIONS OF CH. 403 F.S.
VALID UNTIL: 4/30/03

State of Florida
Department of Environmental Protection

LICENSE No.: 0007322 DATE ISSUED: 3/1/01
CLASS: A WASTEWATER TREATMENT PLANT OPERATOR

William A. Restall
IS LICENSED UNDER THE PROVISIONS OF CH. 403 F.S.
VALID UNTIL: 4/30/03

Please note no vehicles are owned or leased by Zellwood Station Co-Op, Inc.

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
32798
407-886-0000

COMPLAINT FORM

Date: 3/-A/00

Name: Kathryn Freeman

Address: 2226 Orangewood Circle

Lot #: 1541

Message: Using her Water. They got there's fixed - She did not realize we were billed ~~lot~~ A Month Later for Meter Reading

Action Or Resolution:

Explain Where we read Meters.

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
32798
407-886-0000

COMPLAINT FORM

Date: 8/2/00

Name: Erck, Elizabeth

Address: 3729 Citrus Circle

Lot #: 1454

Message: No happy about over 10,000 ~~over~~ He thinks meter Readings are Wrong - Not happy. Some Pay water and some don't. She went from Lease to Shareholder

Action Or Resolution:

She seemed not to understand about having to Pay water Bill whether other didn't - She Will Call Jane in Sept - After Vacation

AR

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
32798
407-886-0000

815 521-1525 - Jim Bill Reread forms

COMPLAINT FORM

Date: 7/31/00

Name: Philip Centracchio

Address: 4012 Myrtle Oak Road

Lot #: 860

Message: Did not use the over 10 gallons no one lives there.

Daughter Request her ADDRESS Changed

Action Or Resolution:

Will give Bill a reread form and run 5 gal test for leaks - Will call if he says she has a leak.

Bill Check on Water Meter. Said he ran a 5 gallon test. Looked like her Sprinkler was damaged. - Called + Talk to Daughter

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
32798
407-886-0000

COMPLAINT FORM

Date: 8/3/00

Name: Richard Evans

Address:

Lot #: 0494

Message: Does not Agree. With Meter Readings -

Action Or Resolution:

Sent Bill Back out to reread Meter -

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
32798
407-886-0000

COMPLAINT FORM

Date: 8/3/00

Name: Mace, Wilbur

Address: 4227 Oak Grove Drive

Lot #: 0032

Message:

Not Happy about 5.27 Showing on his Bill

Action Or Resolution:

Explain his Bill.

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
32798
407-886-0000

COMPLAINT FORM

Date: 8/3/00

Name: Holt –

Address: 2102 Canopy Drive

Lot #:

Message: Did not understand Bill – Thought Water Reading Was Wrong –

Action Or Resolution:

Explained he had a reading of a month behind – She seemed OK. MR.

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
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32798
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COMPLAINT FORM

Date: 7/28/00

Name: Jaffee

Address:

Lot #:

Message:

Called Said did not like Water Reading no Way She Could use that much Water

Action Or Resolution:

Checked again and Meter reading Seemed right –

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
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COMPLAINT FORM

Date: 9-20-00

Name: Mr. Lacy Farmer

Address: 3430 Barberry Circle

Lot #: 1791

Message: He was angry about water usage - Said he could not possibly be over 10,000 of water. Said he wanted to speak to Bill. Concerning an investigation

Action Or Resolution:

Sending Bill out to see him - explain what was wrong - Reported to Bill 9/20/00 -

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
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32798
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COMPLAINT FORM

Date: 9/11 00

Name: James C. Sly

Address: 3806 South Citrus Circle

Lot #: 1445

Message: Meter was mis read

Action Or Resolution:

Gave him Credit for 5-27.

Meter was mis read.

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
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COMPLAINT FORM

Date: 9/1/00

Name: Conrad

Address: 4133 Greenbluff

Lot #: 1892

Message:

had leak said he took care of problem 9/1/00

Action Or Resolution:

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
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32798
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COMPLAINT FORM

Date: 9/11/00

Name: Ryfun, John C

Address: 2373 Cayman Circle

Lot #: R17

Message: Thought Bill jumped in last 2 month -

Action Or Resolution:

I checked meter book - readings seemed correct. Suggested there might be a leak and sprinklers might need adjusting

ZELLWOOD STATION CO-OP.

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COMPLAINT FORM

Date: 9/6/00

Name: Schuster Nicholas

Address:

Lot #: 611

Message: Thought Meter reading Was Wrong

Action Or Resolution:

I talked to her and explain it was in line according to the reading ~~the~~ I suggested Bill come out and re read She said never mind She would monitor the meter for awhile

ZELLWOOD STATION CO-OP.

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COMPLAINT FORM

Date: 9/7/00

Name: Normark, Oliver E

Address: 2025 Live Oak Lane

Lot #: "D"

Message: Said Meter read Wrong

Action Or Resolution:

left Bell a return message

Meter Was read wrong
gave him a credit of 5.27.
He did not go over 10,000.00

ZELLWOOD STATION CO-OP.

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COMPLAINT FORM

Date: 8-8-00

Name: Francis Jackson

Address: 3618 South Citrus Cir Circle

Lot #: 1431

Message:

Was not happy with Meter reading

Action Or Resolution:

Sent Bill out to Check - Said ~~they~~ used 5120 gallons in 3 days - Called told her there was a leak.

ZELLWOOD STATION CO-OP.

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COMPLAINT FORM

Date: 10/3/02

Name: Mr Yaggie

Address: 3816 Parway Road

Lot #: 1346

Message: Mr. Yaggie Came in Concerned about Water charge. Said meter was read right but his water was turned off - Not sprinklers on either. Said he was gone in August - No way reading was right NR

Action Or Resolution:

Told him I would speak to Bill about this! He said he should not have used Cong water. Mr. Yaggie got a copy of Gloria's print out about Water leakage.

CNR

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
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32798
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COMPLAINT FORM

Date: 10/2/00

Name: Roy M. Schnell

Address: 4118 Oak GROVE DRIVE

Lot #: 103

Message: Did not agree With Meter Reading Said used more than 180 gallons - Took his own reading -

Action Or Resolution:

Sending Bill out to be read.

ZELLWOOD STATION CO-OP.

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32798
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COMPLAINT FORM

Date: 10/2/00

Name: O'Neill

Address: 3815 South Citrus Circle

Lot #: 1450

Message: Was Very upset up Billing & Water Reading
42,000 gal
37 000 Month Before.

Action Or Resolution:

Try to explain Was Very Confused
Sent Bill out to talk to Kev.
Mik.

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
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COMPLAINT FORM

Date: 10/1/00

Name: Bourget

Address:

Lot #: 696

Message: Did not think her meter reading was right.

Action Or Resolution:

Suggested her irrigation system might be off. She said no!

Suggest she catch bill. Told she would check and ~~not~~ make sure I did not enter wrong.

ZELLWOOD STATION CO-OP.

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COMPLAINT FORM

Date: 12/4/00

Name: Gloria Stokes

Address:

Lot #: 647

Message: Did not agree with ~~Meeb~~ meter Reading.
Acid was going to keep a check on it.

Action Or Resolution:

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
32798
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COMPLAINT FORM

Date: 7-6-2000

Name: Trudy Larsen

Address: 3716 Cohen Drive Zellwood

Lot #: 0752

Message: Did not receive Water Bill Was very upset. Said she never gets her Water Bill

Action Or Resolution:
We show we mailed it Looks like Post Office has lost Bill or not delivered Mailed New Bill 7/6/2000

NK

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
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COMPLAINT FORM

Date: 7/5/00

Name: Blank, Maurice O.

Address: 3328 Overlook Road Zellwood

Lot #: 1669

Message:

Wanted to know about going out to town & Putting house up what to do about Water Bill - Also excess Meter Reading

Action Or Resolution:

Research was a computer input error corrected & gave Credit 7/5/00

OK

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
32798
407-886-0000

COMPLAINT FORM

Date: 7- 00

Name: Earl Miller

Address: 3482 North Citrus Circle

Lot #: 1800 Zellwood

Message:

Did not get Water Bill
Mailed & check off.

Action Or Resolution:

Mailed and Checked off - Post office
did not deliver or Miss delivered
MR

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
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COMPLAINT FORM

Date: 7-5-2000

Name: Weinegate Carol Ann

Address:

Lot #: 1548-A

Message:

Asked about Billing
Not happy about Inspection
of Home

Action Or Resolution:

~~Asked~~ About Water Bill + Sewer

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
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COMPLAINT FORM

Date: 7-5-2000

Name: Ronco

Address: 257 Donegal Court #604 Altamonte Springs Fl. 32714

Lot #: 604

Message: Yellow water to high - thought Meter was read wrong

Action Or Resolution:
Called Back said he remembered Water Leak in May - He ~~[illegible]~~ found out why

MR.

ZELLWOOD STATION CO-OP.

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COMPLAINT FORM

Date: 7-5-00

Name: ~~Hedduus~~ DAVID Hedus

Address:

Lot #: 1761-A

Message: Had Wrong address
Did Not Receive Bill

Action Or Resolution:

Corrected address 7/5/00

MR

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
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32798
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789-3608

COMPLAINT FORM

Date: 7-5-00

Name: Walter H. Brown

Address: 3230 Citrus Lane Zellwood Fl. 32798

Lot #: 1407

Message: Did Not Receive Water Bill

Action Or Resolution:

Mailed another one 7/5/00

Marked off and Mailed on 6/30/00
Post Office must of Miss Delivered

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
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COMPLAINT FORM

Date: 7-5-00

Name: Joseph C Shea

Address: 3733 Cohen Drive Zellwood

Lot #: 0718

Message: Feels Like Meter read Meter Wrong.

Action Or Resolution:

Bill Made sure Meter was read right.
Gloria said they are getting Charged for Water they never use to be charged for. They are now getting all water used to run thru new meters. MP

ZELLWOOD STATION CO-OP.

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COMPLAINT FORM

Date: 7-5-00

Name: Mr. Bordonaro

Address: 3457 Greenbluff Road Zellwood

Lot #: 1593

Message: Did not get credit for paying his bill.

Action Or Resolution:

Found the mistake and gave him the credit on his Bill 7/5/00

MR

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
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COMPLAINT FORM

Date: 7/24/2000

Name: Leonard W. Henderickson

Address: 4016 Myrtle Drive - Zellwood.

Lot #: 859

Message: Felt like Meter was misRead in May 2000. There ~~Aver~~ Average Bill has been running around 8,000 gallons.

Action Or Resolution:
I ~~Hope~~ freed the complaint. Customer will be monitoring meter readings

Marie Ramsey

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
32798
407-886-0000

COMPLAINT FORM

Date: 7/20/00

Name: Pricilla Richardson

Address: 4486 Red Oak Lane and 3433 North Citrus

Lot #: 1635 & 0120

Message:

Did not receive Water on two lots
Also Complained about utility tax was
told to her wrong date it said April but till May.

Action Or Resolution:

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
32798
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COMPLAINT FORM

Date: 7-18-00

Name: Carl Judus

Address: 2018 South Citrus Circle

Lot #: 1726

Message:

Said he did not receive Bill 2 months straight

Action Or Resolution:

This Bill was mailed By our Check off Sheet

MR

Remailed Bill

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
32798
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COMPLAINT FORM

Date: 7-10-2000

Name: Peterson Gifford F.

Address: 3916 Coen Drive Zellwood

Lot #: 0767

Message: Complained Lawn Mowing Crew - Man Off Water Meter - He Called Security & they Confirmed

Action Or Resolution:

Mr. Peterson is going to Contact D&B about problem - Told him Water that Runs through Meter would be charged - Water used had to be Paid for

ZELLWOOD STATION CO-OP.

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2126 Spillman Drive
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COMPLAINT FORM

Date: 7-6-00

Name: _____

Address: _____

Lot #: _____

Message: _____

_____

_____

_____

Action Or Resolution:

_____

_____

_____

_____

_____

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
Zellwood, Florida
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COMPLAINT FORM

Date: 7/27/00

Name: Mrs. Marie

Address: 3791 Sherwood Road. Ohio.

Lot #: 715

Message: Did not receive Bill

Action Or Resolution:

Found out from Tina ~~how~~ How Much the Bill Was and Said She would send a check promptly MK

ZELLWOOD STATION CO-OP.

Sewer & Water Dept.
2126 Spillman Drive
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407-886-0000

COMPLAINT FORM

Date: 7/27/00

Name: Price, Dane

Address:

Lot #: 141

Message:

Did not receive Bill! –

Action Or Resolution:

~~Has~~ The Bill was mail- did not have a problem getting 2nd Bill!

Original Cost Study-Replacement Cost for Plants

Florida Public Service Commission

Company: Zellwood Station Co-op, Inc.
Docket No.: 010492-WS
Test Year Ended: December 31, 2000

Workpaper
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Preparer: J. Coto

Line No.	NARUC Acct. No.	Item/Description	No.	Length	Replacement Unit Cost	Total Estimated Cost
1	303	Potable Water Plant Land (0.52 acres)*	0.52		$10,000	$ 5,200
2	307	Potable Water Wells	2		$23,000	46,000
3	330	150,000 gal. Crom stoage tank with aerator				250,000
4	311	2-50 HP high service pumps and piping				75,000
5	311	1-25 HP booster pump and piping				25,000
6	330	15,000 gallon hydropneumatic tank				50,000
7	320	Pre and post dual cylinder chlorination system				15,000
8	304	Building				60,000
9	339	Crane				30,000
10	320	Yard piping, meters, etc				50,000
11	320	Electrical				75,000
12	310	Stand-by generator				100,000
13	304	Fence				10,000
14		Total Water Treatment Plant				$ 786,000
15	353	Wastewater Treatment Plant (5.74 acres)*	5.74		$10,000	$ 57,400
16	380	0.3 MGD Ring steel "DAVCO" field erected WWTF				350,000
17	380	Blowers, controls, and piping				100,000
18	380	Sludge recirculation pumps, controls, and piping				25,000
19	380	60,000 gal. surge tank with pumps and blowers				100,000
20	380	Dual cylinder chlorination system				7,500
21	380	Effluent disposal ponds				75,000
22	380	Yard piping				50,000
23	380	Electrical				50,000
24	354	Fence				25,000
25	354	Shed				3,000
26		Total Wastewater Treatment Plant				$ 842,900

Note: Unit costs obtained from Marshall Valuation Service by Marshall & Swift, 1997 Building Construction Cost Data 55th ed. by R.S. Means, manufacturer's quotes, contractor bids, and engineer's judgement.

* WWTF acreage measured from 2001 topographic survey. WTF acreage measured from August 1995 topographic aerial photograph.

Original Cost Study-Replacement Cost for Distribution and Collection Systems
Company: Zellwood Station Co-op, Inc.
Docket No.: 010492-WS
Test Year Ended: December 31, 2000

Florida Public Service Commission

Workpaper
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Preparer: J. Coto

Line No.	NARUC Acct. No.	**Banbury Village (1978)** Item/Description	Size	No.	Length	Replacement Unit Cost	Total Cost
1	331	Potable water main (PVC pipe)	2"		2,700	$ 5.50	$ 14,850
2			3"		300	8.00	2,400
3			4"		400	11.00	4,400
4			6"		1,600	16.50	26,400
5			8"		1,400	22.00	30,800
6			10"		3,400	27.50	93,500
7	333	Potable water service laterals	1"	250		150.00	37,500
8	331	Potable water gate valves	2"	8		475.00	3,800
9			3"	2		525.00	1,050
10			4"	1		585.00	585
11			6"	3		715.00	2,145
12			8"	3		825.00	2,475
13			10"	5		1,000.00	5,000
14	335	Fire hydrants		9		2,600.00	23,400
15		Total Transmission and Distribution					$ 248,305
16	361	Sanitary sewer main	8"		13,000	$ 15.00	$ 195,000
17			8" F.M.		400	20.00	8,000
18	363	Sanitary sewer lateral	4"	250		150.00	37,500
19	361	Manholes		72		2,000.00	144,000
20	371	Lift Station #3 (1978)		1		60,000.00	60,000
21		Total Collection System					$ 444,500

Note: Unit costs obtained from Marshall Valuation Service by Marshall & Swift, 1997 Building Construction Cost Data 55th ed. by R.S. Means, manufacturer's quotes, contractor bids, and engineer's judgement.

Original Cost Study-Replacement Cost for Distribution and Collection Systems
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Preparer: J. Coto

Line No	NARUC Acct No	**Citrus Ridge (1977)** Item/Description	Size	No.	Length	Replacement Unit Cost	Total Cost
1	331	Potable water main (PVC pipe)	2"		2,200	$ 5.50	$ 12,100
2			4"		300	11.00	3,300
3			8"		2,100	22.00	46,200
4			10"		4,800	27 50	132,000
5	333	Potable water service laterals	1"	159		150.00	23,850
6	331	Potable water gate valves	2"	6		475.00	2,850
7			4"	2		585.00	1,170
8			8"	7		825.00	5,775
9			10"	6		1,000 00	6,000
10	335	Fire hydrants		9		2,600.00	23,400
11		Total Transmission and Distribution					$ 256,645
12	361	Sanitary sewer main	8"		6,400	$ 15.00	$ 96,000
13	363	Sanitary sewer lateral	4"	159		150.00	23,850
14	361	Manholes		34		2,000.00	68,000
15	371	Lift Station #2 (1977)		1		75,000.00	75,000
16		Total Collection System					$ 262,850

Note Unit costs obtained from Marshall Valuation Service by Marshall & Swift, 1997 Building Construction Cost Data 55th ed. by R.S. Means, manufacturer's quotes, contractor bids, and engineer's judgement

Original Cost Study-Replacement Cost for Distribution and Collection Systems
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Line No.	NARUC Acct. No.	**Oak Grove Phase 1B (1984)** Item/Description	Size	No	Length	Replacement Unit Cost	Total Cost
1	331	Potable water main (PVC pipe)	1"		200	$ 5.00	$ 1,000
2			6"		1,400	16.50	23,100
3			8"		150	22 00	3,300
4	333	Potable water service laterals	1"	24		150.00	3,600
5	331	Potable water gate valves	6"	2		715.00	1,430
6			8"	1		825.00	825
7	335	Fire hydrants		2		2,600.00	5,200
8		Total Transmission and Distribution					$ 38,455
9	361	Sanitary sewer main	8"		1,200	$ 15 00	$ 18,000
10	363	Sanitary sewer lateral	4"	24		150.00	3,600
11	361	Manholes		5		2,000.00	10,000
12		Total Collection System					$ 31,600

Note: Unit costs obtained from Marshall Valuation Service by Marshall & Swift, 1997 Building Construction Cost Data 55th ed. by R.S. Means, manufacturer's quotes, contractor bids, and engineer's judgement

Original Cost Study-Replacement Cost for Distribution and Collection Systems
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Line No.	NARUC Acct. No.	Oak Grove (1975) Item/Description	Size	No	Length	Replacement Unit Cost	Total Cost
1	331	Potable water main (PVC pipe)	1"		200	$ 5.00	$ 1,000
2			2"		1,300	5.50	7,150
3			4"		900	11.00	9,900
4			6"		1,800	16.50	29,700
5			8"		2,450	22.00	53,900
6			10"		2,500	27.50	68,750
7	333	Potable water service laterals	1"	146		150.00	21,900
8	331	Potable water gate valves	2"	3		475.00	1,425
9			4"	3		585.00	1,755
10			6"	1		715.00	715
11			8"	6		825.00	4,950
12			10"	5		1,000.00	5,000
13	335	Fire hydrants		8		2,600.00	20,800
14		Total Transmission and Distribution					$ 226,945
15	361	Sanitary sewer main	8"		7,600	$ 15.00	$ 114,000
16			8" F.M.		5,800	20.00	116,000
17	363	Sanitary sewer lateral	4"	146		150.00	21,900
18	361	Manholes		34		2,000.00	68,000
19	371	Lift Station #1 (1975)		1		65,000.00	65,000
20		Total Collection System					$ 384,900

Note: Unit costs obtained from Marshall Valuation Service by Marshall & Swift, 1997 Building Construction Cost Data 55th ed. by R.S. Means, manufacturer's quotes, contractor bids, and engineer's judgement

Original Cost Study-Replacement Cost for Distribution and Collection Systems
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Workpaper

Preparer: J. Coto

Line No.	NARUC Acct. No.	**Rolling Hills (1989)** Item/Description	Size	No.	Length	Replacement Unit Cost	Total Cost
1	331	Potable water main (PVC pipe)	2"		1,300	$ 5.50	$ 7,150
2			4"		1,600	11.00	17,600
3			6"		6,500	16.50	107,250
4			8"		600	22.00	13,200
5			10"		4,080	27.50	112,200
6	333	Potable water service laterals	1"	210		150.00	31,500
7	331	Potable water gate valves	2"	6		475.00	2,850
8			4"	3		585.00	1,755
9			6"	11		715.00	7,865
10			8"	1		825.00	825
11			10"	5		1,000.00	5,000
12	335	Fire hydrants		11		2,600.00	28,600
13		Total Transmission and Distribution					$ 335,795
14	361	Sanitary sewer main	8"		8,800	15.00	$ 132,000
15			8" F.M.		1,600	20.00	32,000
16	363	Sanitary sewer lateral	4"	210		150.00	31,500
17	361	Manholes		42		2,000 00	84,000
18	371	Lift Station #5 (1989)		1		60,000.00	60,000
19		Total Collection System					$ 339,500

Note: Unit costs obtained from Marshall Valuation Service by Marshall & Swift, 1997 Building Construction Cost Data 55th ed by R S. Means, manufacturer's quotes, contractor bids, and engineer's judgement.

Original Cost Study- Meters and Meter Installations

Florida Public Service Commission

Company: Zellwood Station Co-op, Inc.
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Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
1	1674	01/03/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
2	1675	01/03/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
3	652	01/05/96	$ 60.00	$ 40.00	$ 73.18	$ 173.18
4	653	01/05/96	$ 60.00	$ 40.00	$ 78.44	$ 178.44
5	606	01/09/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
6	599	01/11/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
7	600	01/11/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
8	1159	01/15/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
9	1329	01/15/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
10	1330	01/15/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
11	598	01/16/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
12	602	01/16/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
13	607	01/16/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
14	1148	01/16/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
15	1151	01/16/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
16	R-36	01/16/96	$ 60.00	$ 40.00	$ 98.19	$ 198.19
17	1158	01/17/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
18	1337	01/17/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
19	1433	01/17/96	$ 60.00	$ 40.00	$ 69.66	$ 169.66
20	1531	01/17/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
21	R-37	01/17/96	$ 60.00	$ 40.00	$ 98.19	$ 198.19
22	601	01/18/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
23	605	01/19/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
24	1695	01/20/96	$ 60.00	$ 50.00	$ 133.32	$ 243.32
25	1696	01/20/96	$ 60.00	$ 50.00	$ 133.32	$ 243.32
26	608	01/24/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
27	609	01/24/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
28	17	01/30/96	$ 60.00	$ 40.00	$ 78.44	$ 178.44
29	18	01/30/96	$ 60.00	$ 45.00	$ 78.44	$ 183.44
30	1161	01/31/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
31	1166	01/31/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
32	1304	01/31/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
33	1305	01/31/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
34	639	02/01/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
35	640	02/01/96	$ 60.00	$ 50.00	$ 61.58	$ 171.58
36	1157	02/01/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
37	1771	02/02/96	$ 60.00	$ 40.00	$ 78.44	$ 178.44
38	1772	02/02/96	$ 60.00	$ 40.00	$ 78.44	$ 178.44
39	596	02/13/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
40	597	02/15/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
41	595	02/19/96	$ 60.00	$ 40.00	$ 69.66	$ 169.66
42	614	02/20/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
43	MV-01	02/20/96	$ 60.00	$ 41.31	$ 78.44	$ 179.75
44	610	02/21/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
45	611	02/21/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
46	613	02/21/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
47	612	02/22/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
48	1777	02/22/96	$ 60.00	$ 40.00	$ 78.44	$ 178.44
49	1462	03/05/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
50	1739	04/12/96	$ 50.00	$ 50.00	$ 61.58	$ 161.58
51	1603	04/15/96	$ 60.00	$ 45.00	$ 61.58	$ 166.58
1	1601	04/18/96	$ 60.00	$ 45.00	$ 61.58	$ 166.58

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Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
2	1605	04/18/96	$ 60.00	$ 45.00	$ 61.58	$ 166.58
3	1606	04/23/96	$ 60.00	$ 45.00	$ 54.54	$ 159.54
4	1607	04/23/96	$ 60.00	$ 45.00	$ 54.54	$ 159.54
5	1672	04/24/96	$ 60.00	$ 45.00	$ 54.54	$ 159.54
6	42	05/01/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
7	1608	05/03/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
8	1610	05/03/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
9	1740	05/03/96	$ 50.00	$ 50.00	$ 61.58	$ 161.58
10	1609	05/07/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
11	1367	05/13/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
12	1368	05/13/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
13	1611	05/13/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
14	1612	05/13/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
15	65	05/15/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
16	66	05/15/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
17	1369	05/23/96	$ 60.00	$ 45.00	$ 92.37	$ 197.37
18	1580	06/02/96	$ 60.00	$ 45.00	$ 76.47	$ 181.47
19	1385	06/06/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
20	1386	06/06/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
21	1490	06/14/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
22	833	06/19/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
23	1303	07/10/96	$ 60.00	$ 45.00	$ 61.58	$ 166.58
24	1306	07/10/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
25	1307	07/10/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
26	1308	07/10/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
27	1309	07/10/96	$ 60.00	$ 59.41	$ 61.58	$ 180.99
28	1310	08/06/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
29	1311	08/06/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
30	1314	08/06/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
31	1315	08/06/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
32	1316	08/06/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
33	1317	08/06/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
34	1318	08/06/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
35	1321	08/06/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
36	1322	08/06/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
37	1338	08/06/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
38	1323	08/08/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
39	1339	08/08/96	$ 60.00	$ 40.00	$ 54.54	$ 154.54
40	1722	08/20/96	$ 60.00	$ 40.00	$ 77.96	$ 177.96
41	1723	08/20/96	$ 60.00	$ 40.00	$ 77.96	$ 177.96
42	CHPOO	08/21/96	$ 60.00	$ -	$ 16.38	$ 76.38
43	1340	09/03/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
44	643	09/04/96	$ 60.00	$ 53.00	$ 116.94	$ 229.94
45	1341	09/04/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
46	1342	09/04/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
47	1343	09/04/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
48	1344	09/04/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
49	1595	09/04/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
50	1596	09/04/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
51	1450	09/09/96	$ 60.00	$ 50.76	$ 61.58	$ 172.34
52	1345	09/10/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
1	1346	09/10/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
2	1347	09/12/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58

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Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
3	1348	09/12/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
4	1350	09/18/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
5	1352	09/18/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
6	1349	09/19/96	$ 60.00	$ 48.96	$ 61.58	$ 170.54
7	1351	09/19/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
8	1353	09/19/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
9	1370	09/23/96	$ 60.00	$ 45.00	$ 92.37	$ 197.37
10	1648	10/01/96	$ 60.00	$ 45.00	$ 92.37	$ 197.37
11	1371	10/02/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
12	1372	10/02/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
13	1649	10/03/96	$ 60.00	$ 45.00	$ 92.37	$ 197.37
14	696	10/11/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
15	697	10/11/96	$ 60.00	$ 90.00	$ 116.94	$ 266.94
16	1373	10/18/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
17	1375	10/18/96	$ 60.00	$ 40.00	$ 92.37	$ 192.37
18	1374	10/21/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
19	1376	10/21/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
20	1790	11/05/96	$ 40.00	$ 40.00	$ 61.58	$ 141.58
21	1773	11/08/96	$ 60.00	$ 55.00	$ 92.37	$ 207.37
22	647	11/18/96	$ 60.00	$ 45.00	$ 61.58	$ 166.58
23	1535	11/18/96	$ 60.00	$ 50.00	$ 92.37	$ 202.37
24	1593	11/19/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
25	1594	11/19/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
26	1597	11/19/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
27	1132	11/22/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
28	1588	11/22/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
29	1589	11/22/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
30	1590	11/22/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
31	1591	11/22/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
32	1592	11/22/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
33	146	12/01/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
34	147	12/01/96	$ 60.00	$ 52.48	$ 61.58	$ 174.06
35	1427	12/01/96	$ 60.00	$ 47.88	$ 77.96	$ 185.84
36	2	12/03/96	$ 60.00	$ 43.75	$ 61.58	$ 165.33
37	1428	12/05/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
38	130	12/23/96	$ 60.00	$ 40.00	$ 116.94	$ 216.94
39	682	12/26/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
40	683	12/26/96	$ 60.00	$ 40.00	$ 61.58	$ 161.58
41	1536	12/26/96	$ 60.00	$ 40.00	$ 77.96	$ 177.96
42	1537	12/26/96	$ 60.00	$ 80.01	$ 155.92	$ 295.93
43						$ 24,387.46
44	R-02	01/14/97	$ 60.00	$ 51.57	$ 133.32	$ 244.89
45	R-03	01/14/97	$ 60.00	$ 40.00	$ 88.88	$ 188.88
46	638	01/15/97	$ 40.00	$ 45.00	$ 97.20	$ 182.20
47	1558	01/16/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
48	1559	01/16/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
49	238	01/21/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
50	1576	01/21/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
1	1581	01/27/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
2	728	01/28/97	$ 60.00	$ 40.00	$ 104.49	$ 204.49
3	729	01/28/97	$ 60.00	$ 40.00	$ 104.49	$ 204.49

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Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
4	1582	01/28/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
5	1586	01/28/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
6	1587	01/28/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
7	1580VAC	01/28/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
8	737	01/29/97	$ 60.00	$ 105.00	$ 69.66	$ 234.66
9	738	01/29/97	$ 60.00	$ 40.00	$ 104.49	$ 204.49
10	1651	02/05/97	$ 60.00	$ 64.67	$ 177.76	$ 302.43
11	GRR05	02/09/97	$ 102.50	$ -	$ 50.98	$ 153.48
12	1136	02/10/97	$ 60.00	$ 40.00	$ 69.96	$ 169.96
13	1137	02/10/97	$ 60.00	$ 40.00	$ 69.96	$ 169.96
14	1138	02/10/97	$ 60.00	$ 40.00	$ 69.96	$ 169.96
15	WHBLD	02/10/97	$ 60.00	$ 41.17	$ 88.88	$ 190.05
16	1435	02/13/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
17	1436	02/18/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
18	1575	02/18/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
19	121	02/19/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
20	201	02/19/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
21	202	02/19/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
22	1572	02/25/97	$ 60.00	$ 42.95	$ 104.49	$ 207.44
23	1573	02/25/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
24	1627	02/25/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
25	1654	02/25/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
26	1655	02/25/97	$ 60.00	$ 55.00	$ 133.32	$ 248.32
27	654	03/17/97	$ 60.00	$ 43.69	$ 88.88	$ 192.57
28	655	03/17/97	$ 60.00	$ 40.00	$ 88.88	$ 188.88
29	1139	03/18/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
30	1140	03/18/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
31	749	03/19/97	$ 95.00	$ -	$ 97.20	$ 192.20
32	1362	03/24/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
33	1551	03/24/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
34	1552	03/24/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
35	1553	03/24/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
36	1555	03/24/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
37	1556	03/24/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
38	1557	03/24/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
39	1363	03/25/97	$ 60.00	$ 41.23	$ 133.32	$ 234.55
40	1628	03/25/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
41	R-11	03/27/97	$ 40.00	$ 75.00	$ 177.76	$ 292.76
42	R-12	03/27/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
43	763	03/30/97	$ 92.55	$ -	$ 93.36	$ 185.91
44	765	03/30/97	$ 92.55	$ -	$ 93.36	$ 185.91
45	1560	03/31/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
46	1561	03/31/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
47	1562	04/02/97	$ 40.00	$ 40.00	$ 42.64	$ 122.64
48	1563	04/02/97	$ 40.00	$ 40.00	$ 42.64	$ 122.64
49	1566	04/07/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
50	1734	04/07/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
51	1735	04/07/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
52	1514	04/21/97	$ 40.00	$ 45.00	$ 69.66	$ 154.66
1	1564	04/21/97	$ 40.00	$ 42.00	$ 69.66	$ 151.66
2	1565	04/21/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
3	1567	04/21/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
4	1568	04/21/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66

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Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
5	1569	04/21/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
6	1668	04/21/97	$ 40.00	$ 45.00	$ 69.66	$ 154.66
7	1669	04/21/97	$ 40.00	$ 45.00	$ 69.66	$ 154.66
8	1712	05/02/97	$ 40.00	$ 45.00	$ 133.32	$ 218.32
9	1482	05/07/97	$ 60.00	$ 67.50	$ 104.49	$ 231.99
10	1578	05/08/97	$ 60.00	$ 40.00	$ 104.49	$ 204.49
11	1481	05/09/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
12	1570	05/09/97	$ 60.00	$ 68.36	$ 104.49	$ 232.85
13	1571	05/09/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
14	1574	05/09/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
15	1577	05/09/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
16	838	05/23/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
17	1355	05/23/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
18	1357	05/23/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
19	1358	05/23/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
20	1356	05/24/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
21	1359	06/02/97	$ 60.00	$ 40.00	$ 69.66	$ 169.66
22	1360	06/02/97	$ 60.00	$ 69.36	$ 69.66	$ 199.02
23	1434	06/16/97	$ 60.00	$ 40.00	$ 104.49	$ 204.49
24	1532	06/16/97	$ 60.00	$ 40.00	$ 104.49	$ 204.49
25	1646	06/16/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
26	1647	06/16/97	$ 40.00	$ 37.75	$ 69.66	$ 147.41
27	1554	06/24/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
28	R-24	07/03/97	$ 40.00	$ 45.00	$ 98.19	$ 183.19
29	R-28	07/03/97	$ 40.00	$ 55.00	$ 98.19	$ 193.19
30	R-40	07/08/97	$ 40.00	$ 45.00	$ 65.46	$ 150.46
31	R-41	07/08/97	$ 40.00	$ 45.00	$ 65.46	$ 150.46
32	R-42	07/10/97	$ 40.00	$ 45.00	$ 98.19	$ 183.19
33	R-26	07/11/97	$ 65.00	$ 45.00	$ 98.19	$ 208.19
34	R-38	07/14/97	$ 40.00	$ 45.00	$ 65.46	$ 150.46
35	R-39	07/14/97	$ 40.00	$ 45.00	$ 65.46	$ 150.46
36	CHIRR	07/30/97	$ 331.19	$ -	$ 177.76	$ 508.95
37	491	08/05/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
38	492	08/05/97	$ 40.00	$ 40.00	$ 133.32	$ 213.32
39	493	08/06/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
40	494	08/06/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
41	497	08/10/97	$ 40.00	$ 40.00	$ 88.88	$ 168.88
42	498	08/10/97	$ 40.00	$ 40.00	$ 133.32	$ 213.32
43	500	08/11/97	$ 40.00	$ 40.00	$ 104.49	$ 184.49
44	501	08/11/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
45	29	08/12/97	$ 40.00	$ 44.95	$ 133.32	$ 218.27
46	30	08/12/97	$ 40.00	$ 40.00	$ 88.88	$ 168.88
47	495	08/12/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
48	496	08/12/97	$ 40.00	$ 40.00	$ 104.49	$ 184.49
49	615	08/19/97	$ 40.00	$ 47.87	$ 69.66	$ 157.53
50	616	08/19/97	$ 40.00	$ 45.00	$ 104.49	$ 189.49
51	617	08/19/97	$ 40.00	$ 47.71	$ 104.49	$ 192.20
52	126	08/25/97	$ 40.00	$ 55.00	$ 177.76	$ 272.76
1	618	08/25/97	$ 40.00	$ 45.00	$ 104.49	$ 189.49
2	619	08/25/97	$ 40.00	$ 45.00	$ 69.66	$ 154.66
3	1539	08/25/97	$ 40.00	$ 40.00	$ 104.49	$ 184.49
4	1540	08/25/97	$ 40.00	$ 40.00	$ 104.49	$ 184.49
5	1766	08/25/97	$ 40.00	$ 50.00	$ 133.32	$ 223.32

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Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
6	620	08/28/97	$ 40.00	$ 45.00	$ 69.66	$ 154.66
7	1765	08/28/97	$ 40.00	$ 45.00	$ 133.32	$ 218.32
8	1616	09/02/97	$ 40.00	$ 40.00	$ 88.88	$ 168.88
9	1615	09/03/97	$ 40.00	$ 45.00	$ 133.32	$ 218.32
10	1697	09/03/97	$ 40.00	$ 45.00	$ 133.32	$ 218.32
11	878	09/15/97	$ 40.00	$ 40.00	$ 69.66	$ 149.66
12	1686	09/15/97	$ 40.00	$ 50.00	$ 133.32	$ 223.32
13	499	10/16/97	$ 40.00	$ 45.00	$ 133.32	$ 218.32
14	621	10/16/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
15	622	10/16/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
16	623	10/16/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
17	1725	10/16/97	$ 40.00	$ 45.00	$ 133.32	$ 218.32
18	502	10/20/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
19	503	10/20/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
20	504	10/20/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
21	505	10/20/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
22	506	10/20/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
23	507	10/20/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
24	508	10/20/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
25	624	10/20/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
26	509	10/24/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
27	510	10/24/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
28	625	10/24/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
29	626	10/24/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
30	627	10/24/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
31	628	10/27/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
32	513	11/04/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
33	514	11/04/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
34	629	11/05/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
35	630	11/05/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
36	511	11/06/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
37	512	11/06/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
38	515	11/07/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
39	516	11/07/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
40	116	11/24/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
41	117	11/24/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
42	901	11/24/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
43	1393	11/24/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
44	1788	11/24/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
45	1789	11/24/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
46	1809	11/24/97	$ 40.00	$ 45.00	$ 88.88	$ 173.88
47	1854	11/24/97	$ 40.00	$ 40.00	$ 88.88	$ 168.88
48	1869	12/26/97	$ 40.00	$ 45.00	$ 69.66	$ 154.66
49						$ 28,478.21
50	641	01/07/98	$ 40.00	$ 51.39	$ 73.18	$ 164.57
51	635	01/12/98	$ 40.00	$ 45.00	$ 48.60	$ 133.60
1	636	01/12/98	$ 40.00	$ 45.00	$ 48.60	$ 133.60
2	642	01/12/98	$ 40.00	$ 63.12	$ 73.18	$ 176.30
3	645	01/12/98	$ 40.00	$ 45.00	$ 109.77	$ 194.77
4	648	01/15/98	$ 40.00	$ 45.00	$ 97.20	$ 182.20
5	659	01/15/98	$ 40.00	$ 45.00	$ 97.20	$ 182.20
6	646	01/19/98	$ 40.00	$ 45.00	$ 97.20	$ 182.20

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Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
7	650	01/19/98	$ 40.00	$ 45.00	$ 109.77	$ 194.77
8	651	01/19/98	$ 40.00	$ 45.00	$ 109.77	$ 194.77
9	656	01/19/98	$ 40.00	$ 45.00	$ 97.20	$ 182.20
10	657	01/19/98	$ 40.00	$ 45.00	$ 97.20	$ 182.20
11	714	01/19/98	$ 40.00	$ 45.00	$ 97.20	$ 182.20
12	715	01/19/98	$ 40.00	$ 45.00	$ 97.20	$ 182.20
13	1726	01/20/98	$ 40.00	$ 60.00	$ 97.20	$ 197.20
14	1727	01/20/98	$ 40.00	$ 60.00	$ 97.20	$ 197.20
15	631	01/21/98	$ 40.00	$ 45.00	$ 109.77	$ 194.77
16	632	01/21/98	$ 40.00	$ 45.00	$ 109.77	$ 194.77
17	517	01/23/98	$ 40.00	$ 45.00	$ 109.77	$ 194.77
18	660	01/23/98	$ 40.00	$ 45.00	$ 109.77	$ 194.77
19	712	01/30/98	$ 40.00	$ 45.00	$ 97.20	$ 182.20
20	713	01/30/98	$ 40.00	$ 45.00	$ 97.20	$ 182.20
21	R-43	01/30/98	$ 40.00	$ 45.00	$ 97.20	$ 182.20
22	695	02/02/98	$ 40.00	$ 45.00	$ 77.38	$ 162.38
23	709	02/02/98	$ 40.00	$ 45.00	$ 97.20	$ 182.20
24	710	02/02/98	$ 40.00	$ 45.00	$ 97.20	$ 182.20
25	1748	02/02/98	$ 40.00	$ 45.00	$ 145.80	$ 230.80
26	694	02/09/98	$ 40.00	$ 45.00	$ 77.38	$ 162.38
27	704	02/09/98	$ 40.00	$ 45.00	$ 77.38	$ 162.38
28	705	02/09/98	$ 40.00	$ 45.00	$ 73.18	$ 158.18
29	711	02/09/98	$ 40.00	$ 45.00	$ 73.18	$ 158.18
30	1441	02/09/98	$ 40.00	$ 56.72	$ 146.36	$ 243.08
31	7	02/19/98	$ 50.42	$ 44.90	$ 101.40	$ 196.72
32	8	02/19/98	$ 50.42	$ 44.90	$ 101.40	$ 196.72
33	684	02/20/98	$ 95.32	$ -	$ 101.40	$ 196.72
34	685	02/20/98	$ 50.42	$ 44.90	$ 101.40	$ 196.72
35	686	02/20/98	$ 50.42	$ 44.90	$ 101.40	$ 196.72
36	687	02/20/98	$ 50.42	$ 44.90	$ 101.40	$ 196.72
37	690	02/20/98	$ 95.32	$ -	$ 101.40	$ 196.72
38	691	02/20/98	$ 95.32	$ -	$ 101.40	$ 196.72
39	692	02/20/98	$ 40.00	$ 45.00	$ 101.40	$ 186.40
40	693	02/20/98	$ 40.00	$ 45.00	$ 101.40	$ 186.40
41	197	02/25/98	$ 92.55	$ -	$ 97.56	$ 190.11
42	198	02/25/98	$ 92.55	$ -	$ 97.56	$ 190.11
43	200	02/25/98	$ 92.55	$ -	$ 97.56	$ 190.11
44	234	02/25/98	$ 92.55	$ -	$ 97.56	$ 190.11
45	235	02/25/98	$ 92.55	$ -	$ 97.20	$ 189.75
46	236	02/25/98	$ 92.55	$ -	$ 97.20	$ 189.75
47	237	02/25/98	$ 92.55	$ -	$ 97.56	$ 190.11
48	522	02/25/98	$ 92.55	$ -	$ 97.20	$ 189.75
49	523	02/25/98	$ 92.55	$ -	$ 97.20	$ 189.75
50	525	02/25/98	$ 92.55	$ -	$ 97.56	$ 190.11
51	526	02/25/98	$ 92.55	$ -	$ 97.56	$ 190.11
52	527	02/25/98	$ 92.55	$ -	$ 97.56	$ 190.11
1	1795	02/28/98	$ 92.55	$ -	$ 79.26	$ 171.81
2	203	03/02/98	$ 92.55	$ -	$ 97.56	$ 190.11
3	204	03/02/98	$ 92.55	$ -	$ 97.56	$ 190.11
4	205	03/02/98	$ 92.55	$ -	$ 97.56	$ 190.11
5	232	03/02/98	$ 92.55	$ -	$ 97.56	$ 190.11
6	716	03/08/98	$ 92.55	$ -	$ 93.36	$ 185.91
7	717	03/08/98	$ 92.55	$ -	$ 101.40	$ 193.95

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Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
8	718	03/08/98	$ 92.55	$ -	$ 101.40	$ 193.95
9	719	03/08/98	$ 92.55	$ -	$ 101.40	$ 193.95
10	720	03/08/98	$ 92.55	$ -	$ 93.36	$ 185.91
11	721	03/09/98	$ 97.41	$ -	$ 102.00	$ 199.41
12	722	03/09/98	$ 92.55	$ -	$ 97.56	$ 190.11
13	723	03/09/98	$ 92.55	$ -	$ 97.56	$ 190.11
14	724	03/09/98	$ 92.55	$ -	$ 97.20	$ 189.75
15	725	03/09/98	$ 92.55	$ -	$ 97.20	$ 189.75
16	741	03/11/98	$ 92.55	$ -	$ 97.20	$ 189.75
17	732	03/12/98	$ 92.55	$ -	$ 97.56	$ 190.11
18	733	03/12/98	$ 92.55	$ -	$ 97.56	$ 190.11
19	742	03/12/98	$ 92.55	$ -	$ 97.56	$ 190.11
20	743	03/16/98	$ 92.55	$ -	$ 97.20	$ 189.75
21	744	03/16/98	$ 92.55	$ -	$ 97.20	$ 189.75
22	736	03/17/98	$ 92.55	$ -	$ 97.20	$ 189.75
23	747	03/17/98	$ 95.00	$ -	$ 97.56	$ 192.56
24	745	03/18/98	$ 95.00	$ -	$ 97.56	$ 192.56
25	746	03/18/98	$ 95.00	$ -	$ 97.56	$ 192.56
26	748	03/18/98	$ 95.00	$ -	$ 97.56	$ 192.56
27	750	03/19/98	$ 95.00	$ -	$ 97.20	$ 192.20
28	1737	03/22/98	$ 105.00	$ -	$ 79.26	$ 184.26
29	1738	03/22/98	$ 105.00	$ -	$ 79.26	$ 184.26
30	752	03/24/98	$ 92.55	$ -	$ 101.40	$ 193.95
31	753	03/24/98	$ 92.55	$ -	$ 101.40	$ 193.95
32	754	03/24/98	$ 92.55	$ -	$ 101.40	$ 193.95
33	760	03/24/98	$ 92.55	$ -	$ 97.20	$ 189.75
34	761	03/24/98	$ 92.55	$ -	$ 97.20	$ 189.75
35	755	03/25/98	$ 92.55	$ -	$ 101.40	$ 193.95
36	756	03/25/98	$ 92.55	$ -	$ 101.40	$ 193.95
37	757	03/25/98	$ 92.55	$ -	$ 101.40	$ 193.95
38	758	03/25/98	$ 95.75	$ -	$ 102.00	$ 197.75
39	759	03/25/98	$ 95.75	$ -	$ 102.00	$ 197.75
40	762	03/26/98	$ 92.55	$ -	$ 101.40	$ 193.95
41	1618	03/26/98	$ 110.50	$ -	$ 152.10	$ 262.60
42	764	03/27/98	$ 92.55	$ -	$ 93.36	$ 185.91
43	768	03/30/98	$ 97.55	$ -	$ 109.77	$ 207.32
44	769	03/30/98	$ 97.55	$ -	$ 109.77	$ 207.32
45	772	03/31/98	$ 97.55	$ -	$ 145.80	$ 243.35
46	1550	04/02/98	$ 92.55	$ -	$ 97.56	$ 190.11
47	1617	04/02/98	$ 92.55	$ -	$ 101.40	$ 193.95
48	R-05	04/02/98	$ 127.33	$ -	$ 146.34	$ 273.67
49	77	04/04/98	$ 92.55	$ -	$ 93.36	$ 185.91
50	78	04/04/98	$ 92.55	$ -	$ 93.36	$ 185.91
51	1620	04/06/98	$ 92.55	$ -	$ 101.40	$ 193.95
52	1614	04/07/98	$ 92.55	$ -	$ 97.56	$ 190.11
1	1623	04/07/98	$ 113.22	$ -	$ 153.00	$ 266.22
2	1680	04/07/98	$ 92.55	$ -	$ 102.00	$ 194.55
3	1621	04/08/98	$ 92.55	$ -	$ 97.20	$ 189.75
4	1622	04/08/98	$ 92.55	$ -	$ 97.20	$ 189.75
5	1624	04/08/98	$ 113.22	$ -	$ 153.00	$ 266.22
6	1629	04/14/98	$ 92.55	$ -	$ 97.20	$ 189.75
7	1630	04/14/98	$ 92.55	$ -	$ 97.20	$ 189.75
8	16	04/16/98	$ 115.61	$ -	$ 153.00	$ 268.61

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9	1625	04/20/98	$ 92.55	$ -	$ 97.56	$ 190.11
10	1626	04/20/98	$ 122.55	$ -	$ 146.34	$ 268.89
11	1666	04/20/98	$ 92.55	$ -	$ 97.56	$ 190.11
12	1667	04/20/98	$ 122.55	$ -	$ 146.34	$ 268.89
13	102	04/21/98	$ 121.00	$ -	$ 153.00	$ 274.00
14	101	04/23/98	$ 121.00	$ -	$ 153.00	$ 274.00
15	1814	04/27/98	$ 92.55	$ -	$ 93.36	$ 185.91
16	1815	04/27/98	$ 92.55	$ -	$ 140.04	$ 232.59
17	1816	04/27/98	$ 92.55	$ -	$ 140.04	$ 232.59
18	1817	04/29/98	$ 92.55	$ -	$ 97.20	$ 189.75
19	1818	04/29/98	$ 92.55	$ -	$ 97.20	$ 189.75
20	1821	05/01/98	$ 92.55	$ -	$ 97.56	$ 190.11
21	1822	05/01/98	$ 92.55	$ -	$ 97.56	$ 190.11
22	1829	05/05/98	$ 92.55	$ -	$ 93.36	$ 185.91
23	1830	05/05/98	$ 92.55	$ -	$ 93.36	$ 185.91
24	1820	05/06/98	$ 92.55	$ -	$ 101.40	$ 193.95
25	1825	05/06/98	$ 92.55	$ -	$ 101.40	$ 193.95
26	CRVCA	05/06/98	$ 998.34	$ -	$ 244.36	$ 1,242.70
27	1826	05/07/98	$ 92.55	$ -	$ 97.56	$ 190.11
28	1819	05/13/98	$ 92.55	$ -	$ 153.00	$ 245.55
29	1831	05/13/98	$ 92.55	$ -	$ 102.00	$ 194.55
30	1832	05/13/98	$ 92.55	$ -	$ 102.00	$ 194.55
31	1827	05/15/98	$ 105.00	$ -	$ 244.36	$ 349.36
32	1528	05/18/98	$ 92.55	$ -	$ 97.56	$ 190.11
33	1677	05/18/98	$ 92.55	$ -	$ 97.20	$ 189.75
34	1678	05/18/98	$ 92.55	$ -	$ 97.20	$ 189.75
35	28	05/19/98	$ 92.55	$ -	$ 97.56	$ 190.11
36	1676	05/19/98	$ 92.55	$ -	$ 93.36	$ 185.91
37	TPOFF	05/19/98	$ 92.55	$ -	$ 93.36	$ 185.91
38	27	05/20/98	$ 92.55	$ -	$ 97.56	$ 190.11
39	1631	05/20/98	$ 92.55	$ -	$ 93.36	$ 185.91
40	1632	05/20/98	$ 92.55	$ -	$ 93.36	$ 185.91
41	1681	05/20/98	$ 92.55	$ -	$ 97.20	$ 189.75
42	1682	05/20/98	$ 92.55	$ -	$ 97.20	$ 189.75
43	1468	05/22/98	$ 92.55	$ -	$ 101.40	$ 193.95
44	1469	05/22/98	$ 92.55	$ -	$ 101.40	$ 193.95
45	1516	05/24/98	$ 92.55	$ -	$ 102.00	$ 194.55
46	1807	05/27/98	$ 92.55	$ -	$ 97.56	$ 190.11
47	1808	05/27/98	$ 92.55	$ -	$ 97.56	$ 190.11
48	1637	05/29/98	$ 92.55	$ -	$ 102.00	$ 194.55
49	1638	05/29/98	$ 92.55	$ -	$ 102.00	$ 194.55
50	113	06/02/98	$ 122.28	$ -	$ 186.72	$ 309.00
51	1805	06/02/98	$ 92.55	$ -	$ 97.56	$ 190.11
52	1806	06/03/98	$ 92.55	$ -	$ 140.04	$ 232.59
1	1487	06/05/98	$ 92.55	$ -	$ 102.00	$ 194.55
2	1633	06/05/98	$ 92.55	$ -	$ 102.00	$ 194.55
3	1634	06/05/98	$ 92.55	$ -	$ 102.00	$ 194.55
4	1515	06/08/98	$ 97.55	$ -	$ 166.20	$ 263.75
5	14	06/15/98	$ 110.48	$ -	$ 97.56	$ 208.04
6	35	06/15/98	$ 92.55	$ -	$ 93.36	$ 185.91
7	36	06/15/98	$ 92.55	$ -	$ 93.36	$ 185.91
8	1846	06/15/98	$ 92.55	$ -	$ 73.18	$ 165.73
9	MV-05	06/15/98	$ 110.48	$ -	$ 97.56	$ 208.04

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10	15	06/16/98	$ 115.61	$ -	$ 153.00	$ 268.61
11	1803	06/29/98	$ 92.55	$ -	$ 93.36	$ 185.91
12	1804	06/29/98	$ 92.55	$ -	$ 93.36	$ 185.91
13	1642	07/08/98	$ 92.55	$ -	$ 93.36	$ 185.91
14	GWF15	07/08/98	$ 92.55	$ -	$ 93.36	$ 185.91
15	1639	07/09/98	$ 92.55	$ -	$ 93.36	$ 185.91
16	1640	07/09/98	$ 92.55	$ -	$ 93.36	$ 185.91
17	1635	07/12/98	$ 92.55	$ -	$ 97.56	$ 190.11
18	1636	07/13/98	$ 92.55	$ -	$ 97.20	$ 189.75
19	1801	07/14/98	$ 92.55	$ -	$ 97.20	$ 189.75
20	1802	07/14/98	$ 92.55	$ -	$ 97.20	$ 189.75
21	853	07/15/98	$ 92.55	$ -	$ 97.20	$ 189.75
22	1641	07/15/98	$ 92.55	$ -	$ 97.20	$ 189.75
23	1800	07/22/98	$ 92.55	$ -	$ 93.36	$ 185.91
24	1828	07/22/98	$ 92.55	$ -	$ 93.36	$ 185.91
25	1799	07/23/98	$ 92.55	$ -	$ 97.56	$ 190.11
26	1792	07/27/98	$ 92.55	$ -	$ 97.20	$ 189.75
27	1793	07/27/98	$ 92.55	$ -	$ 92.55	$ 185.10
28	1797	07/27/98	$ 92.55	$ -	$ 145.80	$ 238.35
29	1791	07/28/98	$ 92.55	$ -	$ 145.80	$ 238.35
30	1798	07/28/98	$ 92.55	$ -	$ 145.80	$ 238.35
31	1782	07/30/98	$ 92.55	$ -	$ 79.26	$ 171.81
32	1796	07/30/98	$ 92.55	$ -	$ 79.26	$ 171.81
33	1783	08/03/98	$ 92.55	$ -	$ 97.56	$ 190.11
34	1784	08/03/98	$ 98.88	$ -	$ 97.56	$ 196.44
35	1785	08/04/98	$ 98.88	$ -	$ 97.56	$ 196.44
36	1786	08/05/98	$ 92.55	$ -	$ 97.56	$ 190.11
37	1787	08/05/98	$ 92.55	$ -	$ 97.56	$ 190.11
38	1395	08/11/98	$ 121.43	$ -	$ 153.00	$ 274.43
39	1396	08/11/98	$ 92.55	$ -	$ 102.00	$ 194.55
40	1780	08/12/98	$ 121.43	$ -	$ 204.00	$ 325.43
41	1781	08/12/98	$ 121.43	$ -	$ 204.00	$ 325.43
42	1518	08/17/98	$ 92.55	$ -	$ 110.43	$ 202.98
43	1519	08/17/98	$ 92.55	$ -	$ 110.43	$ 202.98
44	1520	08/17/98	$ 92.55	$ -	$ 110.43	$ 202.98
45	1521	08/17/98	$ 92.55	$ -	$ 73.62	$ 166.17
46	1522	08/17/98	$ 92.55	$ -	$ 93.36	$ 185.91
47	1778	08/17/98	$ 92.55	$ -	$ 73.62	$ 166.17
48	1523	08/18/98	$ 92.55	$ -	$ 102.00	$ 194.55
49	1524	08/18/98	$ 92.55	$ -	$ 102.00	$ 194.55
50	1525	08/18/98	$ 92.55	$ -	$ 102.00	$ 194.55
51	1526	08/19/98	$ 92.55	$ -	$ 110.43	$ 202.98
52	1527	08/19/98	$ 92.55	$ -	$ 110.43	$ 202.98
1	1529	08/19/98	$ 92.55	$ -	$ 110.43	$ 202.98
2	1643	08/19/98	$ 92.55	$ -	$ 73.62	$ 166.17
3	1644	08/19/98	$ 92.55	$ -	$ 110.43	$ 202.98
4	1779	08/19/98	$ 92.55	$ -	$ 110.43	$ 202.98
5	1530	09/02/98	$ 92.55	$ -	$ 146.34	$ 238.89
6	1652	09/02/98	$ 92.55	$ -	$ 97.56	$ 190.11
7	1653	09/02/98	$ 92.55	$ -	$ 97.56	$ 190.11
8	1650	09/03/98	$ 92.55	$ -	$ 140.04	$ 232.59
9	R-08	09/03/98	$ 92.55	$ -	$ 140.04	$ 232.59
10	1645	09/08/98	$ 92.55	$ -	$ 77.46	$ 170.01

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Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
11	1656	09/08/98	$ 92.55	$ -	$ 140.04	$ 232.59
12	R-06	09/08/98	$ 92.55	$ -	$ 116.19	$ 208.74
13	R-07	09/08/98	$ 92.55	$ -	$ 116.19	$ 208.74
14	95	09/24/98	$ 92.55	$ -	$ 116.19	$ 208.74
15	96	09/24/98	$ 92.55	$ -	$ 77.46	$ 170.01
16	1413	09/24/98	$ 92.55	$ -	$ 116.19	$ 208.74
17	1414	09/24/98	$ 92.55	$ -	$ 116.19	$ 208.74
18	1517	09/24/98	$ 92.55	$ -	$ 102.00	$ 194.55
19	1705	09/24/98	$ 112.98	$ -	$ 102.00	$ 214.98
20	1706	09/24/98	$ 116.50	$ -	$ 102.00	$ 218.50
21	BVCA0	09/24/98	$ 261.32	$ -	$ 183.27	$ 444.59
22	1421	10/12/98	$ 92.55	$ -	$ 97.56	$ 190.11
23	1422	10/12/98	$ 92.55	$ -	$ 97.56	$ 190.11
24	1429	10/12/98	$ 92.55	$ -	$ 78.44	$ 170.99
25	1430	10/12/98	$ 92.55	$ -	$ 78.44	$ 170.99
26	1533	10/15/98	$ 92.55	$ -	$ 78.44	$ 170.99
27	1534	10/15/98	$ 92.55	$ -	$ 78.44	$ 170.99
28	1541	10/15/98	$ 92.55	$ -	$ 78.44	$ 170.99
29	1548	10/15/98	$ 92.55	$ -	$ 102.98	$ 195.53
30	1549	10/15/98	$ 92.55	$ -	$ 78.44	$ 170.99
31	1538	10/16/98	$ 92.55	$ -	$ 94.34	$ 186.89
32	R-01	10/16/98	$ 92.55	$ -	$ 94.34	$ 186.89
33	R-15	10/17/98	$ 92.55	$ -	$ 78.44	$ 170.99
34	R-09	10/19/98	$ 92.55	$ -	$ 78.44	$ 170.99
35	R-13	10/19/98	$ 92.55	$ -	$ 78.44	$ 170.99
36	R-14	10/19/98	$ 92.55	$ -	$ 78.44	$ 170.99
37	R-17	10/19/98	$ 92.55	$ -	$ 78.44	$ 170.99
38	R-18	10/19/98	$ 92.55	$ -	$ 78.44	$ 170.99
39	1417	10/22/98	$ 115.25	$ -	$ 78.44	$ 193.69
40	1418	10/22/98	$ 115.25	$ -	$ 78.44	$ 193.69
41	1707	10/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
42	1708	10/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
43	1736	10/22/98	$ 92.55	$ -	$ 78.44	$ 170.99
44	1767	10/22/98	$ 102.50	$ -	$ 111.90	$ 214.40
45	1775	10/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
46	1776	10/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
47	R-10	10/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
48	1507	10/25/98	$ 102.50	$ -	$ 78.44	$ 180.94
49	1508	10/25/98	$ 102.50	$ -	$ 78.44	$ 180.94
50	1509	10/25/98	$ 102.50	$ -	$ 78.44	$ 180.94
51	1510	10/25/98	$ 102.50	$ -	$ 78.44	$ 180.94
52	1511	10/25/98	$ 102.50	$ -	$ 78.44	$ 180.94
1	1512	10/25/98	$ 102.50	$ -	$ 78.44	$ 180.94
2	1774	10/25/98	$ 102.50	$ -	$ 78.44	$ 180.94
3	1419	10/26/98	$ 102.50	$ -	$ 78.44	$ 180.94
4	1760	10/26/98	$ 102.50	$ -	$ 117.68	$ 220.18
5	1761	10/26/98	$ 102.50	$ -	$ 78.44	$ 180.94
6	1762	10/26/98	$ 102.50	$ -	$ 78.44	$ 180.94
7	1763	10/26/98	$ 102.50	$ -	$ 78.44	$ 180.94
8	1764	10/26/98	$ 102.50	$ -	$ 78.44	$ 180.94
9	1769	10/26/98	$ 102.50	$ -	$ 78.44	$ 180.94
10	1755	10/28/98	$ 102.50	$ -	$ 78.44	$ 180.94
11	1758	10/28/98	$ 102.50	$ -	$ 117.68	$ 220.18

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Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
12	1759	10/28/98	$ 102.50	$ -	$ 117.68	$ 220.18
13	1757	10/29/98	$ 102.50	$ -	$ 117.68	$ 220.18
14	1420	10/30/98	$ 102.50	$ -	$ 117.68	$ 220.18
15	1754	10/30/98	$ 102.50	$ -	$ 78.44	$ 180.94
16	1768	10/30/98	$ 102.50	$ -	$ 78.44	$ 180.94
17	1753	10/31/98	$ 102.50	$ -	$ 79.26	$ 181.76
18	1750	11/03/98	$ 102.50	$ -	$ 94.34	$ 196.84
19	1388	11/09/98	$ 102.50	$ -	$ 78.44	$ 180.94
20	1410	11/10/98	$ 102.50	$ -	$ 94.34	$ 196.84
21	1732	11/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
22	1731	11/11/98	$ 102.50	$ -	$ 98.06	$ 200.56
23	1404	11/12/98	$ 102.50	$ -	$ 78.44	$ 180.94
24	1405	11/12/98	$ 102.50	$ -	$ 78.44	$ 180.94
25	1406	11/12/98	$ 102.50	$ -	$ 78.44	$ 180.94
26	1407	11/12/98	$ 102.50	$ -	$ 78.44	$ 180.94
27	1399	11/13/98	$ 102.50	$ -	$ 78.44	$ 180.94
28	1400	11/13/98	$ 102.50	$ -	$ 78.44	$ 180.94
29	1401	11/13/98	$ 102.50	$ -	$ 78.44	$ 180.94
30	1402	11/13/98	$ 102.50	$ -	$ 78.44	$ 180.94
31	1403	11/13/98	$ 102.50	$ -	$ 78.44	$ 180.94
32	1716	11/13/98	$ 102.50	$ -	$ 94.34	$ 196.84
33	1729	11/14/98	$ 102.50	$ -	$ 78.44	$ 180.94
34	1383	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
35	1384	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
36	1387	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
37	1394	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
38	1409	11/15/98	$ 102.50	$ -	$ 94.34	$ 196.84
39	1411	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
40	1412	11/15/98	$ 102.50	$ -	$ 94.34	$ 196.84
41	1415	11/15/98	$ 102.50	$ -	$ 118.92	$ 221.42
42	1416	11/15/98	$ 102.50	$ -	$ 79.28	$ 181.78
43	1717	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
44	1718	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
45	1719	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
46	1720	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
47	1724	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
48	1728	11/15/98	$ 102.50	$ -	$ 94.34	$ 196.84
49	1730	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
50	1733	11/15/98	$ 102.50	$ -	$ 98.06	$ 200.56
51	1741	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
52	1742	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
1	1743	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
2	1744	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
3	1745	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
4	1746	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
5	1747	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
6	1749	11/15/98	$ 102.50	$ -	$ 78.44	$ 180.94
7	1751	11/15/98	$ 102.50	$ -	$ 94.34	$ 196.84
8	1752	11/15/98	$ 102.50	$ -	$ 94.34	$ 196.84
9	1694	11/16/98	$ 102.50	$ -	$ 78.44	$ 180.94
10	1698	11/16/98	$ 102.50	$ -	$ 78.44	$ 180.94
11	1699	11/16/98	$ 102.50	$ -	$ 78.44	$ 180.94
12	1700	11/16/98	$ 102.50	$ -	$ 78.44	$ 180.94

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Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
13	1701	11/16/98	$ 102.50	$ -	$ 78.44	$ 180.94
14	1703	11/16/98	$ 102.50	$ -	$ 78.44	$ 180.94
15	1704	11/16/98	$ 102.50	$ -	$ 78.44	$ 180.94
16	1710	11/16/98	$ 102.50	$ -	$ 78.44	$ 180.94
17	1711	11/16/98	$ 102.50	$ -	$ 78.44	$ 180.94
18	1381	11/17/98	$ 102.50	$ -	$ 78.44	$ 180.94
19	1382	11/17/98	$ 102.50	$ -	$ 78.44	$ 180.94
20	1687	11/17/98	$ 102.50	$ -	$ 78.44	$ 180.94
21	1689	11/17/98	$ 102.50	$ -	$ 78.44	$ 180.94
22	1709	11/17/98	$ 102.50	$ -	$ 78.44	$ 180.94
23	1377	11/18/98	$ 102.50	$ -	$ 78.44	$ 180.94
24	1378	11/18/98	$ 102.50	$ -	$ 78.44	$ 180.94
25	1379	11/18/98	$ 102.50	$ -	$ 78.44	$ 180.94
26	1380	11/18/98	$ 102.50	$ -	$ 78.44	$ 180.94
27	1389	11/18/98	$ 102.50	$ -	$ 78.44	$ 180.94
28	1390	11/18/98	$ 102.50	$ -	$ 78.44	$ 180.94
29	1391	11/18/98	$ 102.50	$ -	$ 78.44	$ 180.94
30	1397	11/18/98	$ 102.50	$ -	$ 78.44	$ 180.94
31	1398	11/18/98	$ 102.50	$ -	$ 78.44	$ 180.94
32	1408	11/18/98	$ 102.50	$ -	$ 78.44	$ 180.94
33	1683	11/18/98	$ 102.50	$ -	$ 78.44	$ 180.94
34	1685	11/18/98	$ 102.50	$ -	$ 78.44	$ 180.94
35	1423	11/19/98	$ 102.50	$ -	$ 78.44	$ 180.94
36	1424	11/19/98	$ 102.50	$ -	$ 78.44	$ 180.94
37	1425	11/19/98	$ 102.50	$ -	$ 78.44	$ 180.94
38	1426	11/19/98	$ 102.50	$ -	$ 78.44	$ 180.94
39	1505	11/19/98	$ 102.50	$ -	$ 78.44	$ 180.94
40	1506	11/19/98	$ 102.50	$ -	$ 78.44	$ 180.94
41	1684	11/19/98	$ 102.50	$ -	$ 78.44	$ 180.94
42	1483	11/20/98	$ 102.50	$ -	$ 78.44	$ 180.94
43	1494	11/20/98	$ 102.50	$ -	$ 78.44	$ 180.94
44	1499	11/20/98	$ 102.50	$ -	$ 78.44	$ 180.94
45	1500	11/20/98	$ 102.50	$ -	$ 78.44	$ 180.94
46	1501	11/20/98	$ 102.50	$ -	$ 78.44	$ 180.94
47	1504	11/20/98	$ 102.50	$ -	$ 78.44	$ 180.94
48	1485	12/01/98	$ 102.50	$ -	$ 78.44	$ 180.94
49	1486	12/01/98	$ 102.50	$ -	$ 78.44	$ 180.94
50	1488	12/01/98	$ 102.50	$ -	$ 78.44	$ 180.94
51	1489	12/01/98	$ 102.50	$ -	$ 78.44	$ 180.94
52	1491	12/01/98	$ 102.50	$ -	$ 78.44	$ 180.94
1	1492	12/01/98	$ 102.50	$ -	$ 78.44	$ 180.94
2	1474	12/02/98	$ 102.50	$ -	$ 78.44	$ 180.94
3	1484	12/02/98	$ 102.50	$ -	$ 78.44	$ 180.94
4	1495	12/02/98	$ 102.50	$ -	$ 78.44	$ 180.94
5	1496	12/02/98	$ 102.50	$ -	$ 78.44	$ 180.94
6	1497	12/02/98	$ 102.50	$ -	$ 78.44	$ 180.94
7	1498	12/02/98	$ 102.50	$ -	$ 78.44	$ 180.94
8	1466	12/03/98	$ 102.50	$ -	$ 78.44	$ 180.94
9	1467	12/03/98	$ 102.50	$ -	$ 78.44	$ 180.94
10	1471	12/03/98	$ 102.50	$ -	$ 78.44	$ 180.94
11	1457	12/04/98	$ 102.50	$ -	$ 78.44	$ 180.94
12	1458	12/04/98	$ 102.50	$ -	$ 78.44	$ 180.94
13	1459	12/04/98	$ 102.50	$ -	$ 78.44	$ 180.94

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Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
14	1460	12/04/98	$ 102.50	$ -	$ 78.44	$ 180.94
15	1461	12/04/98	$ 102.50	$ -	$ 78.44	$ 180.94
16	1463	12/04/98	$ 102.50	$ -	$ 78.44	$ 180.94
17	1464	12/04/98	$ 102.50	$ -	$ 78.44	$ 180.94
18	1465	12/04/98	$ 102.50	$ -	$ 78.44	$ 180.94
19	1439	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
20	1440	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
21	1442	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
22	1443	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
23	1444	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
24	1445	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
25	1446	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
26	1447	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
27	1448	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
28	1449	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
29	1451	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
30	1452	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
31	1453	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
32	1454	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
33	1455	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
34	1456	12/07/98	$ 102.50	$ -	$ 78.44	$ 180.94
35	1437	12/08/98	$ 102.50	$ -	$ 78.44	$ 180.94
36	1438	12/08/98	$ 102.50	$ -	$ 78.44	$ 180.94
37	1476	12/08/98	$ 102.50	$ -	$ 78.44	$ 180.94
38	1478	12/08/98	$ 102.50	$ -	$ 78.44	$ 180.94
39	1479	12/08/98	$ 102.50	$ -	$ 78.44	$ 180.94
40	1480	12/08/98	$ 102.50	$ -	$ 78.44	$ 180.94
41	134	12/09/98	$ 102.50	$ -	$ 78.44	$ 180.94
42	135	12/09/98	$ 102.50	$ -	$ 78.44	$ 180.94
43	136	12/09/98	$ 102.50	$ -	$ 78.44	$ 180.94
44	137	12/09/98	$ 102.50	$ -	$ 78.44	$ 180.94
45	138	12/09/98	$ 102.50	$ -	$ 78.44	$ 180.94
46	139	12/09/98	$ 102.50	$ -	$ 78.44	$ 180.94
47	150	12/09/98	$ 102.50	$ -	$ 78.44	$ 180.94
48	151	12/09/98	$ 102.50	$ -	$ 78.44	$ 180.94
49	152	12/09/98	$ 102.50	$ -	$ 78.44	$ 180.94
50	153	12/09/98	$ 102.50	$ -	$ 78.44	$ 180.94
51	156	12/09/98	$ 102.50	$ -	$ 78.44	$ 180.94
52	157	12/09/98	$ 102.50	$ -	$ 78.44	$ 180.94
1	110	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
2	111	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
3	112	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
4	127	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
5	128	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
6	129	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
7	140	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
8	141	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
9	142	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
10	143	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
11	144	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
12	145	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
13	148	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94
14	149	12/10/98	$ 102.50	$ -	$ 78.44	$ 180.94

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Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
15	114	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
16	115	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
17	118	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
18	119	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
19	120	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
20	122	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
21	123	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
22	124	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
23	125	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
24	MV-02	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
25	MV-03	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
26	MV-04	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
27	MV-07	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
28	MV-08	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
29	MV-09	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
30	MV-10	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
31	MV-11	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
32	MV-12	12/11/98	$ 102.50	$ -	$ 78.44	$ 180.94
33	58	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
34	59	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
35	60	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
36	61	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
37	62	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
38	63	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
39	64	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
40	67	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
41	68	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
42	69	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
43	71	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
44	72	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
45	73	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
46	75	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
47	76	12/21/98	$ 102.50	$ -	$ 78.44	$ 180.94
48	43	12/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
49	50	12/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
50	51	12/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
51	52	12/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
52	53	12/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
1	54	12/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
2	55	12/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
3	56	12/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
4	57	12/22/98	$ 102.50	$ -	$ 79.64	$ 182.14
5	70	12/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
6	79	12/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
7	80	12/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
8	81	12/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
9	82	12/22/98	$ 102.50	$ -	$ 78.44	$ 180.94
10	40	12/23/98	$ 102.50	$ -	$ 78.44	$ 180.94
11	44	12/23/98	$ 102.50	$ -	$ 78.44	$ 180.94
12	45	12/23/98	$ 102.50	$ -	$ 78.44	$ 180.94
13	46	12/23/98	$ 102.50	$ -	$ 78.44	$ 180.94
14	47	12/23/98	$ 102.50	$ -	$ 78.44	$ 180.94
15	48	12/23/98	$ 102.50	$ -	$ 78.44	$ 180.94

Original Cost Study- Meters and Meter Installations

Florida Public Service Commission

Company: Zellwood Station Co-op, Inc.
Docket No.: 010492-WS
Test Year Ended: December 31, 2000

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Preparer: J. Coto

Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
16	49	12/23/98	$ 102.50	$ -	$ 78.44	$ 180.94
17	83	12/23/98	$ 102.50	$ -	$ 78.44	$ 180.94
18	84	12/23/98	$ 102.50	$ -	$ 78.44	$ 180.94
19	85	12/23/98	$ 102.50	$ -	$ 78.44	$ 180.94
20	86	12/23/98	$ 102.50	$ -	$ 78.44	$ 180.94
21	87	12/23/98	$ 102.50	$ -	$ 78.44	$ 180.94
22	31	12/24/98	$ 102.50	$ -	$ 78.44	$ 180.94
23	32	12/24/98	$ 102.50	$ -	$ 78.44	$ 180.94
24	33	12/24/98	$ 102.50	$ -	$ 78.44	$ 180.94
25	34	12/24/98	$ 102.50	$ -	$ 78.44	$ 180.94
26	88	12/24/98	$ 102.50	$ -	$ 78.44	$ 180.94
27	89	12/24/98	$ 102.50	$ -	$ 78.44	$ 180.94
28	90	12/24/98	$ 102.50	$ -	$ 78.44	$ 180.94
29	91	12/24/98	$ 102.50	$ -	$ 78.44	$ 180.94
30	92	12/24/98	$ 102.50	$ -	$ 78.44	$ 180.94
31	93	12/24/98	$ 102.50	$ -	$ 78.44	$ 180.94
32	94	12/24/98	$ 102.50	$ -	$ 78.44	$ 180.94
33						$ 96,661.32
34	1	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
35	3	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
36	4	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
37	5	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
38	6	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
39	9	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
40	10	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
41	11	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
42	12	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
43	13	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
44	1392	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
45	A	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
46	B	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
47	D	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
48	E	01/04/99	$ 102.50	$ -	$ 78.44	$ 180.94
49	19	01/05/99	$ 102.50	$ -	$ 79.64	$ 182.14
50	97	01/05/99	$ 102.50	$ -	$ 79.64	$ 182.14
51	98	01/05/99	$ 102.50	$ -	$ 79.64	$ 182.14
1	99	01/05/99	$ 102.50	$ -	$ 79.64	$ 182.14
2	100	01/05/99	$ 102.50	$ -	$ 79.64	$ 182.14
3	103	01/05/99	$ 102.50	$ -	$ 79.64	$ 182.14
4	20	01/06/99	$ 102.50	$ -	$ 79.64	$ 182.14
5	21	01/06/99	$ 102.50	$ -	$ 79.64	$ 182.14
6	22	01/06/99	$ 102.50	$ -	$ 79.64	$ 182.14
7	23	01/06/99	$ 102.50	$ -	$ 79.64	$ 182.14
8	24	01/06/99	$ 102.50	$ -	$ 78.44	$ 180.94
9	25	01/06/99	$ 102.50	$ -	$ 79.64	$ 182.14
10	26	01/06/99	$ 102.50	$ -	$ 79.64	$ 182.14
11	37	01/07/99	$ 102.50	$ -	$ 79.64	$ 182.14
12	38	01/07/99	$ 102.50	$ -	$ 79.64	$ 182.14
13	688	02/09/99	$ 50.42	$ 44.90	$ 23.42	$ 118.74
14	810	02/09/99	$ 193.00	$ -	$ 50.98	$ 243.98
15	832	02/09/99	$ 193.00	$ -	$ 50.98	$ 243.98
16	1855	02/09/99	$ 193.00	$ -	$ 50.98	$ 243.98

Original Cost Study- Meters and Meter Installations

Florida Public Service Commission

Company: Zellwood Station Co-op, Inc.
Docket No.: 010492-WS
Test Year Ended: December 31, 2000

Workpaper
Page 17 of 17
Preparer: J. Coto

Line No.	Lot #	Installation Date	Cost of Meter	Cost Other Equipment	Labor Cost	Total Cost of Installation
17	WWPLT	02/09/99	$ 102.50	$ -	$ 50.98	$ 153.48
18	GWF08	03/02/99	$ 102.50	$ -	$ 54.04	$ 156.54
19	RHCC0	05/15/99	$ 817.53	$ -		$ 817.53
20	MBLDG	06/30/99	$ 368.55	$ 94.65	$ 156.63	$ 619.83
21	R-52	08/18/99	$ 193.00	$ -	$ 78.44	$ 271.44
22	CHBLD	10/12/99	$ 188.27	$ 58.75	$ 148.80	$ 395.82
23	RHPOF	11/24/99	$ 102.50	$ -	$ 74.40	$ 176.90
24	ZSCA0	11/30/99	$ 8,091.94	$ -	$ 1,073.65	$ 9,165.59
25	785	12/06/99	$ 193.00	$ -	$ 74.40	$ 267.40
26						$ 18,320.21
27	LIFT#4	02/14/00	$ 102.50	$ -	$ 71.20	$ 173.70
28	872	05/03/00	$ 193.00	$ -	$ 73.66	$ 266.66
29	1859	06/06/00	$ 193.00	$ -	$ 73.66	$ 266.66
30	WHBLD1	06/20/00	$ 794.37	$ -	$ 441.96	$ 1,236.33
31	1874	07/12/00	$ 109.28	$ -	$ 73.66	$ 182.94
32	WTPLT	07/24/00	$ 158.26	$ -	$ 220.98	$ 379.24
33	1875	08/01/00	$ 109.28	$ -	$ 53.18	$ 162.46
34	GCI07	08/25/00	$ 109.28	$ -	$ 73.66	$ 182.94
35	GCI06	09/06/00	$ 109.28	$ -	$ 73.66	$ 182.94
36						$ 3,033.87

Meyer

C.A. Meyer
Paving And
Construction Co.

May 31, 2001

RECEIVED
BY mj DATE 6/1/01

Mr. David Self
CWS Communities Trust
2310 LBJ Freeway, Suite 200
Dallas, TX 75234

RE: **Meyer Job No. 00-22**
Palm Valley Mobile Home Park
Estimate No. 7 -Additions 8 & 8A
Contract Date: October 25. 2000

Dear David:

Please find enclosed our estimate #7 on the above referenced project. Also included is a release of lien upon progress payment, as required in the contract.

A copy of this invoice with the original certification page is being sent to Julian Coto of Excel Engineering, for his review and approval.

If you have any questions, please do not hesitate to call.

Sincerely,

Jamie Dickerson

Jamie Dickerson
Project Assistant

enc.

Cc: Mr. Julian Coto - Excel Engineering

1801 Lee Road, Suite 301, Winter Park, FL 32789 Phone: (407) 647-9900 Fax: (407) 647-9811

C.A. MEYER PAVING AND CONSTRUCTION CO.
1801 LEE ROAD, SUITE 301
WINTER PARK, FLORIDA 32789
Ph. (407) 647-9900 / Fax (407) 647-9811

Invoice 01008

Sold to: CWS COMMUNITIES TRUST
2310 LBJ FREEWAY, STE 200
DALLAS, TX 75234

Ship to: PALM VALLEY MOBILE HOME PARK
ADDITIONS 8 & 8A

Account	P.O. Num	Ship Via	Ship Date	Terms	Invoice Date	Page
500					5/31/2001	1

Quantity	Description	Unit Price	Extended Price
	CONTRACT DATE: 10/25/00		
	MEYER JOB NO. 00-22		
	ESTIMATE NO. 7		
	TOTAL WORK COMPLETED TO DATE. SEE ATTACHMENTS FOR DETAIL.		
	ADDITIONS 8 & 8A		$ 1,146,930.75
	OFFSITE WORK		142,871.90
	12" WATERMAIN		22,272.40
	CHRISTMAS PALM PLACE		46,184.75
	LESS PREVIOUS BILLINGS		(1,178,815.03
	LESS PREVIOUS RETAINAGE		(130,979.47)
		Subtotal	$ 53,465.30
		RETENTION	(5,346.53)
		Total	$ 48,118.77

) OWNER:
CWS COMMUNITIES TRUST
2310 LBJ FREEWAY, STE 200
DALLAS, TX 75234

PROJECT:
PALM VALLEY MOBILE HOME PARK
ADDITIONS 8 & 8A

APPLICATION NO: 7

PERIOD TO: MAY 31, 2001

Distribution to:
- [ ] OWNER
- [ ] ARCHITECT
- [ ] CONTRACTOR
- [ ]
- [ ]

OM CONTRACTOR:
C.A. MEYER PAVING & CONSTRUCTION
1801 LEE ROAD, SUITE 301
WINTER PARK, FL 32789

VIA ARCHITECT:

PROJECT NOS:

NTRACT FOR: SITE WORK

CONTRACT DATE: OCTOBER 25, 2000

ONTRACTOR'S APPLICATION FOR PAYMENT

plication is made for payment, as shown below, in connection with the Contract.
ntinuation Sheet, AIA Document G703, is attached.

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

ORIGINAL CONTRACT SUM		$ 1,036,846.55
Net change by Change Orders		$ 110,084.20
CONTRACT SUM TO DATE (Line 1 ± 2)		$ 1,146,930.75
TOTAL COMPLETED & STORED TO DATE (Column G on G703)		$ 1,146,930.75
RETAINAGE:		
a. 10 % of Completed Work (Column D + E on G703)	$ 114,693.08	
b. ___ % of Stored Material (Column F on G703)	$	
Total Retainage (Lines 5a + 5b or Total in Column I of G703)		$ 114,693.08
TOTAL EARNED LESS RETAINAGE (Line 4 Less Line 5 Total)		$ 1,032,237.67
LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)		$ 985,932.40
CURRENT PAYMENT DUE		$ 46,305.27
BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)		$

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	77,244.20	-0-
Total approved this Month	32,840.00	-0-
TOTALS	110,084.20	-0-
NET CHANGES by Change Order	$ 110,084.20	

CONTRACTOR: C.A. MEYER PAVING & CONSTRUCTION CO.

By: JAMES E. MEYER Date: 5/31/2001

State of: FLORIDA County of: ORANGE
Subscribed and sworn to before me this 31ST day of MAY 2001
Notary Public: Jamie Dickerson
My Commission expires: 8/26/03

Jamie Dickerson
MY COMMISSION # CC866938 EXPIRES
August 24, 2003
BONDED THRU TROY FAIN INSURANCE, INC.

ENGINEER'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the application, the Architect certifies to the Owner that to the best of the Engineer's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED ..... $ _____

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.)

ENGINEER: EXCEL ENGINEERING CONSULTANTS

By: _____ Date:

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

Winter Park, FL 32789

Owner: CWS C[illegible]unities Trust

Draw Schedule No. 7

DESCRIPTION	CONTRACT AMOUNTS QUANTITY	UNIT	UNIT PR.	EXTENSION	PREVIOUS ESTIMATES QUANTITY	AMOUNT	THIS ESTIMATE QUANTITY	AMOUNT	TOTAL TO DATE QUANTITY	AMOUNT
****** MOBILIZATION ******										
LICENSES & FEES										
PERFORMANCE/PAYMENT BOND	NONE	LS								
PERMITS	NONE	LS								
RENTALS										
BARRICADES	1	LS	$500.00	$500.00	1	$500.00	0	$0.00	1	$500.00
PORT-O-LET	1	LS	$450.00	$450.00	1	$450.00	0	$0.00	1	$450.00
LOW-BOY MOVES										
EQUIPMENT & MISC.	1	LS	$15,000.00	$15,000.00	100%	$15,000.00	0%	$0.00	100%	$15,000.00
**** SURVEYING ****										
LAYOUT	1	LS	$20,000.00	$20,000.00	100%	$20,000.00	0%	$0.00	100%	$20,000.00
** CLEARING **										
SILT FENCE	3,660	LF	$1.25	$4,575.00	3,660	$4,575.00	0	$0.00	3660	$4,575.00
TREE BARRIERS W/ TWINE	6,405	LF	$1.55	$9,927.75	6,405	$9,927.75	0	$0.00	6405	$9,927.75
NATURAL BARRIERS W/ TWINE	2,000	LF	$1.35	$2,700.00	2,000	$2,700.00	0	$0.00	2000	$2,700.00
SITE - BURN ON SITE	26.3	AC	$2,010.00	$52,863.00	26.3	$52,863.00	0	$0.00	26.3	$52,863.00
DEMO CURB AT ENTRANCES	270	LF	$5.00	$1,350.00	270	$1,350.00	0	$0.00	270	$1,350.00
** EARTHWORK **										
STRIPPINGS										
STRIPPINGS @ 6"	21,205	CY	$0.75	$15,903.75	21205	$15,903.75	0	$0.00	21,205	$15,903.75
CUT & FILL										
EXCAVATION	8,866	CY	$1.65	$14,628.90	8866	$14,628.90	0	$0.00	8,866	$14,628.90
IMPORT FILL W/30%	NONE		$0.00	$0.00	0	$0.00	0	$0.00	0	$0.00
** STORM SYSTEM **										
PIPE INSTALLATION										
15" HDPE 0'-6'	3,400	LF	$14.85	$50,490.00	3400	$50,490.00	0	$0.00	3400	$50,490.00
15" HDPE 6'-8'	63	LF	$16.25	$1,023.75	63	$1,023.75	0	$0.00	63	$1,023.75
24" HDPE 0'-6'	182	LF	$21.95	$3,994.90	182	$3,994.90	0	$0.00	182	$3,994.90
24" HDPE 6'-8'	432	LF	$24.65	$10,648.80	432	$10,648.80	0	$0.00	432	$10,648.80
30" HDPE 0'-6'	14	LF	$31.35	$438.90	14	$438.90	0	$0.00	14	$438.90
30" HDPE 6'-8'	65	LF	$36.50	$2,372.50	65	$2,372.50	0	$0.00	65	$2,372.50
30" HDPE 8'-10'	61	LF	$39.75	$2,424.75	41	$1,629.75	20	$795.00	61	$2,424.75
30" HDPE 10'-12'	125	LF	$43.80	$5,475.00	125	$5,475.00	0	$0.00	125	$5,475.00
MANHOLES										
STORM M.H. 0'-6'	1	EA	$825.00	$825.00	1	$825.00	0	$0.00	1	$825.00
STORM M.H.- J - 6-8'	1	EA	$975.00	$975.00	1	$975.00	0	$0.00	1	$975.00
STORM M.H. - J - 8'-10'	1	EA	$1,540.00	$1,540.00	1	$1,540.00	0	$0.00	1	$1,540.00
INLETS										
TYPE "D" INLET 0'-6'	18	EA	$1,950.00	$35,100.00	18	$35,100.00	0	$0.00	18	$35,100.00

Owner: CWS Communities Trust

Draw Schedule No. 7

DESCRIPTION	CONTRACT AMOUNTS QUANTITY	UNIT	UNIT PR.	EXTENSION	PREVIOUS ESTIMATES QUANTITY	AMOUNT	THIS ESTIMATE QUANTITY	AMOUNT	TOTAL TO DATE QUANTITY	AMOUNT
TYPE "D" INLET 6'-8'	3	EA	$2,250.00	$6,750.00	3	$6,750 00	0	$0 00	3	$6,750 00
TYPE "E" INLET 6'-8'	1	EA	$2,750 00	$2,750 00	1	$2,750 00	0	$0 00	1	$2 750.00
MITERED END SECTIONS										
30" MES	1	EA	$650 00	$650 00	1	$650 00	0	$0.00	1	$650.00
** SANITARY SEWER **										
PIPE INSTALLATION										
6" PVC 0'/6'	4,602	LF	$12.25	$56,374 50	4602	$56,374 50	0	$0.00	4602	$56,374.50
6" PVC 6'/8'	1,548	LF	$14.90	$23,065.20	1548	$23,065 20	0	$0 00	1548	$23,065.20
8" PVC 8'/10'	35	LF	$16 85	$589 75	35	$589 75	0	$0 00	35	$589.75
8"D.I.P. 8/10' (@ L. STA.)	20	LF	$39 00	$780.00	20	$780 00	0	$0 00	20	$780 00
DETECTABLE TAPE	6,205	LF	$0.09	$558 45	6205	$558 45	0	$0.00	6205	$558.45
AIR TEST	1	LS	$750 00	$750.00	1	$750 00	0	$0 00	1	$750.00
SERVICES/FITTINGS										
6" SDR 35 PVC	4,440	LF	$4 45	$19,758 00	4440	$19,758 00	0	$0 00	4440	$19,758 00
6" X 6" WYES W/45° BEND	148	EA	$48.90	$7,237.20	148	$7,237 20	0	$0 00	148	$7,237.20
8" PVC x D I. COUPLER	1	EA	$110 00	$110 00	1	$110.00	0	$0 00	1	$110.00
6" PLUGS	148	EA	$5.50	$814 00	148	$814 00	0	$0.00	148	$814.00
SEMINOLE COUNTY MARKER BALLS	148	EA	$26.50	$3,922.00	148	$3,922.00	0	$0 00	148	$3,922.00
SERVICE STAKES	148	EA	$2.75	$407.00	148	$407.00	0	$0.00	148	$407.00
MANHOLES										
SANITARY M H. 0'/6'	17	EA	$1,350.00	$22,950 00	17	$22,950 00	0	$0.00	17	$22,950.00
SANITARY M.H. 6'/8'	6	EA	$1,650.00	$9,900 00	6	$9,900 00	0	$0.00	6	$9,900.00
SANITARY M.H. 8'/10'	1	EA	$2,050.00	$2,050.00	1	$2,050 00	0	$0.00	1	$2,050.00
DROP MANHOLE CONNECTION	3	EA	$325.00	$975 00	3	$975 00	0	$0 00	3	$975.00
8" M.H. BOOTS	47	EA	$78 00	$3,666.00	47	$3,666 00	0	$0 00	47	$3,666.00
** WATER SYSTEM **										
PIPE INSTALLATION										
6" PVC	6 290	LF	$8.15	$51,263 50	6290	$51,263 50	0	$0.00	6290	$51,263 50
6" D I P.	100	LF	$13 75	$1,375 00	100	$1,375 00	0	$0 00	100	$1,375.00
#14 GUAGE WIRE	6,390	LF	$0.08	$511 20	6390	$511 20	0	$0 00	6390	$511.20
DETECTABLE TAPE	6,390	LF	$0.14	$894 60	6390	$894 60	0	$0.00	6390	$894.60
FITTINGS										
12"x 6" REDUCER	1	EA	$385.00	$385 00	1	$385 00	0	$0 00	1	$385.00
8"x6" TP. SDLS/ W GV	1	EA	$3,010 00	$3,010 00	1	$3,010.00	0	$0 00	1	$3,010.00
6" G.V.	17	EA	$715 00	$12,155 00	17	$12,155 00	0	$0.00	17	$12,155.00
6"x 6" TEE	6	EA	$305 00	$1,830 00	6	$1,830 00	0	$0 00	6	$1,830 00
6" HYDRANT TEE	9	EA	$312.00	$2,808 00	9	$2,808 00	0	$0.00	9	$2,808.00
6" 45-B	22	EA	$200 00	$4,400 00	22	$4,400 00	0	$0 00	22	$4,400.00
6" 22.5-B	10	EA	$216 00	$2,160 00	10	$2,160 00	0	$0.00	10	$2,160.00
6" BELL RESTRAINTS	35	EA	$80 00	$2,800 00	35	$2,800 00	0	$0.00	35	$2,800.00

Meyer Job No. 00-22

1801 Lee Road, ' 'te 301
Winter Park, 789

Owner: CWS Communities Trust

Draw Schedule No. 7

DESCRIPTION	CONTRACT AMOUNTS QUANTITY	UNIT	UNIT PR.	EXTENSION	PREVIOUS ESTIMATES QUANTITY	AMOUNT	THIS ESTIMATE QUANTITY	AMOUNT	TOTAL TO DATE QUANTITY	AMOUNT
SEMINOLE COUNTY BALL MARKERS	96	EA	$26.50	$2 544 00	96	$2,544.00	0	$0.00	96	$2,544 00
TEMP. JUMPER ASSEM.	1	EA	$1,325.00	$1,325 00	1	$1,325 00	0	$0 00	1	$1,325.00
FH Asmbly (6"gv&Bx)	9	EA	$2,340.00	$21,060 00	9	$21,060 00	0	$0 00	9	$21,060 00
SERVICES										
SINGLE	148	EA	$225 00	$33,300 00	148	$33,300 00	0	$0.00	148	$33,300.00
1" SERVICE TUBING	3,700	LF	$3.70	$13,690.00	3700	$13,690 00	0	$0.00	3,700	$13,690.00
SERVICE STAKE	148	EA	$2.75	$407 00	148	$407 00	0	$0.00	148	$407.00
MISC. WORK ITEMS										
TIE IN TO EXISTING WATER LINE	2	EA	$500 00	$1,000 00	2	$1,000 00	0	$0.00	2	$1,000.00
PRESSURE TEST	1	LS	$900.00	$900 00	1	$900 00	0	$0 00	1	$900.00
CHLORINATE	1	LS	$750.00	$750 00	1	$750 00	0	$0.00	1	$750.00
** REUSE WATER SYSTEM ** PIPE INSTALLATION										
4" PVC	3,585	LF	$5 90	$21,151.50	3,585	$21,151.50	0	$0.00	3,585	$21,151.50
4" D.I P.	140	LF	$13.75	$1,925 00	140	$1,925 00	0	$0.00	140	$1,925.00
3" PVC	3,335	LF	$5.25	$17,508 75	3,335	$17,508 75	0	$0.00	3,335	$17,508.75
#14 GUAGE WIRE	7,060	LF	$0.18	$1,270.80	7,060	$1,270 80	0	$0.00	7,060	$1,270.80
DETECTABLE TAPE	7,060	LF	$0.06	$423.60	7,060	$423.60	0	$0.00	7,060	$423.60
FITTINGS										
4"G.V.	16	EA	$585.00	$9,360.00	16	$9,360.00	0	$0.00	16	$9,360.00
4"x 4" TEE	1	EA	$235 00	$235.00	1	$235.00	0	$0.00	1	$235.00
4"X 3" TEE	6	EA	$238.00	$1,428.00	6	$1,428.00	0	$0.00	6	$1,428.00
4" 45-B	29	EA	$153.00	$4,437.00	29	$4,437.00	0	$0.00	29	$4,437.00
4" 22.5-B	12	EA	$153.00	$1,836.00	12	$1,836.00	0	$0.00	12	$1,836.00
4" BELL RESTRAINTS	29	EA	$57.00	$1,653 00	29	$1,653.00	0	$0 00	29	$1,653.00
3" BELL RESTRAINTS	9	EA	$53.00	$477.00	9	$477.00	0	$0.00	9	$477.00
SEMINOLE COUNTY BALL MARKERS	94	EA	$26.50	$2,491 00	94	$2,491 00	0	$0 00	94	$2,491.00
3" G.V.	6	EA	$525.00	$3,150.00	6	$3,150.00	0	$0.00	6	$3,150.00
SERVICES										
SINGLE	148	EA	$215 00	$31,820 00	148	$31,820.00	0	$0 00	148	$31,820.00
1" SERVICE TUBING	3,700	LF	$3 70	$13,690 00	3700	$13,690.00	0	$0.00	3,700	$13,690.00
SERVICE STAKE	148	EA	$2.75	$407 00	148	$407 00	0	$0.00	148	$407.00
** SUBGRADE WORK **										
12" STABILIZED SUBGRADE	22,525	SY	$1 75	$39,418 75	22525	$39,418 75	0	$0.00	22,525	$39,418.75
12" STABILIZED - MINI PARK PARKING	690	SY	$1.75	$1,207.50	690	$1,207.50	0	$0.00	690	$1,207.50
** BASE WORK **										
6" SOIL CEM.	18,387	SY	$5 80	$106,644 60	18387	$106,644.60	0	$0.00	18387	$106,644.60
6" SOIL CEM - MINI PARK PARKING	690	SY	$5 80	$4,002 00	690	$4,002 00	0	$0.00	690	$4,002.00
ASPHALT PAVING										
SAW-CUT EXISTING ROAD	275	LF	$1.75	$481.25	275	$481.25	0	$0 00	275	$481.25

Project Name: Palm Valley Additions 8 & 8A
Meyer Job No. 00-22

C.A. Meyer Paving & Construction Co.
1801 Lee Road, Suite 301
Winter Park, FL 32789

Date: 05/31/01

Owner: CWS Communities Trust

Draw Schedule No. 7

DESCRIPTION	CONTRACT AMOUNTS				PREVIOUS ESTIMATES		THIS ESTIMATE		TOTAL TO DATE	
	QUANTITY	UNIT	UNIT PR.	EXTENSION	QUANTITY	AMOUNT	QUANTITY	AMOUNT	QUANTITY	AMOUNT
1-1/2" TYP-I ROADWAYS	18,387	SY	$4.25	$78,144.75	18387	$78,144.75	0	$0.00	18387	$78,144.75
1" TYP-I- MINI PARK PARKING	690	SY	$3.25	$2,242 50	690	$2,242 50	0	$0 00	690	$2,242.50
CURB WORK										
MIAMI CURB	12,425	LF	$5 60	$69,580.00	12425	$69,580 00	0	$0.00	12,425	$69,580.00
**** GRADE OUT ****										
RIGHT OF WAY	36,742	SY	$0.25	$9,185.50	36742	$9,185 50	0	$0 00	36,742	$9,185.50
YARD AREA	950	SY	$0.25	$237.50	950	$237 50	0	$0.00	950	$237.50
LOTS	111,858	SY	$0.25	$27,964.50	111858	$27,964 50	0	$0.00	111,858	$27,964.50
FINISH WORK										
SOD STRIP BEHIND CURB (2') - BAHIA	2,756	SY	$1.65	$4,547.40	2756	$4,547.40	0	$0 00	2756	$4,547.40
SEED AND MULCH - EASEMENTS	555	SY	$0 35	$194.25	555	$194 25	0	$0.00	555	$194.25
** INCIDENTAL SIGNS AND MISC. **										
STRIPING & SIGNAGE(NO STREET SIGNS)	1	LS	$3,900.00	$3,900 00	1	$3,900 00	0	$0.00	1	$3,900.00
CHANGE ORDERS										
CHANGE ORDER #1 (SEE ATTACHED BACKUP)	1	LS	$1,965 00	$1,965 00	1	$1,965 00	0	$0 00	1	$1,965.00
CHANGE ORDER #2 (SEE ATTACHED BACKUP)	1	LS	$36,787.90	$36,787 90	1	$36,787 90	0	$0.00	1	$36,787.90
CHANGE ORDER #3 - STORM SEWER REPAIR	1	LS	$10,000.00	$10,000.00	1	$10,000 00	0	$0.00	1	$10,000.00
CHANGE ORDER #4 - SLEEVES - (SEE ATTACHED)	1	LS	$6,536 00	$6,536 00	1	$6,536 00	0	$0.00	1	$6,536.00
CHANGE ORDER #5 - TURN LANE WIDENING	1	LS	$17,815 30	$17,815 30	0	$0 00	1	$17,815 30	1	$17,815.30
CHANGE ORDER #6 - STAKED LOT LINES & CORNER	1	LS	$4,140 00	$4,140 00	1	$4,140 00	0	$0.00	1	$4,140.00
CHANGE ORDER #7 - ADDITIONAL ASPHALT WORK	1	LS	$32,840 00	$32,840.00	0	$0 00	1	$32,840.00	1	$32,840.00
TOTAL CONTRACT AMOUNTS>>>>>>>>>>>				$1,146,930.75		$1,095,480.45		$51,450.30		$1,146,930.75

Project Name: Palm Valley Additions 8 & 8A
Meyer Job No. 00-22

C.A. Meyer Paving & Construction Co.
1801 Lee Road, Suite 301
Winter Park, FL 32789

Date: 05/31/01

Owner: CWS Communities Trust

Draw Schedule No. 7

CONTRACT SUMMARY BY CATEGORY

CATEGORY DESCRIPTION	CONTRACT AMOUNT	PREVIOUS APPLICATION	WORK COMP. THIS PERIOD	TOTAL WORK COMP. TO DATE	% COMPLETE
MOBILIZATION TOTAL	$15,950 00	$15,950 00	$0.00	$15,950 00	100%
SURVEYING TOTAL	$20,000.00	$20,000 00	$0.00	$20,000 00	100%
CLEARING TOTAL	$71,415.75	$71,415.75	$0 00	$71,415 75	100%
EARTHWORK TOTAL	$30,532 65	$30,532.65	$0 00	$30,532 65	100%
STORM SYSTEM TOTAL	$125,458.60	$124,663 60	$795.00	$125,458.60	100%
SANITARY SEWER TOTAL	$153,907.10	$153,907.10	$0.00	$153,907.10	100%
WATER SYSTEM TOTAL	$158,568 30	$158,568 30	$0 00	$158,568 30	100%
REUSE WATER SYSTEM TOTAL	$113,263.65	$113,263.65	$0 00	$113,263 65	100%
SUBGRADE TOTAL	$40,626.25	$40,526.25	$0.00	$40,626.25	100%
BASE WORK TOTAL	$110,646.60	$110,646.60	$0.00	$110,646.60	100%
ASPHALT PAVING TOTAL	$80,868.50	$80,868.50	$0.00	$80,868 50	100%
CURB WORK TOTAL	$69,580.00	$69,580.00	$0 00	$69,580.00	100%
GRADE OUT TOTAL	$37,387.50	$37,387.50	$0.00	$37,387.50	100%
FINISH WORK TOTAL	$4,741 65	$4,741 65	$0 00	$4,741.65	100%
INCIDENTAL SIGNS & MISCELLANEOUS TOTAL	$3,900 00	$3,900 00	$0.00	$3,900.00	100%
CHANGE ORDER #1	$1,965 00	$1,965 00	$0 00	$1,965.00	100%
CHANGE ORDER #2	$36,787.50	$36,787.90	$0.00	$36,787 90	100%
CHANGE ORDER #3	$10,000 00	$10,000 00	$0 00	$10,000 00	100%
CHANGE ORDER #4	$6,536.00	$6,536 00	$0.00	$6,536.00	100%
CHANGE ORDER #5	$17,815 30	$0 00	$0 00	$0 00	0%
CHANGE ORDER #6	$4,140 00	$0 00	$4,140 00	$4,140.00	100%
CHANGE ORDER #7	$32,640 00	$0 00	$32,840 00	$32 840 00	100%
GRAND TOTAL>>>>>>>	$1,146,930.35	$1,091,340.45	$37,775.00	$1,129,115.45	98%

TO OWNER:
CWS COMMU ITIES TRUST
2310 LBJ FREEWAY, STE 200
DALLAS TX, 75234

PROJECT:
PALM VALLEY MOBILE HOI PARK
OFFSITE WORK (L.S. Pond)

APPLICATION NO: 7

PERIOD TO: MAY 31, 2001

PROJECT NOS:

Distribution t
- [ ] OWNER
- [ ] ARCHITECT
- [ ] CONTRACTOR
- [ ]
- [ ]

FROM CONTRACTOR:
C.A. MEYER PAVING & CONSTRUCTION CO.
1801 LEE ROAD, SUITE 301
WINTER PARK, FL 32789

VIA ARCHITECT:

CONTRACT FOR: SITE WORK

CONTRACT DATE: OCTOBER 25, 2000

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Document G703, is attached.

1. ORIGINAL CONTRACT SUM		$ 142,871.90
2. Net change by Change Orders		$ 0.00
3. CONTRACT SUM TO DATE (Line 1 ± 2)		$ 142,871.90
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703)		$ 142,871.90
5. RETAINAGE:		
a. 10 % of Completed Work (Column D + E on G703)	$ 14,287.19	
b. ___ % of Stored Material (Column F on G703)	$	
Total Retainage (Lines 5a + 5b or Total in Column I of G703)		$ 14,287.19
6. TOTAL EARNED LESS RETAINAGE (Line 4 Less Line 5 Total)		$ 128,584.71
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)		$ 126,771.21
8. CURRENT PAYMENT DUE		$ 1,813.50
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)		$

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	-0-	-0-
Total approved this Month	-0-	-0-
TOTALS	-0-	-0-
NET CHANGES by Change Order	-0-	

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR: C.A. MEYER PAVING & CONSTRUCTION CO.

By: _____ Date: 5/31/2001
JAMES E. MEYER, VICE PRESIDENT

State of: FLORIDA County of: ORANGE
Subscribed and sworn to before me this 31ST day of MAY 2001
Notary Public: Jamie Dickerson
My Commission expires: 8/26/03

Jamie Dickerson
MY COMMISSION # CC866938 EXPIRES
August 26, 2003
BONDED THRU TROY FAIN INSURANCE, INC.

ENGINEER'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED ..... $ _____

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and onthe Continuation Sheet that are changed to conform with the amount certified.)

ENGINEER: EXCEL ENGINEERING CONSULTANTS

By: _____ Date: _____

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

Offsite Work

Winter Par' 32789

Owner: CWS C...nunities Trust

Draw Schedule No. 7

DESCRIPTION	CONTRACT AMOUNTS				PREVIOUS ESTIMATES		THIS ESTIMATE		TOTAL TO DATE	
	QUANTITY	UNIT	UNIT PR.	EXTENSION	QUANTITY	AMOUNT	QUANTITY	AMOUNT	QUANTITY	AMOUNT
** CLEARING **										
SITE - BURN ON SITE	5 0	AC	$2 010 00	$10,050 00	5	$10,050 00	0	$0 00	5	$10,050 00
** EARTHWORK **										
STRIPPINGS										
STRIPPINGS @ 6"	4,000	CY	$0 75	$3,000 00	4000	$3,000 00	0	$0.00	4,000	$3,000.00
CUT & FILL										
EXCAVATION	26,800	CY	$1 65	$44,220.00	26800	$44,220.00	0	$0 00	26,800	$44,220 00
IMPORT FILL W/30%	NONE		$0 00	$0.00	0	$0 00	0	$0.00	0	$0.00
** STORM SYSTEM **										
PIPE INSTALLATION										
19" x 30" ERCP 0'-6'	130	LF	$45 00	$5,850 00	130	$5,850 00	0	$0 00	130	$5,850.00
SPECIAL STRUCTURES										
CONTROL STR. W/SKIM 0'-6'	1	EA	$2,850 00	$2,850.00	1	$2,850 00	0	$0.00	1	$2,850.00
19" x 30" ENDWALL	1	EA	$3 850 00	$3,850 00	1	$3,850.00	0	$0 00	1	$3,850 00
FABRIFORM @ ENDWALL	225	SF	$5 00	$1,125 00	225	$1,125.00	0	$0 00	225	$1,125.00
SODDING @ ENDWALL	130	SY	$1.65	$214.50	130	$214.50	0	$0 00	130	$214.50
** SANITARY SEWER **										
LIFT STATION										
DEWATERING	1	LS	$3,500 00	$3,500 00	1	$3,500.00	0	$0.00	1	$3,500.00
FIBERGLASS LIFT STATION / PUMPS	1	LS	$19,000.00	$19,000.00	1	$19,000.00	0	$0.00	1	$19,000.00
EXCAVATE, SET, BACKFILL	1	LS	$4,500 00	$4,500 00	1	$4,500 00	0	$0 00	1	$4,500.00
CONCRETE PAD	1	LS	$450 00	$450.00	1	$450.00	0	$0.00	1	$450.00
ELECTRICAL	1	LS	$2,950 00	$2,950 00	80%	$2,360.00	0	$590.00	100%	$2,950 00
GRAVEL @ BTM + SITE	20	CY	$35 00	$700 00	0	$0.00	20	$700.00	20	$700.00
1" WATER SER. (120' + BCKFLW+ BIB)	1	LS	$700 00	$700.00	1	$700.00	0	$0 00	1	$700.00
SITE GRADING	1	LS	$225 00	$225 00	0	$0 00	1	$225 00	1	$225.00
START-UP	1	LS	$500 00	$500 00	0	$0 00	1	$500.00	1	$500.00
FORCE MAIN										
3" PVC	1,840	LF	$5.45	$10,028.00	1,840	$10,028 00	0	$0.00	1,840	$10,028.00
3" 45 B	3	EA	$208 00	$624 00	3	$624 00	0	$0.00	3	$624.00
3" BELL RESTRAINTS	6	EA	$52 50	$315 00	6	$315 00	0	$0 00	6	$315.00
SEMINOLE COUNTY BALL MARKERS	21	EA	$25 50	$556 50	21	$556 50	0	$0 00	21	$556.50
MISCELLANEOUS										
CONNECT EX. TO MANHOLE	1	LS	$600 00	$600 00	1	$600 00	0	$0.00	1	$600.00
DETECTOR TP.& WIRE	1,840	LF	$0 20	$368.00	1840	$368 00	0	$0 00	1,840	$368.00
SOD REPAIR	1,350	SY	$1 65	$2,227 50	1350	$2,227 50	0	$0 00	1,350	$2,227.50
PRESSURE TEST	1	LS	$500.00	$500.00	1	$500 00	0	$0.00	1	$500.00

Project Name: Palm Valley Additions 8 & 8A
Meyer Job No. 00-22
Offsite Work

Owner: CWS Communities Trust

C.A. Meyer Paving & Construction Co.
1801 Lee Road, Suite 301
Winter Park, FL 32789

Draw Schedule No. 7

Date: 05/31/01

DESCRIPTION	CONTRACT AMOUNTS				PREVIOUS ESTIMATES		THIS ESTIMATE		TOTAL TO DATE	
	QUANTITY	UNIT	UNIT PR.	EXTENSION	QUANTITY	AMOUNT	QUANTITY	AMOUNT	QUANTITY	AMOUNT
**** GRADE OUT ****										
RETENTION PONDS	19,405	SY	$0 25	$4,851 50	19406	$4,851 50	0	$0 00	19,406	$4,851 50
FINISH WORK										
SOD POND SLOPES & MAINT BERM - BAHIA	11,585	SY	$1 65	$19,116.90	11586	$19,116.90	0	$0.00	11,586	$19,116.90
TOTAL CONTRACT AMOUNTS>>>>>>>>>>>>				$142,871.90		$140,856.90		$2,015.00		$142,871.90

CONTRACT SUMMARY BY CATEGORY

CATEGORY DESCRIPTION	CONTRACT AMOUNT	PREVIOUS APPLICATION	WORK COMP. THIS PERIOD	TOTAL WORK COMP. TO DATE	% COMPLETE
CLEARING TOTAL	$10,050 00	$10,050.00	$0 00	$10,050.00	100%
EARTHWORK TOTAL	$47,220 00	$47,220 00	$0 00	$47,220.00	100%
STORM SYSTEM TOTAL	$13,889 50	$13,889 50	$0.00	$13,889.50	100%
SANITARY SEWER TOTAL	$47,744 00	$45,729.00	$2,015 00	$47,744.00	100%
GRADE OUT TOTAL	$4,851 50	$4,851.50	$0 00	$4,851 50	100%
FINISH WORK TOTAL	$19,116 90	$19,116 90	$0 00	$19 116 90	100%
GRAND TOTAL>>>>>>>	$142,871.90	$140,856.90	$2,015.00	$142,871.90	100%

OWNER:
CWS COMMUNITIES TRUST
2310 LBJ FREEWAY, STE 200
DALLAS, TX 75234

PROJECT:
PALM VALLEY MOBILE HOME PARK
12" WATER MAIN

APPLICATION NO: 7

PERIOD TO: MAY 31, 2001

PROJECT NOS:

Distribution to:
- [ ] OWNER
- [ ] ARCHITECT
- [ ] CONTRACTOR
- [ ]
- [ ]

CONTRACTOR: C.A. MEYER PAVING & CONSTRUCTION CO.
1801 LEE ROAD, SUITE 301
WINTER PARK, FL 32789

VIA ARCHITECT:

CONTRACT FOR: SITE WORK

CONTRACT DATE: OCTOBER 25, 2000

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Document G703, is attached.

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

ORIGINAL CONTRACT SUM		$ 27,272.40
Net change by Change Orders		$ 0.00
CONTRACT SUM TO DATE (Line 1 ± 2		$ 27,272.40
TOTAL COMPLETED & STORED TO DATE (Column G on G703)		$ 27,272.40
RETAINAGE:		
a. 10 % of Completed Work (Column D + E on G703)	$ 2,727.24	
b. % of Stored Material (Column F on G703)	$	
Total Retainage (Lines 5a + 5b or Total in Column I of G703)		$ 2,727.24
TOTAL EARNED LESS RETAINAGE (Line 4 Less Line 5 Total)		$ 24,545.16
LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)		$ 24,545.16
CURRENT PAYMENT DUE		$ 0.00
BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)		$

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	-0-	-0-
Total approved this Month	-0-	-0-
TOTALS	-0-	-0-
NET CHANGES by Change Order	-0-	

CONTRACTOR: C.A. MEYER PAVING & CONSTRUCTION CO.

By: JAMES E. MEYER Date: 5/31/2001

State of: FLORIDA County of: ORANGE
Subscribed and sworn to before me this 31ST day of MAY 2001
Notary Public: Jamie Dickerson
My Commission expires: 8/26/03

Jamie Dickerson
MY COMMISSION # CC866938 EXPIRES
August 26, 2003
BONDED THRU TROY FAIN INSURANCE INC

ENGINEER'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the application, the Architect certifies to the Owner that to the best of the Engineer's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED ..... $

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.)

ENGINEER: EXCEL ENGINEERING CONSULTANTS

By: Date:

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

Project Name: Palm Valley Additions 8 & 8A
12" Water Main
Meyer Job No. 00-22

Owner: CWS Communities Trust

C.A. Meyer Paving & Construction Co.
1801 Lee Road, Suite 301
Winter Park, FL 32789

Draw Schedule No. 7

DATE: 05/31/01

DESCRIPTION	CONTRACT AMOUNTS				PREVIOUS ESTIMATES		THIS ESTIMATE		TOTAL TO DATE	
	QUANTITY	UNIT	UNIT PR.	EXTENSION	QUANTITY	AMOUNT	QUANTITY	AMOUNT	QUANTITY	AMOUNT
***** MOBILIZATION *****										
LICENSES & FEES										
PERFORMANCE/PAYMENT BOND	NONE	LS								
PERMITS	NONE	LS								
EQUIPMENT & MISC.	1	LS	$350.00	$350 00	1	$350.00	0	$0.00	1	$350 00
**** SURVEYING ****										
LAYOUT	1	LS	$500 00	$500.00	1	$500.00	0	$0 00	1	$500.00
** WATER SYSTEM **										
PIPE INSTALLATION										
12" PVC	720	LF	$26.95	$19,404.00	720	$19,404.00	0	$0.00	720	$19,404.00
#14 GUAGE WIRE	720	LF	$0 08	$57.60	720	$57.60	0	$0 00	720	$57 60
DETECTABLE TAPE	720	LF	$0 14	$100 80	720	$100.80	0	$0.00	720	$100.80
FITTINGS										
12" 90-B	1	EA	$675.00	$675.00	1	$675.00	0	$0.00	1	$675.00
12" x 2" TAP CAP	2	EA	$295.00	$590 00	2	$590.00	0	$0.00	2	$590.00
2" TEMP. BLOW OFF ASSEM.	1	EA	$225 00	$225.00	1	$225.00	0	$0 00	1	$225.00
MISC. WORK ITEMS										
TIE IN TO EXISTING WATER LINE	1	EA	$500 00	$500.00	1	$500.00	0	$0 00	1	$500.00
PRESSURE TEST	1	LS	$500 00	$500.00	1	$500.00	0	$0.00	1	$500 00
CHLORINATE	1	LS	$350.00	$350 00	1	$350 00	0	$0.00	1	$350.00
OPEN CUT(REMOVE & REPLACE PVMT)	1	LS	$2,500 00	$2,500 00	100%	$2,500.00	0%	$0.00	100%	$2,500.00
**** GRADE OUT ****										
REGRADE TRENCH AREA	800	SY	$0 25	$200.00	800	$200 00	0	$0 00	800	$200.00
SODDDING - BAHIA	800	SY	$1 65	$1,320.00	800	$1,320.00	0	$0 00	800	$1,320.00
TOTAL CONTRACT AMOUNTS>>>>				$27,272.40		$27,272.40		$0.00		$27,272.40

Project Name: Palm Valley Additions 8 & 8A
12" Water Main
Meyer Job No. 00-22

Owner: CWS Communities Trust

C.A. Meyer Paving & Construction Co.
1801 Lee Road, Suite 301
Winter Park, FL 32789

Draw Schedule No. 7

DATE: 05/31/01

****CONTRACT SUMMARY BY CATEGORY****

CATEGORY	CONTRACT AMOUNT	PREVIOUS APPLICATION	WORK COMP. THIS PERIOD	TOTAL WORK COMP. TO DATE	% COMPLETE
MOBILIZATION TOTAL	$350.00	$350.00	$0 00	$350 00	100%
SURVEYING TOTAL	$500.00	$500 00	$0 00	$500 00	100%
WATER SYSTEM TOTAL	$24,902 40	$24,902.40	$0 00	$24,902.40	100%
GRADE OUT TOTAL	$1,520 00	$1,520.00	$0 00	$1,520.00	100%
GRAND TOTAL>>>>>>>>>	$27,272.40	$27,272.40	$0.00	$27,272.40	100%

APPLICATION AND CERTIFICATION FOR PAYMENT — AIA DOCUMENT G702 — PAGE ONE OF PA

OWNER:
CWS COMMUNITIES TRUST
2310 LBJ FREEWAY, STE 200
DALLAS, TX 75234

PROJECT:
PALM VALLEY MOBILE HOME PARK
CHRISTMAS PALM PLACE

APPLICATION NO: 7

PERIOD TO: MAY 31, 2001

PROJECT NOS:

Distribution to:
- [ ] OWNER
- [ ] ARCHITECT
- [ ] CONTRACTOR
- [ ]
- [ ]

FROM CONTRACTOR:
C.A. MEYER PAVING & CONSTRUCTION CO.
1801 LEE ROAD, SUITE 301
WINTER PARK, FL 32789

VIA ARCHITECT:

CONTRACT FOR: SITE WORK

CONTRACT DATE: OCTOBER 25, 2000

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Document G703, is attached.

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

ORIGINAL CONTRACT SUM		$ 46,184.75
Net change by Change Orders		$ 0.00
CONTRACT SUM TO DATE (Line 1 ± 2)		$ 46,184.75
TOTAL COMPLETED & STORED TO DATE (Column G on G703)		$ 46,184.75
RETAINAGE:		
a. 10 % of Completed Work (Column D + E on G703)	$ 4,618.48	
b. ___ % of Stored Material (Column F on G703)	$	
Total Retainage (Lines 5a + 5b or Total in Column I of G703)		$ 4,618.48
TOTAL EARNED LESS RETAINAGE (Line 4 Less Line 5 Total)		$ 41,566.27
LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)		$ 41,566.27
CURRENT PAYMENT DUE		$ 0.00
BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)		$

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	-0-	-0-
Total approved this Month	-0-	-0-
TOTALS	-0-	-0-
NET CHANGES by Change Order	-0-	

CONTRACTOR: C.A. MEYER PAVING & CONSTRUCTION CO.

By: JAMES E. MEYER Date: 5/31/01

State of: FLORIDA County of: ORANGE

Subscribed and sworn to before me this 31ST day of MAY 2001

Notary Public: Jamie Dickerson

My Commission expires: 8/26/03

Jamie Dickerson MY COMMISSION # CC866938 EXPIRES August 26, 2003 BONDED THRU TROY FAIN INSURANCE, INC.

ENGINEER'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the application, the Architect certifies to the Owner that to the best of the Engineer's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED ..... $

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.)

ENGINEER: EXCEL ENGINEERING CONSULTANTS

By: Date:

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

Meyer Job No. 00-22

1801 Lee Road, Suite 301
Winter Park, FL 32789

Owner: CWS Communities Trust

Draw Schedule No. 7

DESCRIPTION	CONTRACT AMOUNTS				PREVIOUS ESTIMATES		THIS ESTIMATE		TOTAL TO DATE	
	QUANTITY	UNIT	UNIT PR.	EXTENSION	QUANTITY	AMOUNT	QUANTITY	AMOUNT	QUANTITY	AMOUNT
****** MOBILIZATION ******										
RENTALS										
BARRICADES	1	LS	$500 00	$500 00	1	$500 00	0	$0 00	1	$500 00
EQUIPMENT & MISC.	1	LS	$1,000 00	$1,000 00	1	$1,000 00	0	$0 00	1	$1,000 00
**** SURVEYING ****										
LAYOUT	1	LS	$1,000 00	$1,000.00	1	$1,000 00	0	$0 00	1	$1,000 00
** CLEARING **										
SILT FENCE	100	LF	$2 00	$200.00	100	$200.00	0	$0 00	100	$200.00
DEMO ASPHALT & CURB	1	LS	$10,500.00	$10,500 00	1	$10,500.00	0	$0 00	1	$10,500.00
** EARTHWORK **										
EXCAVATION	296	CY	$3 50	$1,036 00	296	$1,036 00	0	$0 00	296	$1,036.00
** SUBGRADE WORK **										
12" STABILIZED SUBGRADE	1,880	SY	$1 75	$3,290 00	1880	$3,290.00	0	$0.00	1,880	$3,290.00
** BASE WORK **										
5" SOIL CEM.	1,225	SY	$5.80	$7,105.00	1225	$7,105.00	0	$0.00	1,225	$7,105.00
LIMEROCK ROAD	100		$6 50	$650 00	100	$650.00	0	$0.00	100	$650.00
7 1/2" BASE	381	SY	$7.50	$2,857.50	381	$2,857.50	0	$0.00	381	$2,857.50
ASPHALT PAVING										
SAW-CUT EXISTING ROAD	40	LF	$1.75	$70 00	40	$70.00	0	$0.00	40	$70.00
1-1/2" TYP-I ROADWAYS	1,225	SY	$4 25	$5,206 25	1225	$5,206.25	0	$0.00	1,225	$5,206.25
CURB WORK										
MIAMI CURB	275	LF	$5.60	$1,540 00	275	$1,540.00	0	$0 00	275	$1,540.00
FLAT WORK										
DRIVEWAYS	1,485	LF	$3 50	$5,197 50	1485	$5,197.50	0	$0.00	1,485	$5,197.50
**** GRADE OUT ****										
RIGHT OF WAY	3,325	SY	$0.40	$1,330.00	3325	$1,330.00	0	$0.00	3,325	$1,330.00
FINISH WORK										
SOD SWALE - BAHIA	2,850	SY	$1 65	$4,702 50	2850	$4,702.50	0	$0 00	2,850	$4,702.50
** INCIDENTAL SIGNS AND MISC. **										
STRIPING & SIGNAGE	NONE		$0 00	$0 00	0	$0.00	0	$0 00	0	$0 00
TOTAL CONTRACT AMOUNTS>>>>>				$46,184.75		$46,184.75		$0.00		$46,184.75

Project: Palm Valley - Christmas Palm Place Meyer Job No. 00-22 Owner: CWS Communities Trust	C.A. Meyer Paving & Construction Co. 1801 Lee Road, Suite 301 Winter Park, FL 32789 Draw Schedule No. 7	DATE: 05/31/01

****CONTRACT SUMMARY BY CATEGORY****

CATEGORY	CONTRACT AMOUNT		AMOUNT COMPLETED		% COMPLETE
MOBILIZATION TOTAL	$1,500 00		$1,500 00		100%
SURVEYING TOTAL	$1,000 00		$1,000.00		100%
CLEARING TOTAL	$10,700 00		$10,700.00		100%
EARTHWORK TOTAL	$1,036 00		$1,036 00		100%
SUBGRADE TOTAL	$3,290.00		$3,290 00		100%
BASE WORK TOTAL	$10,612.50		$10,612 50		100%
ASPHALT PAVING TOTAL	$5,276 25		$5,276 25		100%
CURB WORK TOTAL	$1,540 00		$1,540 00		100%
FLAT WORK TOTAL	$5,197 50		$5,197 50		100%
GRADE OUT TOTAL	$1,330 00		$1,330 00		100%
FINISH WORK TOTAL	$4,702.50		$4,702 50		100%
INCIDENTAL SIGNS & MISC.	$0.00		$0.00		100%
GRAND TOTAL >>>>>>>>>>	$46,184.75		$46,184.75		100%

SUBDIVISION DEVELOPMENT COSTS

RESIDENTIAL STREET IMPROVEMENTS

Costs for residential street improvements vary greatly due to local code requirements for different materials, street types and layouts, and utilities. The following costs are averages including ordinary charges for engineering, plans and inspection. Costs include contractors' overhead and profit but not developers,' which is realized when each lot or house is sold. They do not include extensive environmental impact reports, special charges (impact or entitlement) or assessments sometimes levied against the subdivider such as annexation charges, or costs of new or existing trunk sewers. They assume that the utilities are at or near the subdivision boundary with no special connection problems or costs. Single-lot unit costs, industrial access streets or individual cul-de-sac developments can run 30% to 70% higher. Do not apply these factors to large parking lot paving.

STREET IMPROVEMENTS	Cost Range	Average Unit Cost	Per Lin. Ft. Typical 40' Street
* Grading and surplus disposal, sq. ft.	$ .13 – $ .35	$ .21	$ 12.60
* 4" rock base, sq. ft.	.41 – .52	.46	18.40
add or deduct per inch of variation	.06 – .10	.08	3.20
6" cement treated base, sq. ft.	.53 – .80	.65	26.00
add or deduct per inch of variation	.08 – .11	.09	3.60
* Paving, 4" asphaltic concrete, sq. ft.	1.23 – 1.48	1.35	54.00
add or deduct per inch of variation	.24 – 31	.27	10.80
Paving, 6" concrete, sq. ft.	1.96 – 3.26	2.53	101.20
add or deduct per inch of variation	.25 – .44	.33	13.20
Concrete curb 6", no gutter, lin. ft.	5.15 – 9.45	7.00	14.00
* Concrete curb 6", 1' gutter	7.70 – 12.00	9.60	19.20
Concrete curb 6", 2' gutter	8.85 – 13.55	10.95	21.90
Concrete curb 8", add to 6" costs	.83 – .94	.88	1.76
Asphalt berm 4", lin. ft.	4.55 – 5.15	4.85	9.70
Granite curb 5", lin. ft.	19.50 – 23.40	21.35	42.70
Concrete curb, rolled, lin. ft.	4.59 – 7.47	5.86	11.72
* Concrete cross gutter, at intersection, sq. ft.	3.90 – 5.34	4.57	2.29
* Concrete sidewalk, 4" thick, sq. ft.	2.31 – 3.65	2.90	23.20
add or deduct per inch of variation	.25 – .39	.31	2.48
* Concrete aprons, 6" thick, sq. ft.	2.63 – 4.14	3.30	7.60
add or deduct per inch of variation	.26 – .40	.32	.74
Sewer main, 9' average depth, lin. ft.			
add or deduct per foot of depth	.37 – 1.34	.70	.70
* 8" vitrified clay	20.40 – 24.80	22.50	22.50
8" asbestos cement	13.25 – 18.25	15.55	15.55
8" plastic	10.70 – 14.95	12.65	12.65
add or deduct per inch of diameter	1.65 – 4.55	2.75	2.75
Sewer laterals, 5' average depth, lin. ft.			
* 4" vitrified clay	10.00 – 12.15	11.00	11.00
6" vitrified clay	14.25 – 17.45	15.75	15.75
* Sewer clean outs, 60' o.c., each	390 – 665	510	17.00
* Sewer manholes, 400' o.c., each	1,450 – 2,050	1,725	4.31
Storm drainage, lin. ft.			
18" reinforced concrete	35.20 – 45.00	39.80	39.80
18" corrugated metal	27.00 – 37.25	31.70	31.70
add [illegible]duct per inch of diameter	1.05 – 3.10	1.80	1.80
Storm manholes, 400' o.c., each	1,450 – 2,425	1,875	4.69

LIGHTING AND PUBLIC UTILITIES

Water, gas and electric costs vary considerably with local requirements and codes. Often all or a portion of the initial cost, maintenance and replacement is included in an assessment or increased utility rate charged to the consumer. Sometimes an additional charge is made in remote or hilly areas for special service or additional equipment. These requirements should be checked locally. The average costs below are approximate maximum costs for a typical subdivision, all or part of which may be borne by the community or secured against the property. Some of these costs may be refundable to the developer. Specific pipe costs can be found in Section 62. For general site clearing and grading, see Section 51. For septic tanks, see Section 53.

PUBLIC UTILITIES	Cost Range	Average Unit Cost	Per Lin. Ft. Typical 40' Street
* Water main, 6" ductile iron, lin. ft.	$ 21.45 – $ 24.85	$23.10	$23.10
6" asbestos cement	23.55 – 28.35	25.85	25.85
6" steel	24.05 – 28.75	26.30	26.30
6" plastic	14.65 – 18.65	16.55	16.55
add or deduct per inch of diameter	1.55 – 4.75	2.75	2.75
* Water lateral, 1", lin. ft.	8.75 – 11.00	9.80	9.80
* Water meters, 60' o.c., each	140 – 315	210	7.00
* Fire hydrants, 300' o.c., each	1,775 – 2,625	2,150	7.17
* Gas main, 2" steel, lin. ft.	8.35 – 9.50	8.90	8.90
3" steel	10.80 – 12.35	11.55	11.55
4" plastic	10.70 – 13.00	11.80	11.80
* Gas lateral, 3/4", lin. ft.	5.45 – 7.90	6.55	6.55
Electricity, overhead, on poles, lin. ft.	9.90 – 17.65	13.20	13.20
Electrical lateral, lin. ft.	2.80 – 3.90	3.30	3.30
* Electricity, underground, in conduit, lin. ft.	12.15 – 19.80	15.50	15.50
* Electrical lateral, lin. ft.	7.50 – 12.85	9.80	9.80
* Telephone lateral, underground	5.35 – 8.50	6.75	6.75
Trench only, lin. ft.	3.25 – 6.55	4.60	4.60
Conduit only, lin. ft.	2.80 – 5.75	4.00	4.00
* Street light, underground wiring, 200' o.c., each	1,200 – 4,100	2,225	11.13
Street lights, overhead wiring, 200' o.c., each	800 – 2,050	1,275	6.38

Catch basins ..... $1,025 to $1,150 plus $225 to $275 per foot of depth.
Concrete headwalls .... $415 plus $50 to $75 per inch of pipe diameter.
Gunite, 2" – 3", surfacing for open drains ..... $ 3.00 to $ 4.85 per sq. ft.
Soil cement, roads ..... $ .55 to $ .65 per cu. ft.
embankments ..... $ .75 to $ 1.35 per cu. ft.
slopes ..... $ 2.25 to $ 4.00 per cu. ft.
Slope protection, netting, mats or fabric ..... $ .06 to $ .70 per sq. ft.
Street signs ..... $ 75.00 to $260.00 each
Survey monuments ..... $125.00 to $325.00 each

*The cost of complete double-loaded street improvements with the components indicated above totals $275.00 to $325.00 per linear foot of street in ordinary level subdivisions, or from $175.00 to $225.00 per front foot of lot, including side street allowance. Costs may run twice as much for extreme hillside conditions.

025 800 | Pavement Marking

			CREW	DAILY OUTPUT	LABOR-HOURS	UNIT	1997 BARE COSTS MAT.	LABOR	EQUIP.	TOTAL	TOTAL INCL O&P	
804	0660	Removal	A1	360	.022	L.F.	.48	.45	.17	1.10	1.43	804
	0680	Temporary tape, white		776	.010		1.12	.21	.08	1.41	1.65	
	0700	Yellow		679	.012		.22	.24	.09	.55	.72	
	0710	Thermoplastic, white or yellow, 4" wide	B-79	15,000	.003		.64	.06	.04	.74	.85	
	0730	6" wide		14,000	.003		.93	.06	.05	1.04	1.17	
	0740	8" wide		12,000	.003		1.25	.07	.05	1.37	1.55	
	0750	12" wide		6,000	.007		1.87	.14	.11	2.12	2.39	
	0760	Arrows		660	.061	S.F.	1.40	1.26	.99	3.65	4.61	
	0770	Gore lines		2,500	.016		.90	.33	.26	1.49	1.80	
	0780	Letters		660	.061		1.36	1.26	.99	3.61	4.57	
	0790	Layout of pavement marking	A2	25,000	.001	L.F.		.02	.01	.03	.04	
	0800	Parking stall, paint, white	B-78	860	.056	Stall	1.75	1.16	.58	3.49	4.39	
	1000	Street letters and numbers	"	1,600	.030	S.F.	.27	.62	.31	1.20	1.62	
810	0010	TRAFFIC CONTROL DEVICES										810
	0100	Traffic channelizing pavement markers, layout only	A7	2,000	.012	Ea.		.27		.27	.42	
	0110	13"x7-1/2"x2-1/2" high, non plowable install	2 Clab	96	.167		17	3.38		20.38	24	
	0200	8" x 8"x 3-1/4" high, non-plowable, install		96	.167		18	3.38		21.38	25	
	0230	4" x 4" x 3/4" high, non-plowable, install		120	.133		1.62	2.70		4.32	6.05	
	0240	9-1/4" x 5-7/8" x 1/4" high, plowable, concrete pav't	A-2A	70	.343		13.85	7	3.89	24.74	30.50	
	0250	9-1/4" x 5-7/8" x 1/4" high, plowable, asphalt pav't	"	120	.200		1.75	4.10	2.27	8.12	10.90	
	0300	Barrier and curb delineators,reflectorized, 2" x 4"	2 Clab	150	.107		1.15	2.16		3.31	4.70	
	0310	3" x 5"	"	150	.107		2.45	2.16		4.61	6.15	
	0500	Rumble strip, polycarbonate										
	0510	24" x 3-1/2" x 1/2" high	2 Clab	50	.320	Ea.	4.55	6.50		11.05	15.30	

026 | Piped Utilities

026 010 | Piped Utilities

			CREW	DAILY OUTPUT	LABOR-HOURS	UNIT	1997 BARE COSTS MAT.	LABOR	EQUIP.	TOTAL	TOTAL INCL O&P	
012	0010	BEDDING For pipe and conduit, not incl. compaction										012
	0050	Crushed or screened bank run gravel	B6	150	.160	C.Y.	12.55	3.53	1.44	17.52	21	
	0100	Crushed stone 3/4" to 1/2"		150	.160		13.50	3.53	1.44	18.47	22	
	0200	Sand, dead or bank		150	.160		3.90	3.53	1.44	8.87	11.35	
	0500	Compacting bedding in trench	A1	90	.089			1.80	.67	2.47	3.60	
014	0010	EXCAVATION AND BACKFILL See division 022-204 & 254										014
	0100	Hand excavate and trim for pipe bells after trench excavation										
	0200	8" pipe	1 Clab	155	.052	L.F.		1.05		1.05	1.66	
	0300	18" pipe	"	130	.062	"		1.25		1.25	1.98	

026 050 | Manholes & Cleanouts

054	0010	UTILITY VAULTS Precast concrete, 6" thick										054
	0050	5' x 10' x 6' high, I.D.	B-13	2	28	Ea.	1,800	615	266	2,681	3,225	
	0100	6' x 10' x 6' high, I.D.		2	28		1,850	615	266	2,731	3,300	
	0150	5' x 12' x 6' high, I.D.		2	28		1,975	615	266	2,856	3,425	
	0200	6' x 12' x 6' high, I.D.		1.80	31.111		2,200	685	296	3,181	3,825	
	0250	6' x 13' x 6' high, I.D.		1.50	37.333		2,900	820	355	4,075	4,900	
	0300	8' x 14' x 7' high, I.D.		1	56		3,125	1,225	530	4,880	5,950	
	0350	Hand hole, precast concrete, 1-1/2" thick										

026 050 | Manholes & Cleanouts

			CREW	DAILY OUTPUT	LABOR-HOURS	UNIT	1997 BARE COSTS MAT.	LABOR	EQUIP.	TOTAL	TOTAL INCL O&P
054	0400	1'-0" x 2'-0" x 1'-9", I.D., light duty	B1	4	6	Ea.	270	126		396	495
	0450	4'-6" x 3'-2" x 2'-0", O.D., heavy duty	B6	3	8	"	570	177	72	819	985

026 450 | Hydrants

454	0010	PIPING, WATER DISTRIBUTION Mech. joints unless noted									
	1000	Fire hydrants, two way; excavation and backfill not incl.									
	1100	4-1/2" valve size, depth 2'-0"	B-21	10	2.800	Ea.	735	66.50	10.85	812.35	925
	1120	2'-6"		10	2.800		760	66.50	10.85	837.35	950
	1140	3'-0"		10	2.800		785	66.50	10.85	862.35	980
	1300	7'-0"		6	4.667		1,100	111	18.10	1,229.10	1,425
	2400	Lower barrel extensions with stems, 1'-0"	B-20	14	1.714		245	39.50		284.50	335
	2480	3'-0"	"	12	2		355	46		401	465

026 650 | Water Systems

652	0010	CORROSION RESISTANCE Wrap & coat, add to pipe, 4" dia.				L.F.	1.26			1.26	1.39
	0040	6" diameter					1.32			1.32	1.45
	0060	8" diameter					2.05			2.05	2.26
	0100	12" diameter					3.05			3.05	3.35
	0200	24" diameter					5.80			5.80	6.35
	0500	Coating, bituminous, per diameter inch, 1 coat, add					.23			.23	.25
	0540	3 coat					.35			.35	.39
	0560	Coal tar epoxy, per diameter inch, 1 coat, add					.15			.15	.17
	0600	3 coat					.27			.27	.30
686	0010	PIPING, WATER DISTRIBUTION SYSTEMS Pipe laid in trench,									
	0020	excavation and backfill not included									
	1400	Ductile iron, cement lined, class 50 water pipe, 18' lengths									
	410	Mechanical joint, 4" diameter	B-20	144	.167	L.F.	7.55	3.84		11.39	14.45
	1420	6" diameter	"	126	.190		8.60	4.39		12.99	16.40
	1430	8" diameter	B-21	108	.259		11.40	6.15	1.01	18.56	23.50
	1440	10" diameter		90	.311		14.95	7.40	1.21	23.56	29.50
	1450	12" diameter CN		72	.389		18.90	9.20	1.51	29.61	37
	1460	14" diameter		54	.519		23.50	12.30	2.01	37.81	47.50
	1470	16" diameter		46	.609		27	14.45	2.36	43.81	55
	1480	18" diameter	B-22	38	.789		29	18.95	4.29	52.24	66
	1490	24" diameter	"	36	.833		47	20	4.53	71.53	88
	1550	Push on joint, 4" diameter	B-20	158	.152		6.40	3.50		9.90	12.60
	1560	6" diameter	"	138	.174		7.15	4.01		11.16	14.20
	1570	8" diameter	B-21	118	.237		9.30	5.65	.92	15.87	20
	1580	10" diameter		100	.280		12.35	6.65	1.09	20.09	25.50
	1590	12" diameter		80	.350		15.70	8.30	1.36	25.36	32
	1600	14" diameter		60	.467		19.55	11.05	1.81	32.41	41
	1610	16" diameter		54	.519		22.50	12.30	2.01	36.81	46.50
	1620	18" diameter	B-22	44	.682		27	16.35	3.71	47.06	59.50
	1630	20" diameter		42	.714		28	17.15	3.89	49.04	62
	1640	24" diameter		40	.750		36.50	18	4.08	58.58	73
	1950	Butterfly valves with boxes, cast iron									
	1970	4" diameter	B-20	6	4	Ea.	470	92		562	660
	1990	6" diameter	"	5	4.800		495	111		606	720
	2010	8" diameter	B-21	4	7		675	166	27	868	1,025
	2030	10" diameter		3.50	8		985	190	31	1,206	1,400
	2050	12" diameter		3	9.333		1,250	221	36	1,507	1,800
	2070	14" diameter		2	14		2,325	330	54.50	2,709.50	3,125
	2090	16" diameter		2	14		2,850	330	54.50	3,234.50	3,725
	2650	Polyvinyl chloride pipe, class 160, S.D.R.-26, 1-1/2" diameter	B-20	300	.080	L.F.	.52	1.84		2.36	3.50
	2700	2" diameter		250	.096		1.13	2.21		3.34	4.75

026 650 | Water Systems

		CREW	DAILY OUTPUT	LABOR-HOURS		1997 BARE COSTS				TOTAL INCL O&P	
								EQUIP.	TOTAL		
686 2750	2-1/2" diameter	B-20	250	.096		1.46	2.21		3.67	5.10	686
2800	3" diameter		200	.120		1.85	2.76		4.61	6.45	
2850	4" diameter		200	.120		2.68	2.76		5.44	7.35	
2900	6" diameter		180	.133		5.40	3.07		8.47	10.85	
2950	8" diameter	B-21	160	.175		10.55	4.15	.68	15.38	18.90	
8000	Fittings, ductile iron, mechanical joint										
8010	90° bend 4" diameter	B-20	37	.649	Ea.	95.50	14.95		110.45	129	
8020	6" diameter		25	.960		126	22		148	174	
8040	8" diameter		21	1.143		205	26.50		231.50	267	
8060	10" diameter	B-21	21	1.333		263	31.50	5.15	299.65	345	
8080	12" diameter		18	1.556		345	37	6.05	388.05	445	
8100	14" diameter		16	1.750		560	41.50	6.80	608.30	695	
8120	16" diameter		14	2		635	47.50	7.75	690.25	785	
8140	18" diameter		10	2.800		975	66.50	10.85	1,052.35	1,200	
8160	20" diameter		8	3.500		1,100	83	13.60	1,196.60	1,375	
8180	24" diameter		6	4.667		1,450	111	18.10	1,579.10	1,800	
8200	Wye or tee, 4" diameter	B-20	25	.960		138	22		160	187	
8220	6" diameter		17	1.412		191	32.50		223.50	262	
8240	8" diameter		14	1.714		271	39.50		310.50	360	
8260	10" diameter	B-21	14	2		430	47.50	7.75	485.25	560	
8280	12" diameter		12	2.333		560	55.50	9.05	624.55	715	
8300	14" diameter		10	2.800		690	66.50	10.85	767.35	875	
8320	16" diameter		8	3.500		965	83	13.60	1,061.60	1,200	
8340	18" diameter		6	4.667		1,425	111	18.10	1,554.10	1,775	
8360	20" diameter		4	7		1,650	166	27	1,843	2,100	
8380	24" diameter		3	9.333		2,225	221	36	2,482	2,850	

026 700 | Water Wells

0010	WELLS Domestic water, drilled and cased, including casing										704
0100	4" to 6" diameter	B-23	160	.250	V.L.F.	8.45	5.15	3.85	17.45	21.50	
0200	8" diameter	"	127	.315	"	11.90	6.50	4.85	23.25	28.50	
0400	Gravel pack well, 40' deep, incl. gravel & casing, complete										
0500	24" diameter casing x 18" diameter screen	B-23	.13	307	T			4,750	31,100	37,200	
0600	36" diameter casing x 18" diameter screen		.12	333						39,700	
0800	Observation wells, 1-1/4" riser pipe		163	.245	V		5.05	3.78	19.03	23.50	
0900	For flush Buffalo roadway box, add	1 Skwk	16.60	.482					40.30	50.50	
1200	Test well, 2-1/2" diameter, up to 50' deep (15 to 50 GPM)	B-23	1.51	26.490	"	445	545	0	1,400	1,800	
1300	Over 50' deep, add	"	121.80	.328	L.F.	13.35	6.80	5.05	25.20	31	
1500	Pumps, installed in wells to 100' deep, 4" submersible										
1510	1/2 H.P.	Q-1	3.22	4.969	Ea.	355	137		492	605	
1520	3/4 H.P.		2.66	6.015		390	166		556	680	
1600	1 H.P.		2.29	6.987		400	193		593	735	
1700	1-1/2 H.P.	Q-22	1.60	10		490	276	271	1,037	1,250	
1800	2 H.P.		1.33	12.030		535	330	325	1,190	1,450	
1900	3 H.P.		1.14	14.035		705	390	380	1,475	1,775	
2000	5 H.P.		1.14	14.035		790	390	380	1,560	1,875	
3000	Pump, 6" submersible, 25' to 150' deep, 25 H.P., 249 to 297 GPM		.89	17.978		3,600	495	485	4,580	5,250	
3100	25' to 500' deep, 30 H.P., 100 to 300 GPM		.73	21.918		4,100	605	595	5,300	6,075	
9950	See div. 021-444 for wellpoints										
9960	See div. 021-484 for drainage wells										

026 800 | Fuel Distribution

804 0010	GAS STATION PRODUCT LINE										804
0020	Primary containment pipe, fiberglass-reinforced										
0030	Plastic pipe 15' & 30' lengths										
0040	2" diameter	Q-6	425	.056	L.F.	2.99	1.63		4.62	5.75	

027 100 | Subdrainage Systems

			CREW	DAILY OUTPUT	LABOR-HOURS	UNIT	1997 BARE COSTS MAT.	LABOR	EQUIP.	TOTAL	TOTAL INCL O&P
112	0010	PIPING, SUBDRAINAGE, VITRIFIED CLAY									
	0020	Not including excavation and backfill									
	3000	Perforated, 5' lengths, C700, 4" diameter	B20	400	.060	L.F.	1.64	1.38		3.02	3.99
	3020	6" diameter		315	.076		2.82	1.75		4.57	5.90
	3040	8" diameter		290	.083		3.64	1.91		5.55	7.05
	3060	12" diameter	B21	275	.102		7.85	2.42	.40	10.67	12.90
	4000	Channel pipe, 4" diameter	B20	430	.056		1.85	1.29		3.14	4.08
	4020	6" diameter		335	.072		2.85	1.65		4.50	5.75
	4060	8" diameter		295	.081		4.25	1.87		6.12	7.65
	4080	12" diameter	B21	280	.100		9.20	2.37	.39	11.96	14.25
114	0010	PIPING, SUBDRAINAGE, POLYVINYL CHLORIDE									
	0020	Perforated, price as solid pipe, division 027-168									

027 150 | Sewage Systems

			CREW	DAILY OUTPUT	LABOR-HOURS	UNIT	MAT.	LABOR	EQUIP.	TOTAL	TOTAL INCL O&P
152	0010	CATCH BASINS OR MANHOLES not including footing, excavation,									
	0020	Frame and cover									
	0050	Brick, 4' inside diameter, 4' deep	D1	1	16	Ea.	279	375		654	890
	0100	6' deep		.70	22.857		390	535		925	1,250
	0150	8' deep		.50	32		490	750		1,240	1,725
	0200	For depths over 8', add		4	4	V.L.F.	99	93.50		192.50	255
	0400	Concrete blocks (radial), 4' I.D., 4' deep		1.50	10.667	Ea.	290	249		539	710
	0500	6' deep		1	16		375	375		750	1,000
	0600	8' deep		.70	22.857		495	535		1,030	1,375
	0700	For depths over 8', add		5.50	2.909	V.L.F.	72.50	68		140.50	186
	0800	Concrete, cast in place, 4' x 4', 8" thick, 4' deep	B6	2	12	Ea.	395	265	108	768	970
	0900	6' deep		1.50	16		565	355	144	1,064	1,325
	1000	8' deep		1	24		650	530	216	1,396	1,775
	1100	For depths over 8', add		8	3	V.L.F.	86.50	66	27	179.50	229
	1110	Precast, 4' I.D., 4' deep		4.10	5.854	Ea.	400	129	52.50	581.50	700
	1120	6' deep		3	8		560	177	72	809	970
	1130	8' deep		2	12		695	265	108	1,068	1,300
	1140	For depths over 8', add		16	1.500	V.L.F.	83.50	33	13.50	130	159
	1150	5' I.D., 4' deep		3	8	Ea.	445	177	72	694	845
	1160	6' deep		2	12		605	265	108	978	1,200
	1170	8' deep		1.50	16		760	355	144	1,259	1,550
	1180	For depths over 8', add		12	2	V.L.F.	99	44	18	161	198
	1190	6' I.D., 4' deep		2	12	Ea.	730	265	108	1,103	1,350
	1200	6' deep		1.50	16		950	355	144	1,449	1,750
	1210	8' deep		1	24		1,175	530	216	1,921	2,350
	1220	For depths over 8', add		8	3	V.L.F.	153	66	27	246	300
	1250	Slab tops, precast, 8" thick									
	1300	4' diameter manhole	B6	8	3	Ea.	109	66	27	202	254
	1400	5' diameter manhole		7.50	3.200		122	70.50	29	221.50	277
	1500	6' diameter manhole		7	3.429		209	75.50	31	315.50	380
	1600	Frames and covers, C.I., 24" square, 500 lb.		7.80	3.077		210	68	27.50	305.50	370
	1700	26" D shape, 600 lb.		7	3.429		212	75.50	31	318.50	385
	1800	Light traffic, 18" diameter, 100 lb.		10	2.400		86	53	21.50	160.50	202
	1900	24" diameter, 300 lb.		8.70	2.759		172	61	25	258	310
	2000	36" diameter, 900 lb.		5.80	4.138		380	91.50	37	508.50	605
	2100	Heavy traffic, 24" diameter, 400 lb.		7.80	3.077		188	68	27.50	283.50	345
	2200	36" diameter, 1150 lb.		3	8		515	177	72	764	925
	2300	Mass. State standard, 26" diameter, 475 lb.		7	3.429		207	75.50	31	313.50	380
	2400	30" diameter, 620 lb.		7	3.429		292	75.50	31	398.50	470
	0	Watertight, 24" diameter, 350 lb.		7.80	3.077		380	68	27.50	475.50	550
	2600	26" diameter, 500 lb.		7	3.429		282	75.50	31	388.50	460
	2700	32" diameter, 575 lb.		6	4		385	88.50	36	509.50	605

	TOTAL INCL O&P	
		152
1	1,400	
1	196	
1	237	
5.60	117	
5.85	176	
3.70	225	
1.50	256	
3.50	165	
1	385	
8.50	253	
3.35	17.10	
7.40	21.50	
6.70	21	
7.75	22	
		162
7.04	9.50	
7.60	9.95	
8.54	11.20	
9.49	12.25	
0.55	13.50	
1.90	15	
3.83	17.20	
5.88	19.45	
12.55	15.70	
13.38	16.70	
16.08	19.80	
19.31	23.50	
24.29	29	
27.96	33.50	
44.55	55.50	
50.50	74.50	
71	86.50	
86.05	104	
24.10	149	
66.30	198	
54.15	298	
12.50	370	
11.65	14.70	
13.28	16.60	
15.68	19.35	
21.58	26	
41.05	52	
56.50	70	
79.55	96	
78.30	211	
40.07	45.50	
44.98	51.50	
53.84	61.50	
67.78	78	

027 150 | Sewage Systems

			CREW	DAILY OUTPUT	LABOR-HOURS	UNIT	1997 BARE COSTS MAT.	LABOR	EQUIP.	TOTAL	TOTAL INCL O&P	
164		Corrugated galvanized or alum. oval arch culverts, coated & paved										164
	3020	17" x 13" 16 ga., 15" equivalent	B-22	200	.150	L.F.	11.95	3.60	.82	16.37	19.65	
	3040	21" x 15" 16 ga., 18" equivalent		150	.200		21	4.80	1.09	26.89	32	
	3060	28" x 20" 14 ga., 24" equivalent		125	.240		24	5.75	1.31	31.06	37	
	3080	35" x 24" 14 ga., 30" equivalent		100	.300		37.50	7.20	1.63	46.33	54.50	
	3100	42" x 29" 12 ga., 36" equivalent	B-13	100	.560		39.50	12.30	5.30	57.10	68.50	
	3120	49" x 33" 12 ga., 42" equivalent		90	.622		45.50	13.70	5.90	65.10	78	
	3140	57" x 38" 12 ga., 48" equivalent		70	.800		52	17.60	7.60	77.20	93.50	
	3160	Steel, plain oval arch culverts, plain										
	3180	17" x 13" 16 ga., 15" equivalent	B-22	225	.133	L.F.	7.85	3.20	.73	11.78	14.50	
	3200	21" x 15" 16 ga., 18" equivalent		175	.171		12.35	4.11	.93	17.39	21	
	3220	28" x 20" 14 ga., 24" equivalent		150	.200		14.60	4.80	1.09	20.49	25	
	3240	35" x 24" 14 ga., 30" equivalent		108	.278		23.50	6.65	1.51	31.66	38	
	3260	42" x 29" 12 ga., 36" equivalent	B-13	108	.519		36	11.40	4.93	52.33	63	
	3280	49" x 33" 12 ga., 42" equivalent		92	.609		42.50	13.40	5.80	61.70	74	
	3300	57" x 38" 12 ga., 48" equivalent		75	.747		53	16.40	7.10	76.50	92.50	
	3320	End sections, 17" x 13"		22	2.545	Ea.	34	56	24	114	152	
	3340	42" x 29"		17	3.294	"	172	72.50	31.50	276	340	
	3360	Multi-plate arch, steel	B-20	1,690	.014	Lb.	.66	.33		.99	1.25	
168	0010	PIPING, DRAINAGE & SEWAGE, POLYVINYL CHLORIDE										168
	0020	Not including excavation or backfill										
	2000	10' lengths, S.D.R. 35, 4" diameter	B-20	375	.064	L.F.	1.68	1.47		3.15	4.19	
	2040	6" diameter		350	.069		3.23	1.58		4.81	6.05	
	2080	8" diameter		335	.072		2.53	1.65		4.18	5.40	
	2120	10" diameter	B-21	330	.085		3.67	2.01	.33	6.01	7.60	
	2160	12" diameter		320	.087		5.05	2.08	.34	7.47	9.20	
	2200	15" diameter		190	.147		10.70	3.50	.57	14.77	17.95	
	0010	PIPING, DRAINAGE & SEWAGE, VITRIFIED CLAY C700										172
	0020	Not including excavation or backfill,										
	4030	Extra strength, compression joints, C425										
	5000	4" diameter x 4' long	B-20	265	.091	L.F.	2.01	2.09		4.10	5.50	
	5020	6" diameter x 5' long	"	200	.120		3.06	2.76		5.82	7.75	
	5040	8" diameter x 5' long	B-21	200	.140		4.57	3.32	.54	8.43	10.90	
	5060	10" diameter x 5' long		190	.147		7.40	3.50	.57	11.47	14.30	
	5080	12" diameter x 6' long		150	.187		7.85	4.43	.72	13	16.45	
	5100	15" diameter x 7' long		110	.255		16.10	6.05	.99	23.14	28.50	
	5120	18" diameter x 7' long		88	.318		24	7.55	1.23	32.78	40	
	5140	24" diameter x 7' long		45	.622		49.50	14.75	2.41	66.66	80.50	
	5160	30" diameter x 7' long	B-22	31	.968		52	23	5.25	80.25	99.50	
	5180	36" diameter x 7' long		20	1.500		80	36	8.15	124.15	153	
	6000	3' lengths, add to above					30%					
	6020	2' lengths, add to above					40%					
	6040	For die cast slip joints compared to premium joints					90%					
	6060	For plain joints compared to compression joints					75%					
	7060	2' lengths, add to above					40%					
174	0010	SEWAGE PUMPING STATIONS Prefabricated steel, concrete										174
	0020	or fiberglass, 200 GPM	C-17D	.17	494	Total	26,500	13,400	3,175	43,075	54,000	
	0200	1,000 GPM		.07	1,200		39,300	32,400	7,725	79,425	103,000	
	0500	Add for generator unit, 200 GPM, steel		.34	247		20,300	6,675	1,600	28,575	34,700	
	0600	Concrete		.51	164		12,800	4,450	1,050	18,300	22,400	
	1000	Add for generator unit, 1,000 GPM, steel		.30	280		21,500	7,575	1,800	30,875	37,700	
	1200	Concrete		.38	221		18,100	5,975	1,425	25,500	31,000	
	1500	For drilled water well, if required, add	B-23	.50	80		5,200	1,650	1,225	8,075	9,700	
	0010	SEWAGE TREATMENT Not incl. fencing or external piping										176
	0020	Steel packaged, blown air aeration plants										

022 200 | Excav./Backfill/Compact.

		CREW	DAILY OUTPUT	LABOR-HOURS	UNIT	1997 BARE COSTS MAT.	LABOR	EQUIP.	TOTAL	TOTAL INCL O&P	
250 0700	Pits 12' to 18' deep, sandy soil	1 Clab	4	2	C.Y.		40.50		40.50	64.50	250
0900	Heavy soil or clay		2	4			81		81	129	
100	Hand loading trucks from stock pile, sandy soil		12	.667			13.50		13.50	21.50	
1300	Heavy soil or clay		8	1			20.50		20.50	32	
1500	For wet or muck hand excavation, add to above				%				50%	50%	
2000	Machine excavation, for spread and mat footings, elevator pits,										
2001	and small building foundations										
2035	Common earth, hydraulic backhoe, 3/4 C.Y. bucket	B-12F	90	.178	C.Y.		4.51	5	9.51	12.40	
2040	1 C.Y. bucket	B-12A	108	.148			3.76	5.10	8.86	11.35	
2050	1-1/2 C.Y. bucket	B-12B	144	.111			2.82	4.94	7.76	9.75	
2060	2 C.Y. bucket	B-12C	200	.080			2.03	4.87	6.90	8.45	
2070	Sand and gravel, 3/4 C.Y. bucket	B-12F	100	.160			4.06	4.51	8.57	11.15	
2080	1 C.Y. bucket	B-12A	120	.133			3.38	4.58	7.96	10.20	
2090	1-1/2 C.Y. bucket	B-12B	160	.100			2.54	4.44	6.98	8.75	
3000	2 C.Y. bucket	B-12C	220	.073			1.84	4.42	6.26	7.70	
3010	Clay, till, or blasted rock, 3/4 C.Y. bucket	B-12F	80	.200			5.05	5.65	10.70	13.95	
3020	1 C.Y. bucket	B-12A	95	.168			4.27	5.80	10.07	12.90	
3030	1-1/2 C.Y. bucket	B-12B	130	.123			3.12	5.45	8.57	10.75	
3040	2 C.Y. bucket	B-12C	175	.091			2.32	5.55	7.87	9.65	
9010	For mobilization or demobilization, see div. 022-274										
9020	For dewatering, see div. 021-404										
9022	For larger structures, see Bulk Excavation, div. 022-238										
9024	For loading onto trucks, add								15%		
9026	For hauling, see div. 022-266										
9030	For sheeting or soldier beams & lagging, see div. 021-614 & 624										
9040	For trench excavation of strip footings, see div. 022-254										
254 0010	EXCAVATING, TRENCH or continuous footing, common earth										254
0020	No sheeting or dewatering included										
050	1' to 4' deep, 3/8 C.Y. tractor loader/backhoe	B-11C	150	.107	C.Y.		2.51	1.44	3.95	5.50	
0060	1/2 C.Y. tractor loader/backhoe	B-11M	200	.080			1.88	1.46	3.34	4.53	
0090	4' to 6' deep, 1/2 C.Y. tractor loader/backhoe	"	200	.080			1.88	1.46	3.34	4.53	
0100	5/8 C.Y. hydraulic backhoe	B-12Q	250	.064			1.62	1.58	3.20	4.22	
0110	3/4 C.Y. hydraulic backhoe	B-12F	300	.053			1.35	1.50	2.85	3.72	
0300	1/2 C.Y. hydraulic excavator, truck mounted	B-12J	200	.080			2.03	3.03	5.06	6.45	
0500	6' to 10' deep, 3/4 C.Y. hydraulic backhoe, 6' to 10' deep	B-12F	225	.071			1.80	2.01	3.81	4.97	
0510	1 C.Y. hydraulic backhoe	B-12A	400	.040			1.01	1.37	2.38	3.06	
0600	1 C.Y. hydraulic excavator, truck mounted	B-12K	400	.040			1.01	1.95	2.96	3.70	
0610	1-1/2 C.Y. hydraulic backhoe	B-12B	600	.027			.68	1.18	1.86	2.33	
0900	10' to 14' deep, 3/4 C.Y. hydraulic backhoe	B-12F	200	.080			2.03	2.26	4.29	5.60	
0910	1 C.Y. hydraulic backhoe	B-12A	360	.044			1.13	1.53	2.66	3.40	
1000	1-1/2 C.Y. hydraulic backhoe	B-12B	540	.030			.75	1.32	2.07	2.60	
1300	14' to 20' deep, 1 C.Y. hydraulic backhoe	B-12A	320	.050			1.27	1.72	2.99	3.83	
1310	1-1/2 C.Y. hydraulic backhoe	B-12B	480	.033			.85	1.48	2.33	2.92	
1320	2-1/2 C.Y. hydraulic backhoe	B-12S	850	.019			.48	2.03	2.51	2.97	
1400	By hand with pick and shovel 2' to 6' deep, light soil	1 Clab	8	1			20.50		20.50	32	
1500	Heavy soil	"	4	2			40.50		40.50	64.50	
1700	For tamping backfilled trenches, air tamp, add	A-1	100	.080			1.62	.61	2.23	3.24	
1900	Vibrating plate, add		90	.089			1.80	.67	2.47	3.60	
2100	Trim sides and bottom for concrete pours, common earth		600	.013	S.F.		.27	.10	.37	.54	
2300	Hardpan		180	.044	"		.90	.34	1.24	1.80	
2400	Pier and spread footing excavation, add to above				C.Y.				30%	30%	
3000	Backfill trench, F.E. loader, wheel mtd., 1 C.Y. bucket										
3020	Minimal haul	B-10R	400	.030	C.Y.		.74	.58	1.32	1.78	
3040	100' haul	"	200	.060			1.48	1.16	2.64	3.56	
3080	2-1/4 C.Y. bucket, minimum haul	B-10T	600	.020			.49	.71	1.20	1.54	
3090	100' haul	"	300	.040			.98	1.42	2.40	3.08	

022 200 | Excav./Backfill/Compact.

			CREW	DAILY OUTPUT	LABOR-HOURS	UNIT	1997 BARE COSTS MAT.	LABOR	EQUIP.	TOTAL	TOTAL INCL O&P	
258	0010	EXCAVATING, UTILITY TRENCH Common earth										258
	0050	Trenching with chain trencher, 12 H.P., operator walking										
	0100	4" wide trench, 12" deep	B53	800	.010	L.F.		.26	.11	.37	.51	
	0150	18" deep		750	.011			.27	.11	.38	.55	
	0200	24" deep		700	.011			.29	.12	.41	.58	
	0300	6" wide trench, 12" deep		650	.012			.32	.13	.45	.62	
	0350	18" deep		600	.013			.34	.14	.48	.68	
	0400	24" deep		550	.015			.37	.16	.53	.74	
	0450	36" deep		450	.018			.46	.19	.65	.91	
	0600	8" wide trench, 12" deep		475	.017			.43	.18	.61	.86	
	0650	18" deep		400	.020			.51	.21	.72	1.02	
	0700	24" deep		350	.023			.59	.24	.83	1.17	
	0750	36" deep		300	.027			.69	.28	.97	1.36	
	1000	Backfill by hand including compaction, add										
	1050	4" wide trench, 12" deep	A1	800	.010	L.F.		.20	.08	.28	.40	
	1100	18" deep		530	.015			.31	.11	.42	.62	
	1150	24" deep		400	.020			.40	.15	.55	.81	
	1300	6" wide trench, 12" deep		540	.015			.30	.11	.41	.60	
	1350	18" deep		405	.020			.40	.15	.55	.80	
	1400	24" deep		270	.030			.60	.22	.82	1.20	
	1450	36" deep		180	.044			.90	.34	1.24	1.80	
	1600	8" wide trench, 12" deep		400	.020			.40	.15	.55	.81	
	1650	18" deep		265	.030			.61	.23	.84	1.22	
	1700	24" deep		200	.040			.81	.30	1.11	1.62	
	1750	36" deep		135	.059			1.20	.45	1.65	2.40	
	2000	Chain trencher, 40 H.P. operator riding										
	2050	6" wide trench and backfill, 12" deep	B54	1,200	.007	L.F.		.17	.17	.34	.45	
	2100	18" deep		1,000	.008			.21	.21	.42	.54	
	2150	24" deep		975	.008			.21	.21	.42	.55	
	2200	36" deep		900	.009			.23	.23	.46	.60	
	2250	48" deep		750	.011			.27	.28	.55	.72	
	2300	60" deep		650	.012			.32	.32	.64	.83	
	2400	8" wide trench and backfill, 12" deep		1,000	.008			.21	.21	.42	.54	
	2450	18" deep		950	.008			.22	.22	.44	.57	
	2500	24" deep		900	.009			.23	.23	.46	.60	
	2550	36" deep		800	.010			.26	.26	.52	.68	
	2600	48" deep		650	.012			.32	.32	.64	.83	
	2700	12" wide trench and backfill, 12" deep		975	.008			.21	.21	.42	.55	
	2750	18" deep		860	.009			.24	.24	.48	.64	
	2800	24" deep		800	.010			.26	.26	.52	.68	
	2850	36" deep		725	.011			.28	.29	.57	.74	
	3000	16" wide trench and backfill, 12" deep		835	.010			.25	.25	.50	.65	
	3050	18" deep		750	.011			.27	.28	.55	.72	
	3100	24" deep		700	.011			.29	.30	.59	.78	
	3200	Compaction with vibratory plate, add								50%	50%	
262	0010	FILL Spread dumped material, by dozer, no compaction	B10B	1,000	.012	C.Y.		.30	.85	1.15	1.40	262
	0100	By hand	1 Clab	12	.667	"		13.50		13.50	21.50	
	0500	Gravel fill, compacted, under floor slabs, 4" deep	B37	10,000	.005	S.F.	.11	.10	.01	.22	.30	
	0600	6" deep		8,600	.006		.17	.12	.02	.31	.40	
	0700	9" deep		7,200	.007		.28	.14	.02	.44	.56	
	0800	12" deep		6,000	.008		.40	.17	.02	.59	.74	
	1000	Alternate pricing method, 4" deep		120	.400	C.Y.	8.50	8.60	1.18	18.28	24	
	1100	6" deep		160	.300		8.50	6.45	.89	15.84	20.50	
	1200	9" deep		200	.240		8.50	5.15	.71	14.36	18.25	
	1300	12" deep		220	.218		8.50	4.69	.65	13.84	17.40	

REUSE FEASIBILITY REPORT

ZELLWOOD STATION

Wastewater Treatment Facility

Orange County, Florida

GMS No.: 3048-P01438
PERMIT No.: FLA010865
Permit Expiration Date: June 19, 2002

Prepared by:
Excel Engineering Consultants, Inc.
122 Wilshire Boulevard
Casselberry, FL 32707

Prepared for:
Zellwood Station Co-Op, Inc.
2126 Spillman Drive
Zellwood, Florida 32798-9799

April 23, 2001

Zellwood Station Mobile Home Park
Feasibility Study

TABLE OF CONTENTS

1.0 INTRODUCTION

The purpose of this reuse feasibility report is to evaluate the necessary steps needed to supply the Zellwood Station community with treated effluent from a Class I reliability wastewater treatment facility.

2.0 EXISTING CONDITIONS

A. General Conditions

Zellwood Station MHC is located in Section 25, Township 20 South, Range 27 East and consists of a 1,006 unit mobile home community. The park is located on Spillman Road off S.R. 441 in Zellwood in northwest Orange County.

Zellwood Station currently has 1,196 mobile home sites, a clubhouse, bathrooms, a maintenance barn, and a sales office. There are 1,006 active mobile home sites, 190 inactive sites with water and sewer service and an additional 792 mobile home sites planned for the future which do not have water or sewer service in this facility's service area.

B. Wastewater Management

The existing wastewater treatment facility is a 300,000 gallon per day extended aeration facility based on the annual average daily flow. The average unit flow is estimated to be 190.0 gpd for a total ADF of 190,000 gpd. and the maximum day flow has reached 205,000 gpd. The facility utilizes a two-cell rapid infiltration basin for effluent disposal. The wastewater residuals are transferred to an aerobic digester and transported to an off-site facility.

The plant consists of two (2) complete concentric circular steel tanks and the necessary division walls to insure process operation. The inner circular tank serves as the clarifier and the annular space between the inner circular wall and the outer circular wall is divided into the required process compartments. The principal items included in the main processing plant consists of one 266,670 gallon complete mix aeration tank, one 881.42 s.f. settling tank, one 11,760 gallon chlorine contact chamber and one 39,553 gallon digester tank. There is a 97,650 gallon surge tank that is off-line due to it leaking water through its foundation. It has been capped and abandoned in place. The facility utilizes two rapid infiltration basins to meet the definition of Reuse in accordance with 62-610 FAC.

The facility currently meets Class C, Category III treatment facility. The facility requires a licensed operator with a minimum certification of Class C to be on-site for three (3) hours per day for five (5) days per week and one (1) visit each weekend, as a minimum.

The service area is comprised solely of residential mobile homes which only generate domestic wastewater. There are no industrial or commercial uses within the service area. The facility was placed in service approximately 24 years ago.

The site, currently under Florida Department of Environmental Protection (FDEP) permit No. DO48-202737, is authorized to operate a 0.300 mgd extended aeration plant with chlorinated effluent disposal to two percolation ponds located adjacent to the facility. The WWTF meets the requirements of a Class C, Category III treatment facility.

C. Historical Flows

Flows and effluent water quality data were obtained from the Monthly Operating Reports (MORs) submitted to the FDEP. Our analysis is focused on the flows experienced between January 1994 and April 1999. The highest of these flows is being experienced during the winter months and the low flows occur during the summer months. The 30 day ADF reached a high of 191,000 gpd in November, 1998, while the highest peak flow was 205,000 gpd on January 1999. The average, minimum, and maximum flows are summarized in the following table.

FLOWS (gpd)	30 Day ADF	3 Month ADF	12 Month ADF	Peak
AVERAGE	146,175	146,796	145,823	161,419
MINIMUM	88,000	88,333	98,700	94,000
MAXIMUM	191,000	186,667	178,194	205,000

D. Seasonal Variations

The flows peak during the winter months which coincides with the arrival of Florida's tourist season. The tourists arriving in Florida for the winter months causes increased flows at the Zellwood Station Co-Op. The ratio of the average 3 month adf to the maximum 12 month adf is as follows:

Table I - Average Ratio

YEAR	ANNUAL AVERAGE	HIGHEST 3 MONTH AVG	RATIO
1994	100,250	114,667	1.1438
1997	129,778	148,000	1.1404
1997	147,472	169,000	1.1460
1997	159,194	179,000	1.1244
1998	178,139	186,667	1.0479
AVERAGES	142,967	159,467	1.1205

3.0 FUTURE CONDITIONS

A. Future Wastewater Flowrates

The Zellwood Co-Op average wastewater demand is approximately 178,139 gpd based on the annual average. The 3 month average is approximately 186,667 gpd which is approximately 62% of the wastewater treatment facility's permitted capacity. In order to estimate the ability of the wastewater facility to treat wastewater for future connections a demand of 200 gpd was used for mobile home lots and 2,000 gpd per acre was used for commercial parcels.

Zellwood currently has approximately 1,006 active lots. The future development assumes an additional 190 lots which are currently developed but remain inactive; 792 lots from the undeveloped tract in the middle of the park which is owned by Angeles; a 7.75 acre tract which is owned by the Rolling Hills Community Church and a 10 acre undeveloped parcel which is adjacent to the church. The 8.5 acre undeveloped tract which is planned for a new Publix shopping center is outside the utility's service territory.

The estimated demand including the future development is as follows:

Population flow = (1,006 + 190 + 792) units x 200 gpd / unit = 397,600 gpd
Committed Commercial Tracts =
(10 + 7.75) acres x 2,000 gpd/acre = 35,500 gpd

Total Committed flow = 433,100 gpd

Publix Site = 8.5 acres x 2,000 gpd / acre = 17,000 gpd

Total Flow including the Publix site = 450,100 gpd

B. Wastewater Management

There is no regional wastewater management system within the vicinity of the community, therefore an on-site plant is the only alternative. The objective for this project is to design and expand the existing wastewater treatment facility to produce an effluent that meets the requirements of public access landscape irrigation.

Chapter 62-610.450 F.A.C. governs the type of wastewater reuse systems involving the irrigation of areas accessible to the public such as residential lawns, golf course irrigation and landscaped areas. Requirements for wastewater treatment and disinfection are secondary treatment and high-level disinfection. Reclaimed water shall not contain a Total Suspended Solids (TSS) concentration greater than 5.0 mg/L. before application of a disinfectant. Filtration shall be provided to control the TSS. Chemical feed facilities for coagulation shall be provided and may be off-line if the TSS limitation is achieved. Also, the plant must meet Class I Reliability. A summary of Class I Reliability is as follows:

1. *A storage basin (i.e. surge tank) must be provided to attenuate the peak flow.*

2. *The wastewater treatment system, with one unit out of operation, shall be capable of distributing the wastewater to the remaining units. This is accomplished using a dual-train treatment system.*
3. *A minimum of two equal volume basins shall be provided for aeration of the activated sludge.*
4. *A sufficient number of final sedimentation basins shall be provided such that with the largest unit out of service, the remaining units can handle 75% of the total design flow.*
5. *A sufficient number of disinfection basins shall be provided such that with the largest unit out of service, the remaining units can handle 50% of the total design flow.*

The modified wastewater facility will need to be able to treat a flow of approximately 380,000 gpd. This design flow is based on the review of the existing flow data recorded in the monthly MOR's submitted to the FDEP; existing and planned development within the service area; and other assumptions.

4.0 RECOMMENDATIONS FOR CONSTRUCTION

The Zellwood Station MHC uses a high volume of groundwater for household use, commercial use and irrigation. In order to meet the requirements of the SJRWMD Consumptive Use Permit, alternative sources of useable water need to be developed. The most effective alternative to reducing the burden on the Floridan aquifer is to use reclaimed water for irrigation of the golf course. It is recommended that the existing plant can be modified to produce a high quality effluent for irrigation of the golf course, therefore reducing the consumption of groundwater.

The most cost effective means of accomplishing this goal is to modify the existing facility to provide public access golf course irrigation. It is recommended that this be accomplished in two phases. The first phase will include turning the existing facility into a Class 1 reliability plant capable of producing public access spray irrigation. This will be accomplished as follows:

Phase 1 - 300,000 gpd Class 1 Reliability WWTF.

1. *Repair and refinish existing ring steel plant which has an aeration basin, clarifier and aerobic digester.*

2. *Add one 100,000 gallon surge tank and flow splitter box.*

3. *Add one 150,000 gallon aeration basin*

4. *Add one 200,000 gpd clarifier.*

5. *Add three 100,000 gpd each filters*

6. *Add one 10,000 gallon dosing tank*

7. *Add three 5,000 gallons each chlorine contact tanks.*

8. *Add three 5,000 gallon mudwells.*

9. *Turn one of the existing ponds into a reject pond.*

10. *Site filling, grading and stormwater management.*

11. *Construct Irrigation Pumping Station*

12. *Construct Irrigation main from WWTF to irrigation system.*

Phase 2 will consist of adding another 150,000 gallon per day complete treatment train including the aeration tank, clarifier and filter. All other parts of the plant will remain.

Proposed Phase 1 Expansion Requirements

Item	Component	Size	Est. Cost
1.00	Flow equalization basin	100,000 gal.	70,000
2.00	Repair and refinish Existing Plant	150,000 gpd	45,000
3.00	Aeration basin	150,000 gal.	70,000
4.00	Additional Blowers and piping		50,000
5.00	Clarifier	1 @ 200,000 gpd	85,000
6.00	Dosing tanks	1 @ 10,000 gallon	25,000
7.00	Sand Filters	3 @ 100,000 gpd each	150,000
8.00	Mudwells	3 @ 5,000 gal. Each	20,000
9.00	Chlorine contact tank	3 @ 5,000 gallon each	25,000
10.00	Existing Pond into Reject Pond	300,000 gallons	25,000
11.00	Existing pond into wet weather storage pond	3.1 million gallons (115,000 s.f.)	100,000
12.00	Site filling, grading and stormwater	Lump sum	50,000
13.00	Effluent Monitoring Equipment		25,000
14.00	Irrigation Pumping Station and Transmission Main		150,000
15.00	Sub-total:		890,000
16.00	Engineering, Surveying and Permitting		80,000
17.00	Contingency Allowance: 15%		145,500
18.00	Total:		$1,115,500.00

Note 1: Regrading of the existing rapid infiltration basins to construct one reject/percolation pond and one lined wet weather storage pond. The reject pond will hold approximately 400,000 gallons and the wet weather storage pond will store approximately 3.1 million gallons for golf course irrigation.

5.0 OPERATIONS AND MAINTENANCE COSTS

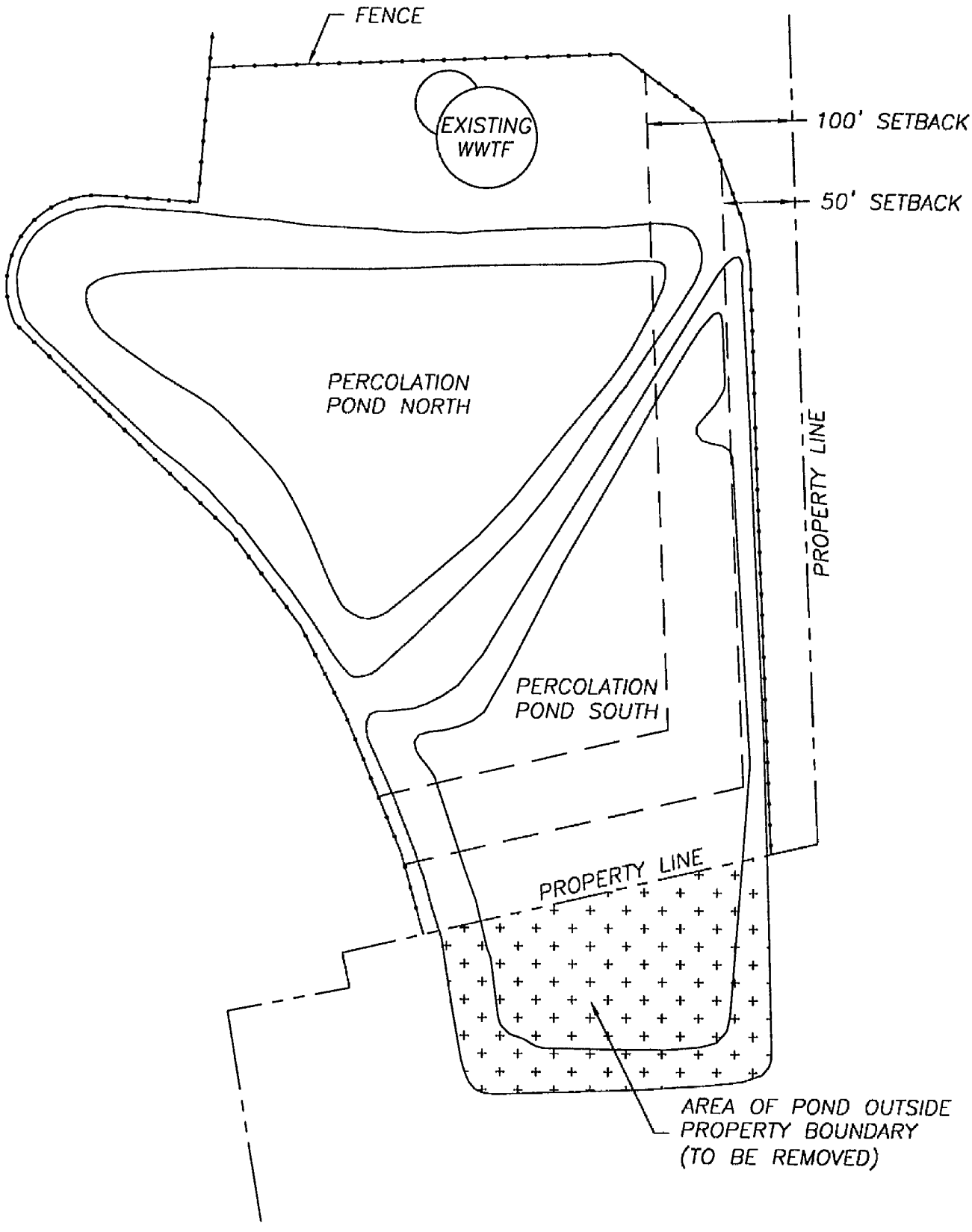
The costs of operating and maintaining a Class I reliability reuse facility is considerably higher. Operator attendance a minimum of 6 hours per day 7 days per week will be required. Additional monitoring and sampling will also be required. Power and chemical costs are expected to increase as well. The expected annual costs of operating and maintaining the new plant for Phase 1 is as follows:

Item	*Component*	*Est. Cost*
1.00	Operator and Lab Analysis	$100,000
2.00	Power Costs	40,000
3.00	Chemical Costs	5,000
4.00	Sludge Removal	18,000
5.00	Miscellaneous	5,000
6.00	Sub Total	168,000
7.00	Contingency @ 15%	25,200
8.00	Total Operation & Maintenance	$193,200

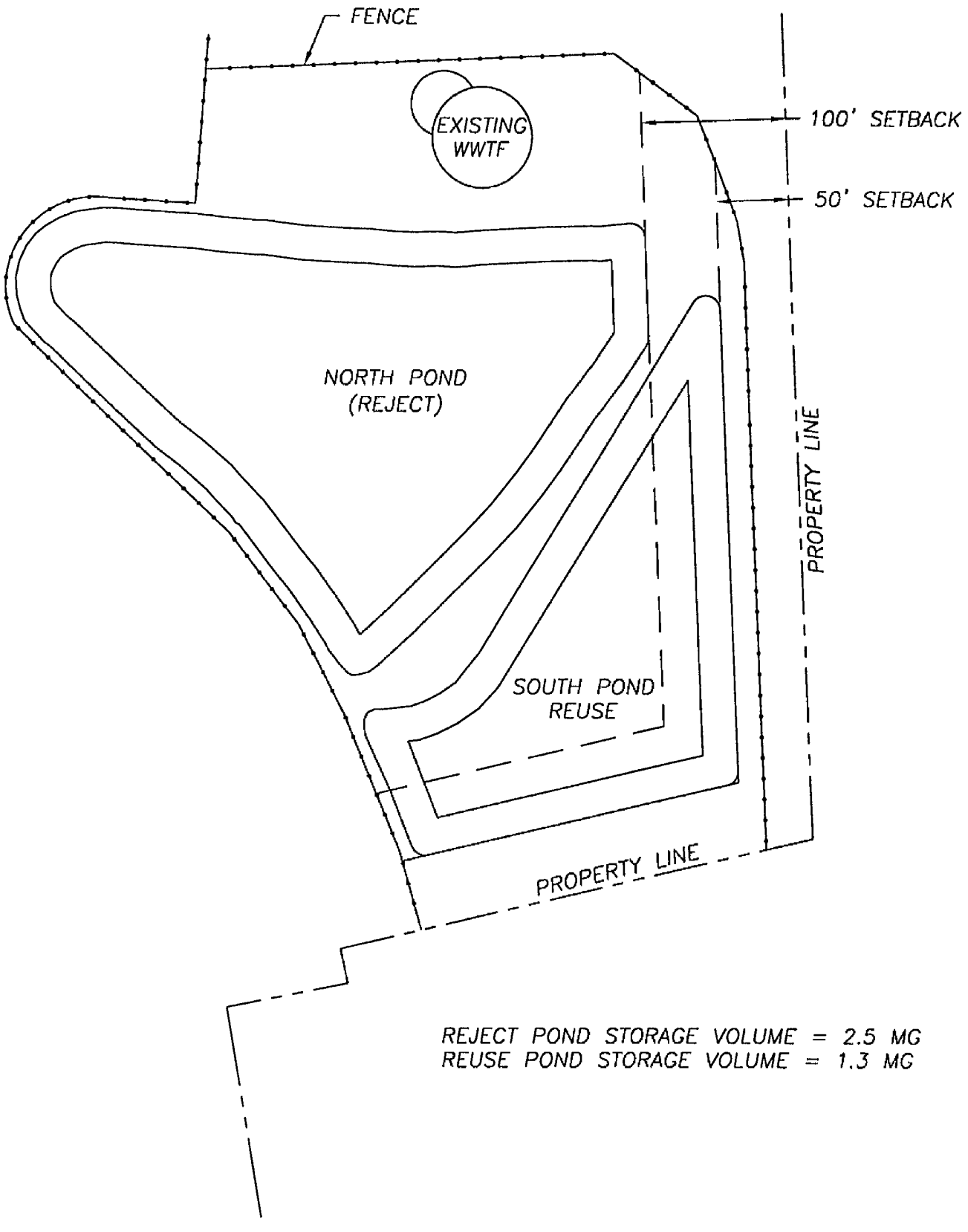
6.0 FINANCING AND IMPACT ON RATES

The financing of the project is expected to be undertaken by borrowing the funds from a local bank. The commercial lending rate is difficult to predict, however for this analysis a rate of approximately 8.0% and a term of 20 years is assumed. The estimated annual principal and interest on a $1.2 million note is approximately $122,223.

Based upon the estimated construction and operating costs contained herein, It is estimated that the wastewater customers of the utility would incur monthly charges of approximately $35.00 subject to the approval of the Florida Public Service Commission.

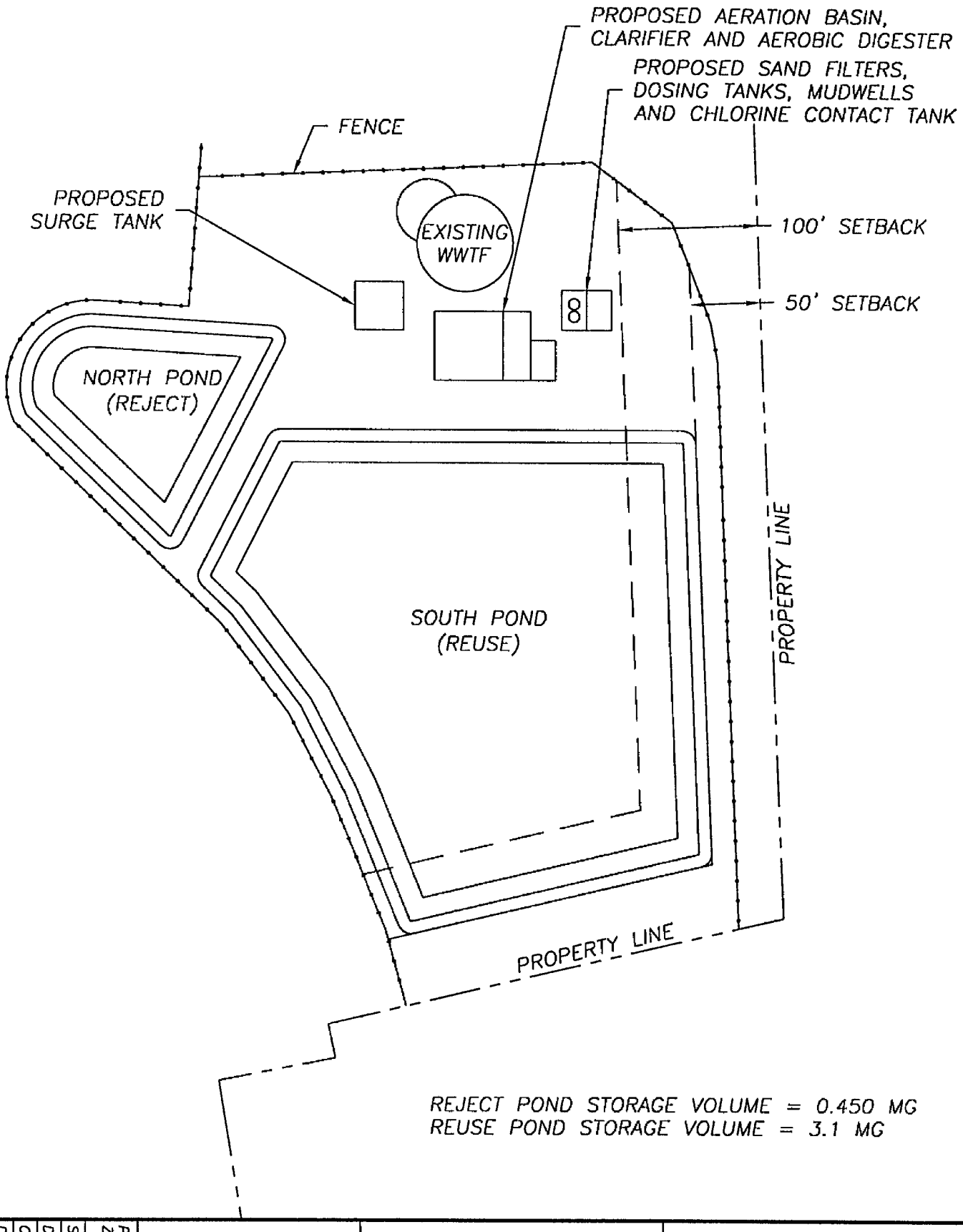


SHEET 1 OF 1	DATE: 02.07.01	CHECKED BY: JRC	DRAWN BY: JKR	SCALE: AS SHOWN	PROJECT: ZEL01000	EXCEL ENGINEERING CONSULTANTS, INC. ENVIRONMENTAL AND CIVIL ENGINEERS CASSELBERRY FLORIDA TELEPHONE: 407.260.2292 FACSIMILE: 407.260.1193	ZELLWOOD STATION GOLF COURSE COMMUNITY	EFFLUENT DISPOSAL PLAN



REJECT POND STORAGE VOLUME = 2.5 MG
REUSE POND STORAGE VOLUME = 1.3 MG

SHEET 1 OF 1	DATE: 02.07.01	CHECKED BY: JRC	DRAWN BY: JKR	SCALE: AS SHOWN	PROJECT: ZEL01000	EXCEL ENGINEERING CONSULTANTS, INC. ENVIRONMENTAL AND CIVIL ENGINEERS CASSELBERRY FLORIDA TELEPHONE: 407.260.2292 FACSIMILE: 407.260.1193	ZELLWOOD STATION GOLF COURSE COMMUNITY	EFFLUENT DISPOSAL PLAN



REJECT POND STORAGE VOLUME = 0.450 MG
REUSE POND STORAGE VOLUME = 3.1 MG

SHEET 1 OF 1	DATE: 02.07.01	CHECKED BY: JRC	DRAWN BY: JKR	SCALE: AS SHOWN	PROJECT: ZEL01000	EXCEL ENGINEERING CONSULTANTS, INC. ENVIRONMENTAL AND CIVIL ENGINEERS CASSELBERRY FLORIDA TELEPHONE: 407.260.2292 FACSIMILE: 407.260.1193	ZELLWOOD STATION GOLF COURSE COMMUNITY	EFFLUENT DISPOSAL PLAN

Pond Calculations

Existing Ponds:				
	Top Area	Bottom Area	Useable Depth*	Volume
	76,832	54,477	5	2,455,478
South	85,540	70,128	5	2,910,992

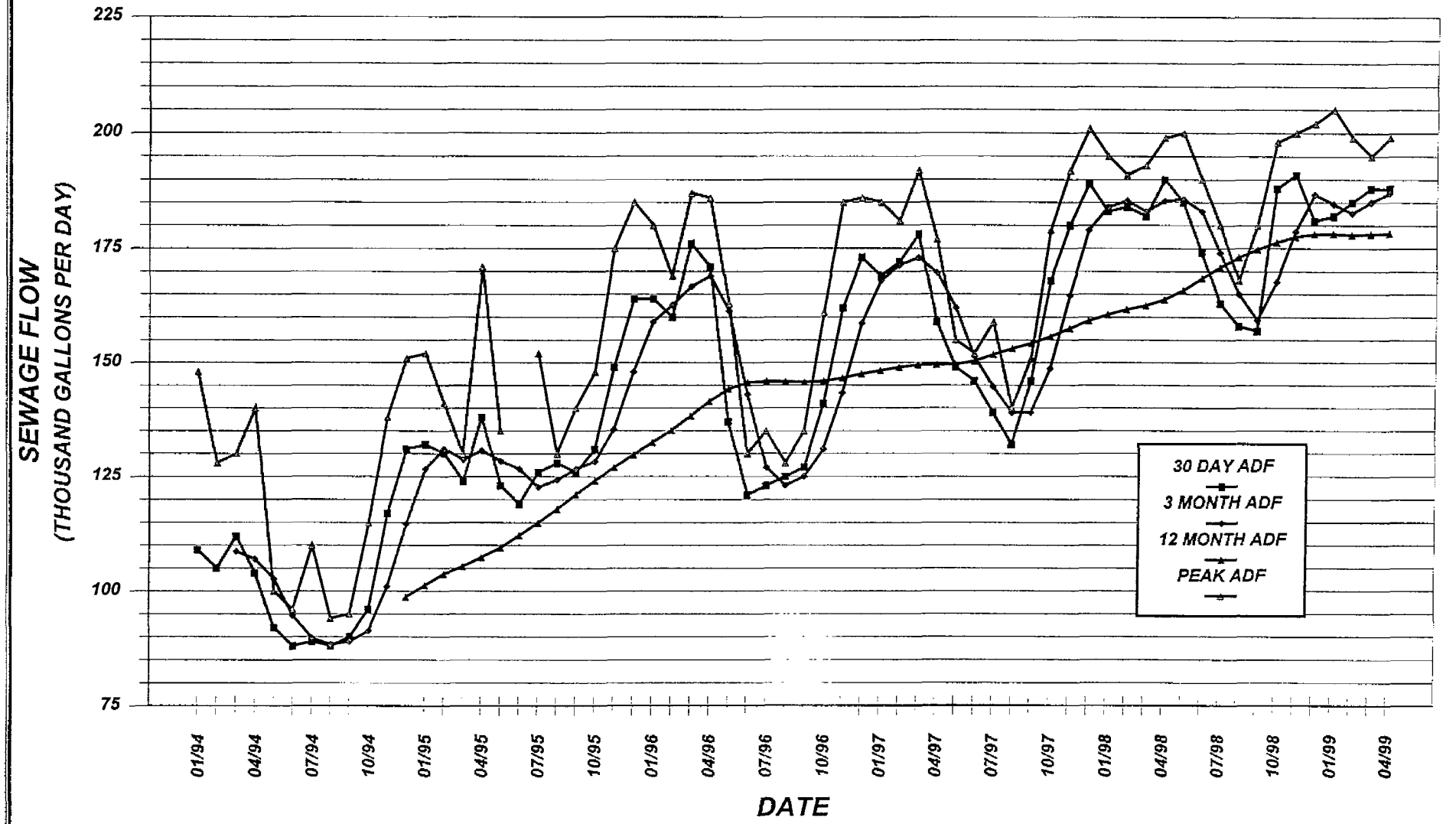
Modified Existing Ponds:				
	Top Area	Bottom Area	Useable Depth*	Volume
	s.f.	s.f.	ft	gallons
North (Reject)	75,256	58,525	5	2,501,705
South (Reuse)	41,618	27,603	5	1,294,433
			Total:	3,796,137

Modified Disposal Area:				
	Top Area	Bottom Area	Useable Depth*	Volume
	s.f.	s.f.	ft	gallons
North (Reject)	15,277	8,556	5	445,677
South (Reuse)	92,031	74,809	5	3,119,908
			Total:	3,565,585

* Useable depth = Total pond depth - 3' freeboard
Total pond depth assumed to be 8'

ZELLWOOD STATION CO-OP

HISTORICAL SEWAGE FLOWS



ZELLWOOD STATION

Historical W.W.T.F. Flows and Loading Data

DATE	30 DAY ADF(gpd)	3 MO. ADF(gpd)	12 MO. ADF(gpd)	PEAK (gpd)
04/99	188,000	187,000	178,278	199,000
03/99	188,000	185,000	178,139	195,000
02/99	185,000	182,667	177,972	199,000
01/99	182,000	184,667	178,194	205,000
12/98	181,000	186,667	178,139	202,000
11/98	191,000	178,667	177,500	200,000
10/98	188,000	167,667	176,333	198,000
09/98	157,000	159,333	174,750	180,000
08/98	158,000	165,000	173,056	168,000
07/98	163,000	174,000	170,889	180,000
06/98	174,000	183,000	168,444	190,000
05/98	185,000	185,667	165,806	200,000
04/98	190,000	185,333	163,833	199,000
03/98	182,000	183,000	162,528	193,000
02/98	184,000	185,333	161,694	191,000
01/98	183,000	184,000	160,528	195,000
12/97	189,000	179,000	159,194	201,000
11/97	180,000	164,667	157,500	192,000
10/97	168,000	148,667	155,722	179,000
09/97	146,000	139,000	154,250	151,000
08/97	132,000	139,000	153,083	140,000
07/97	139,000	144,667	151,750	159,000
06/97	146,000	151,333	150,278	152,000
05/97	149,000	162,000	149,583	155,000
04/97	159,000	169,667	149,528	177,000
03/97	178,000	173,000	149,472	192,000
02/97	172,000	171,333	148,944	181,000
01/97	169,000	168,000	148,222	185,000
12/96	173,000	158,667	147,472	186,000
11/96	162,000	143,333	146,583	185,000
10/96	141,000	131,000	145,917	161,000
09/96	127,000	125,000	145,694	135,000
08/96	125,000	123,000	145,833	128,000
07/96	123,000	127,000	145,944	135,000
06/96	121,000	143,000	145,583	130,000
05/96	137,000	161,333	144,222	163,000
04/96	171,000	169,000	141,472	186,000
03/96	176,000	166,667	138,278	187,000
02/96	160,000	162,667	135,111	169,000
01/96	164,000	159,000	132,472	180,000
12/95	164,000	148,000	129,778	185,000
11/95	149,000	135,333	127,000	175,000
10/95	131,000	128,333	124,139	148,000
09/95	126,000	126,667	121,056	140,000
08/95	128,000	124,333	117,917	130,000
07/95	126,000	122,667	114,917	152,000

ZELLWOOD STATION

Historical W.W.T.F. Flows and Loading Data

06/95	119,000	126,667	112,167	
05/95	123,000	128,333	109,500	135,000
04/95	138,000	130,667	107,361	171,000
03/95	124,000	128,667	105,389	130,000
02/95	130,000	131,000	103,722	141,000
01/95	132,000	126,667	101,242	152,000
12/94	131,000	114,667	98,700	151,000
11/94	117,000	101,000		138,000
10/94	96,000	91,333		115,000
09/94	90,000	89,000		95,000
08/94	88,000	88,333		94,000
07/94	89,000	89,667		110,000
06/94	88,000	94,667		96,000
05/94	92,000	102,667		100,000
04/94	104,000	107,000		140,000
03/94	112,000	108,667		130,000
02/94	105,000			128,000
01/94	109,000			148,000
AVGS	146,828	146,796	146,435	162,016
MIN	88,000	88,333	98,700	94,000
MAX	191,000	186,667	178,194	205,000

Zellwood Station MHC WWTF - Reuse Modifications

Extended Aeration Process Analysis

FLOW =	450,000	gpd	0.4500	mgd

FLOW EQUALIZATION

	Volume, gallons	% of Total Flow
Total:	90,000	20.00%

AERATION

	Volume gallons	Detention Time hours	Loading #/1,000 cf
Existing Tank	266,700	14.22	20.00
Proposed Tank	183,300	9.78	29.10
Total:	450,000	24.00	11.85

CLARIFICATION

	Area s.f.	Loading Rate gpdpsf
Existing Tank	880	511.36
Proposed Tank	880	511.36
Total:	1,760	255.68

FILTRATION

	Area s.f.	Loading Rate gpmpsf	Volume gallons	Retention Time minutes
Proposed Dosing Tank #1	---	---	5,000	16
Proposed Dosing Tank #1	---	---	5,000	16
Total:	---	---	10,000	32
Proposed Filter #1	50.00	3.13	---	---
Proposed Filter #2	50.00	3.13	---	---
Total:	100.00	1.56	---	---
Proposed Mudwell #1	---	---	500	53
Proposed Mudwell #2	---	---	500	53
Total:	---	---	1,000	107

CHLORINATION

	Volume, gallons	Detention Time(adf,min)	Detention Time(peak,min)
Existing Tank*	11,760	37.63	15.05
Proposed Tank*	12,000	38.40	15.36
Total:	23,760	76.03	30.41

*Existing tank to be abandoned to maintain gravity flow. Proposed tank to have two compartments.

Zellwood Station MHC WWTF - Reuse Modifications

Extended Aeration Process Analysis

AEROBIC DIGESTION

	Volume, gallons	Sludge Prod. gpd	Retention Time, days	Sludge Prod. tons/yr
Existing Tank*	39,600	2,671.88	14.82	78.08
Proposed Tank*	20,000	2,671.88	7.49	78.08
Total:	59,600	2,671.88	22.31	78.08

*Proposed tank not required, however recommended since pumping height to digester is high.

EFFLUENT DISPOSAL

	Volume gallons	Storage Time days
Reject Pond	450,000	1.00
Reuse Pond	3,100,000	6.89
Total:	3,550,000	7.89

	Area acres	Loading Rate gpdpsf	Loading Rate inches/week
Golf Course	18.00	0.57	6.45

AIR REQUIREMENTS

SURGE TANK

Total Volume gallons	Mixing cfm	Aerobic cfm
90,000.00	180.00	2.06

AERATION TANKS

	Total Vol. gallons	Mixing cfm	Aerobic cfm	Safety Factor # Air/# BOD	Min. Air @ 1.5 BOD
Eckenfelder	450,000.00	900.00	2,623.59	2.68	1,470.50
Monod	450,000.00	900.00	1,685.80	1.72	1,470.50

AEROBIC DIGESTER

Total Volume gallons	Aerobic cfm
59,600.00	329.39

AIR LIFT PUMPS

	No. ALP	cfm	
	8.00	40.00	
Total System Air Requirements:		2,992.98	(Not including surge tank)

Zellwood Station MHC WWTF - Reuse Modifications

Extended Aeration Process Analysis

FLOW =	225,000	gpd	0.2250	mgd

FLOW EQUALIZATION

	Volume, gallons	% of Total Flow
Total:	90,000	40.00%

AERATION

	Volume gallons	Detention Time hours	Loading #/1,000 cf
Existing Tank	266,700	28.45	10.00
Proposed Tank	183,300	19.55	14.55
Total:	450,000	48.00	5.93

CLARIFICATION

	Area s.f.	Loading Rate gpdpsf
Existing Tank	880	255.68
Proposed Tank	880	255.68
Total:	1,760	127.84

FILTRATION

	Area s.f.	Loading Rate gpmpsf	Volume gallons	Retention Time minutes
Proposed Dosing Tank #1	---	---	5,000	32
Proposed Dosing Tank #1	---	---	5,000	32
Total:	---	---	10,000	64
Proposed Filter #1	50.00	1.56	---	---
Proposed Filter #2	50.00	1.56	---	---
Total:	100.00	0.78	---	---
Proposed Mudwell #1	---	---	500	107
Proposed Mudwell #2	---	---	500	107
Total:	---	---	1,000	213

CHLORINATION

	Volume, gallons	Detention Time(adf,min)	Detention Time(peak,min)
Existing Tank	11,760	75.26	30.11
Proposed Tank	12000	76.80	30.72
Total:	23,760	152.06	60.83

*Existing tank to be abandoned to maintain gravity flow. Proposed tank to have two compartments.

Zellwood Station MHC WWTF - Reuse Modifications

Extended Aeration Process Analysis

AEROBIC DIGESTION

	Volume, gallons	Sludge Prod. gpd	Retention Time, days	Sludge Prod. tons/yr
Existing Tank	39,600	1,335.94	29.64	39.04
Proposed Tank	20,000	1,335.94	14.97	39.04
Total:	59,600	1,335.94	44.61	39.04

*Proposed tank not required, however recommended since pumping height to digester is high.

EFFLUENT DISPOSAL

	Volume gallons	Storage Time days
Reject Pond	450,000	2.00
Reuse Pond	3,100,000	13.78
Total:	3,550,000	15.78

	Area acres	Loading Rate gpdpsf	Loading Rate inches/week
Golf Course	18.00	0.29	3.22

AIR REQUIREMENTS

SURGE TANK

Total Volume gallons	Mixing cfm	Aerobic cfm
90,000.00	180.00	2.06

AERATION TANKS

	Total Vol. gallons	Mixing cfm	Aerobic cfm	Safety Factor # Air/# BOD	Min. Air @ 1.5 BOD
Eckenfelder	450,000.00	900.00	2,085.74	2.13	1,470.50
Monod	450,000.00	900.00	842.90	0.86	1,470.50

AEROBIC DIGESTER

Total Volume gallons	Aerobic cfm
59,600.00	164.70

AIR LIFT PUMPS

	No. ALP	cfm	
	8.00	40.00	
Total System Air Requirements:		2,290.44	(Not including surge tank)

Zellwood Station MHC WWTF - Reuse Modifications

Extended Aeration Process Analysis

FLOW =	337,500	gpd	0.3375	mgd

FLOW EQUALIZATION

	Volume, gallons	% of Total Flow
Total:	90,000	26.67%

AERATION

	Volume gallons	Detention Time hours	Loading #/1,000 cf
Existing Tank	266,700	18.97	15.00
Proposed Tank	183,300	13.03	21.82
Total:	450,000	32.00	8.89

CLARIFICATION

	Area s.f.	Loading Rate gpdpsf
Existing Tank	880	383.52
Proposed Tank	880	383.52
Total:	1,760	191.76

FILTRATION

	Area s.f.	Loading Rate gpmpsf	Volume gallons	Retention Time minutes
Proposed Dosing Tank #1	---	---	5,000	21
Proposed Dosing Tank #1	---	---	5,000	21
Total:	---	---	10,000	43
Proposed Filter #1	50.00	2.34	---	---
Proposed Filter #2	50.00	2.34	---	---
Total:	100.00	1.17	---	---
Proposed Mudwell #1	---	---	500	71
Proposed Mudwell #2	---	---	500	71
Total:	---	---	1,000	142

CHLORINATION

	Volume, gallons	Detention Time(adf,min)	Detention Time(peak,min)
Existing Tank	11,760	50.18	20.07
Proposed Tank	12,000	51.20	20.48
Total:	23,760	101.38	40.55

*Existing tank to be abandoned to maintain gravity flow. Proposed tank to have two compartments.

Zellwood Station MHC WWTF - Reuse Modifications

Extended Aeration Process Analysis

AEROBIC DIGESTION

	Volume, gallons	Sludge Prod. gpd	Retention Time, days	Sludge Prod. tons/yr
Existing Tank	39,600	1,335.94	29.64	58.56
Proposed Tank	20,000	1,335.94	14.97	58.56
Total:	59,600	1,335.94	44.61	58.56

*Proposed tank not required, however recommended since pumping height to digester is high.

EFFLUENT DISPOSAL

	Volume gallons	Storage Time days
Reject Pond	450,000	1.33
Reuse Pond	3,100,000	9.19
Total:	3,550,000	10.52

	Area acres	Loading Rate gpdpsf	Loading Rate inches/week
Golf Course	18.00	0.43	4.83

AIR REQUIREMENTS

SURGE TANK

Total Volume gallons	Mixing cfm	Aerobic cfm
90,000.00	180.00	2.06

AERATION TANKS

	Total Vol. gallons	Mixing cfm	Aerobic cfm	Safety Factor # Air/# BOD	Min. Air @ 1.5 BOD
Eckenfelder	450,000.00	900.00	2,354.66	2.40	1,470.50
Monod	450,000.00	900.00	1,577.07	1.61	1,470.50

AEROBIC DIGESTER

Total Volume gallons	Aerobic cfm
59,600.00	247.04

AIR LIFT PUMPS

	No. ALP	cfm	
	8.00	40.00	
Total System Air Requirements:		2,641.71	(Not including surge tank)