ORANGE COUNTY

Tangerine

Docket No. 080121-WS

Application to Increase Rates and Charges For a "Class A" Utility In

Florida

Volume 5 Book 2 Set 8 of 16

Containing: Monthly Operating Reports Sample Results Permits Correspondence

04320 MAY 22 %

DOCUMENT NUMBER-DATE

Aqua Utilities Florida, Inc.

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER See Pages 4 for Instructions. L. General Information for the Month/Year of: January, 2007 . A. Public Water System (PWS) Information PWS Name: Tangerine Park PWS Identification Number: 3481329 PWS Type: Community Non-Transient Non-Community Transient Non-Community Consecutive Number of Service Connections at End of Month: Total Population Served at End of Month: 358 1,253 4.4 PWS Owner: Aqua Utilities Florida ... Contact Person: Brian Heath Contact Person's Title: Area Manager ٠. City: Leesburg PO Box 490310 State: Florida Contact Person's Mailing Address: Zip Code: 34749 Contact Person's Telephone Number: (352) 787-0980 Contact Person's Fax Number: (352) 787-6333 beheath@aguaamerica.com Contact Person's E-Mail Address: **B.** Water Treatment Plant Information Plant Name: Tangerine Park Plant Telephone Number: 352-787-0980 ^ Plant Address: S551 Huron Street City: Mt. Dora State: Florida Zip Code: 32757 Type of Water Treatment by Plant: Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 360,000 V Plant Category (per subsection 62-699.310(4), F.A.C.): Plant Class (per subsection 62-699.310(4), F.A.C.): С. KIRdensed Operators and Average and Average Average and Average and Average Aver Lead/Chief.Operators Will Fontaine С 6813 Days 1st Shift Marty Neal 10027 Days 1st Shift C John Worrell 6597 Days 1st Shift . : C. Ś. ι. ÷ ÷. 4 ч.

H Certification by Lead/Chief Operator

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

	Mr. James	2-9-07	Will Fontaine	c	C-6813
Si	gnature and Date	DOCUMENT NUMBER - DATE	Printed or Typed Name	L	icense Number
- L - ⁹	DEP Form 62-555900(3)Alternato Effective August 28,2003	04320 MAY 22 8	Page I		
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Refer to the instructions for this report to determine which plants must provide this information. DEP Form 82-555.900(3)Attermine

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FLORIDA See Pages 4 for Instructions.	N REPORT FOR PWSs TR	EATING RAW GRO	DUND WATER	OR PURCHASED FI	NISHED WATER
I. General Information for the Month	/Year of: February, 2007				
A. Public Water System (PWS) Inform	ation				
PWS Name: Tangerine Park				PWS Identification Number:	3481329
PWS Type: Community	Non-Transient Non-Community	Transient Non-Com	munity	Consecutive	
Number of Service Connections at End of Mon	th: 358		Total	Population Served at End of Month:	1,253
PWS Owner: Aqua Utilities Flor	ida	· · · · · · · · · · · · · · · · · · ·			
Contact Person: Brian Heath		· · · · · · · · · · · · · · · · · · ·	Conta	ct Person's Title: Area M	lanager
Contact Person's Mailing Address:	PO Box 490310		City: Leesburg	State: Florida	Zip Code: 34749
Contact Person's Telephone Number:	(352) 787-0980		Conta	at Person's Fax Number: (352) 7	87-6333
Contact Person's E-Mail Address:	beheath@aguaamerica.com				
B. Water Treatment Plant Information	3				
Plant Name: Tangerine Park				Plant Telephone Number:	352-787-0980
Plant Address: 5551 Huron Street		······································	City: Mt. Dora	State: Florida	Zip Code: 32757
Type of Water Treatment by Plant:		irchased Finished Water		<u> </u>	
Permitted Maximum Day Operating Capacity of		360,000		······································	
Plant Category (per subsection 62-699.310(4),				lass (per subsection 62-699.310(4), I	
Licensed Operators	Name		the second s		hift(s) Worked
Lead/Chief.Operatort/ Will Fontaine		c	6813	Days Ist Shift	
Other Operators Marty Neal		c	10027	Days 1st Shift	· · · · · · · · · · · · · · · · · · ·
John Worrell		C	6597	Days 1st Shift	
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If Certification by Lead/Chief Operator

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

3-8-07 Signature and Date

Will Fontaine

Printed or Typed Name

C-6813 License Number

DEP Form 62-555..900(3)Alternate Effective August 28,2003

MONTHLY OPERATION REPORT FOR PW"Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

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PWS Id	PWS Identification Number: 3481329 [Plant Name: Tangerine Park													
<u>111.</u> D	aily Data	for the M	onth/Yea	r of:	February, 2007			·····				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
				tivation/Removal:	Free Chk	orine T C	lorine Diox	ide T	Ozone	Combin	ed Chlorin	e (Chloramines)		
	traviolet R			her (Describe):				1	~~~~			Contor autorios)		
T	CD:-:-C-				on System: J	Free Chlorin	e ro	Combined	Chlorine (C	hloramines)	E F	Chlorine Dioxic	le	
		5. ACA		Part and the second			<u> ())</u>	17. j. z.	VILLA TANK		- hinaki-			Emergency of Abtornal Operating Conditions Repair or Maintenance Work that involves Taking Water System Components Out of Mainten Components Out of
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8. A.	Staffed or		Quantity of	and the second	Disinfectant	Conditioning	First	6 7 B			Lowest		Disinfectant	Emergency of Abnormal Operating
Acres	Visited by		- Finished		Concentration (C)	Measurement	Customer	4. S.L.		Minimum	.Operating	T BLACK	Concentration at	Conditions Repair or Maintenance
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a the	W(Place	Hours plant	Producted.	Deste Flore Pollo	Customer During	Peak Flow,	Flow, mg	Lemp.of	pH of Water;	Required	mw-	LOSE Required,	Distribution	System Components Out of
***1*	X	in Operation 24.0	68,000	Francinow Rate, gpd.	2.7	- minutes :		water,C	# Abbucanie	ing-muvr.	scovem"	1. mw-sec/cm?**	a System, mg/L/r	Referrance Service Programmer (2017)
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* Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555.900(3)Alternate

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PWS Name:	Tangerine Park	
PWS Type:	Community	Non-Translent Non-Co

See Pages 4 for Instructions.

I. General Information for the Month/Year of:

A. Public Water System (PWS) Information

PW	S Турс:	Community		Non-Translent Non-	Community	Transient Non-Com	munity	Consecutive				
Nu	mber of Service Connect	tions at End of Month	Ľ	358			-	Total Population Serve	d at End of Month:	1,253		
PW	S Owner:	Aqua Utilities Florid	a									
Cor	ntact Person:	Brian Heath						Contact Person's Title: Area Manager				
Cor	ntact Person's Mailing A	ddress:	PO Bo	ox 490310			City: Leesburg	g State: Florida	1	Zip Code:	34749	
Cor	Contact Person's Telephone Number: (352) 787-0980 Contact Person's Fa								lumber: (352) 787	/-6333		
Cor	ntact Person's E-Mail Ac	Idress:	behe	eath@aquaamer	ca.com							
B. Wa	ater Treatment Pla	ant Information		•								
Pia	nt Name:	Tangerine Park				· · · · · · · · · · · · · · · · · · ·		Plant Telephone	e Number:	352-787-098	30	
Pla	nt Address:	5551 Huron Street					City: Mt. Dora	a State: Florida	1 ·	Zip Code:	32757	
Тур	e of Water Treatment by	y Plant:		Raw Ground Water	Purchased	Finished Water						
Pen	mitted Maximum Day C	perating Capacity of	Plant,	gallons per day:		360,000			·	<u>.</u>		
	nt Category (per subsect				v .			iant Class (per subsection 62-699.310(4), F.A.C.): C				
	icensed Operators			🕐 Name 🔐 🤅	and the second second	License Class	License Nun	nbcr	Day(s)/Sh	ift(s)Worked	的体验。	
	ad/Chief Operator:					С	6813	Days 1st Shift				
Ot	her Operators:	Marty Neal				C	10027	Days 1st Shift		<u>.</u>		
14 1-30		John Worrell				C	6597	Days 1st Shift	······································			
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MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

March, 2007

11. Certification by Lead/Chief Operator

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

4-9-07 Signature and Date

Will Fontaine

Printed or Typed Name

C-6813 License Number

3481329

PWS Identification Number:

DEP Form 62-655..900(3)Alternale Effective August 28,2003

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MONTHLY OPERATION REPORT FOR PW"Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS	dentificaito	on Number:	3481329		Plant Name:	Tangerine Parl	ς							·····
III.	III. Daily Data for the Month/Year of: March, 2007													
	Means of Achieving Four-Log Virus Inactivation/Removal: 🔽 Free Chlorine 🔽 Chlorine Dioxide 🔽 Ozone 🖵 Combined Chlorine (Chloramines)													
Γu	ltraviolet F	Cadiation	יייש פיייש ירי יייש	ther (Describe):		iorine [C	hlorine Dio:	dde f	Ozone	[] Combi	ned Chlorin	e (Chloramines)	
r														
Type	Distine		dual Maint	ained in Distribut	ion System:	Free Chloria	ne (Combine	i Chlorine (C	Chloramines) Г	Chlorine Dioxid	ie	Emergency or Abhormal Operating Conditions: Repair or Maintenent Work that Involves Taking Water System Components Out of Experation
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and the second	Davs Plant		Net	1.6		Disinfectant	Provided	1		. K	小学业城	5	1.00	
1 43	Staffed of		Quantity of	1. A.	Disinfectant	Condict Time	Betore or at					1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Lowest Residual	
100	Visited by		Finished		Concentration (C)	Measurement	Customer	1	N .	Minimum	Onerating	14	Disinfectant	Emergency or Abnormal Operating
Day of	Operator		· Water		Before or at First.	Point During.	During Peak			CF	UV Dose	Minimum UV	Remote Relation	Conditions: Repair on Maintenance
in the f	Place	Hours plant	Producted,		Customer During	Peak Flow	Flow, mg	Temp of	pH of Water,	Required	mW	Dose Required.	Distribution	System Components Out of
Month	<u>, x)</u>	in Operation	gal:	Peak Flow Rate, gpd.	Peak Flow, mg/L	1 minutes	min/L**	Water, C	if Applicable	mg-min/L	sec/cm	TIW-second	System mel	Deration
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. 26	1	24.0	161,000											
27-*	Х	24.0	161,000		2.2	[1.2	
28;	x	24.0	177,000		3.0								1.2	· · · · · · · · · · · · · · · · · · ·
29	x	24.0	171,000		2.0								1.5	
30 🐺	X	24.0	161,000		2.6								2.0	
- 31 Total	x	24.0	114,000		2.6								2,0	

Maximum . 177,000

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 Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555.900(3)Alternate MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

See 1 2ges 4 tor Instructions.					
. General Information for the Mon	th/Year of: April, 2007				
A Public Water System (PWS) Info	mation				
PWS Name: Tangerine Park				DIVER LAND FOR A DATE OF	
PWS Type: Communit	y Non-Translent Non-Community	Translent Non-Com		PWS Identification Numbe	r: <u>3481329</u>
Number of Service Connections at End of M				Consecutive	
PWS Owner: Aqua Utilities F		<u> </u>	100	Population Served at End of	Month: 1,253
Contact Person: Brian Heath	101108				
				tact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310		City: Leesburg	State: Florida	Zip Code: 34749
Contact Person's Telephone Number:	(352) 787-0980	1	Con	tact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aguaamerica.com	<u> </u>			
Water Treatment Plant Informat	ion	~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
Plant Name: Tangerine Park		······································	<u> </u>	Plant Telephone Number:	352-787-0980
Plant Address: 5551 Huron Stre			City: Mt. Dora	State: Florida	Zip Code: 32757
Type of Water Treatment by Plant:		ed Finished Water			
Permitted Maximum Day Operating Capacit		360,000			
Plant Category (per subsection 62-699.310(4	I), F.A.C.): V		Plant	Class (per subsection 62-699.)	310(4), F.A.C.): C
*Elcensed Operators	Aug Name of Aug No.	License Glass	License Numbe	时,她们们的 Day	(s)//Shift(s)/Workedes/Ltd. st. 9-2-4
Dead/Ghier-Operator; Will Fontaine	· · · ·	C	6813	Days 1st Shift	
Other Operators Sana Marry Neal		C	10027	Days 1st Shift	······································
John Worrell		С	6597	Days 1st Shift	· · · · · · · · · · · · · · · · · · ·
Terry McCarthy	·	C .	4617	Days 1st Shift	
		•			······································
			1		
			<u> </u>	+	
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		t	<u> </u>		

H. Certification by Lead/Chief Operator

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

6.4-07

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Signature and Date

DEP Form 62-555. 900(3)Alternate Effective August 28,2003 Will Fontaine

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Printed or Typed Name

<u>C-6813</u>

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License Number

MONTHLY OPERATION REPORT FOR PW"Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

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nvolvesti Aking Water
components Out of each
operation

* Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555.900(3)Alternate

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MONTHLY	OPERATION	REPORT FOR PV	VSs TREATING	RAW GRO	UND WATER	OR PURCHASE	D FINISHED WA	TER				
FLORIDA												
See Pages 4 for Instru I. General Information	ictions. for the Month/Y	ear of: May, 2	007									
A. Public Water System	(PWS) Informat	ion										
PWS Name:	Tangerine Park					PWS Identification Number:	3481329					
PWS Type:	Community	Non-Transient Non-Co	mmunity Tr	ansient Non-Comr	nunity	Consecutive						
Number of Service Connecti	ons at End of Month:	358			Total P	opulation Served at End of M	Ionth: 1,253					
PWS Owner:	Aqua Utilities Florida											
Contact Person:	Brian Heath				Contac	t Person's Title: A	rea Manager					
Contact Person's Mailing Ac	Contact Person's Mailing Address: PO Box 490310 City: Leesburg State: Florida Zip Code: 34749											
Contact Person's Telephone	Number: (352) 787-0980			Contac	t Person's Fax Number: (3	352) 787-6333					
Contact Person's E-Mail Ad	dress:	beheath@aquaamerica	a.com									
B. Water Treatment Pla	nt Information											
Plant Name:	Tangerine Park					Plant Telephone Number:	352-787-09	30				
Plant Address:	5551 Huron Street				City: Mt. Dora	State: Florida	Zip Code:	32757				
Type of Water Treatment by	Plant:	Raw Ground Water	Purchased Fini	shed Water								
Permitted Maximum Day Op	perating Capacity of F	lant, gallons per day:		360,000								
Plant Category (per subsecti			v		Plant Cl	ass (per subsection 62-699.31	0(4), F.A.C.): C					
Licensed Operators	6796-5	Name	· · · ·	License Class	License Number	Day(s) / Shift(s) Worked	<u>6.</u>				
Lead/Chief.Operatoria	Will Fontaine			С	6813	Days 1st Shift						
Other Operators	Marty Neal			Ç	10027	Days 1st Shift						
	John Worrell			С	6597	Days 1st Shift						
	Terry McCarthy			С	4617	Days 1st Shift						
		······································										
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II. Certification by Lead/Chief Operator

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6-8-6

Signature and Date

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DEP Form 62-555, 900(3)Alternate Effective August 28,2003 Will Fontaine

Printed or Typed Name

<u>C-6813</u>

License Number

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_				RATION REP	PORT FOR	W"Ss TR	EATING	RAW	GROUN	WATE	R OR P	URCHASE	D FINISHEI	D WATER
		n Number:			Plant Name:	Tangerine Park								
III. D	aily Data	for the M	onth/Yea	r of:	May, 2007									
Means of	of Achievi	ng Four-Log	Virus Inac	tivation/Removal:	fữ Free Chl	orine 🔽 C	hlorine Dio	dde T	" Ozone	Combi	ned Chlorin	e (Chloramines	\ \	
្រា បរេ	raviołct R	adiation	l ⊂ Ot	her (Describe):					02010			ie (emorannies	,	
Type o	f Disinfe	ctant Resid	ual Maint	aincd in Distributi	on System:	🗸 Free Chlori	ne Г	Combine	1 Chlorine (C	Chloramines) Г	Chlorine Dioxi	de	·
	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										.*	1	Ţ	
· · ·		.`	,			TCT Calcule	tions			······································	I. U	V Dose	1	
						NY 15	· · · · · · · · · · · · · · · · · · ·	<u> </u>		<u> </u>			-	· .
1	· ·	·				Disinfectant	Lowest CT	[`						
н. э 	Days Plant		Net	ļ ·	Lowest Residual	Contact Time	Provided Before or at			1	· · ·	1	Lowest Residual	-
	Staffed or		Quantity of		Disinfectant '	T) at C	First	· · .			Lowest		Disinfectant	Emergency or Abnormal Operatin
	Visited by		Finished	[· ·	Concentration (C)	-Measurement	Customer			Minimum	Operating		Concentration at	Conditions; Repair or Maintenanc
Day of			Water	·	Before or at First	Point During	During Peak		· .	ст	UV Dose,	Minimum UV	Remote Point in	Work that involves Taking Water
the :	(Place	Hours plant			Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required	mW-	Dose Required.		System Components Out of
Month	<u> </u>	in Operation 24.0	gal. 183,000	Peak Flow Rate, gpd.	Peak Flow, mg/L	• minutes	min/L	Water, "C	if Applicable	mg-min/L	sec/cm ²	mW-sec/cm ²		Operation
2.4	x	24.0	192,000	<u> </u>	2.5	<u> </u>							1.3 1.5	
-3:-5	X	24.0	199,000		2.5			 					1.4	
4.30	X	24.0	165,000	- -	3,0			{	<u> </u>	[{	<u> </u> -	1.9	<u></u>
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:36)		24.0												
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	x	24.0			2.8		ļ				<u> </u>	L	1.6	
107,1	<u> </u>	24.0	166,000	ļ	3.0	}	\$	}	}	┠─────	<u> </u>	<u> </u>	1.7	f
contras	x	24.0	154,000		2.5			<u> </u>					1.7	{ <u></u>
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C113-15		24.0	146,000											
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. 15 - 16	<u> </u>	24.0	95,000	<u> </u>	2.3	ļ].4	
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5.23 *:	X	24.0	145,000		2.9								1.6	
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3.26).#	<u>^</u>	24.0	162,000		<u>-</u>	t	├	 -	{				1.6	
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* Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555-900(3)Altamate

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



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I.

See Pages 4 for Instructions.				
I. General Information for the Month/	/Year of: June, 2007			
A. Public Water System (PWS) Inform	ation			
PWS Name: Tangerine Park			PWS Identification Number:	3481329
PWS Type: 🗹 Community	Non-Transient Non-Community	ransient Non-Community	Consecutive	
Number of Service Connections at End of Mont	th: 358	Total	Population Served at End of Month:	1,253
PWS Owner: Aqua Utilities Flori	ida			
Contact Person: Brian Heath		Conta	ict Person's Title: Area Mana	Sc1
Contact Person's Mailing Address:	PO Box 490310	City: Leesburg	State: Florida	Zip Code: 34749
Contact Person's Telephone Number:	(352) 787-0980	Conta	ct Person's Fax Number: (352) 787-	6333
Contact Person's E-Mail Address:	beheath@aguaamerica.com			
B. Water Treatment Plant Information	1			
Plant Name: Tangerine Park			Plant Telephone Number:	352-787-0980
Plant Address: 5551 Huron Street		City: Mt. Dora	State: Florida	Zip Code: 32757
Type of Water Treatment by Plant:	Raw Ground Water Purchased Fini	ished Water		
Permitted Maximum Day Operating Capacity of		360,000		
Plant Category (per subsection 62-699.310(4), E	F.A.C.): V	Plant C	lass (per subsection 62-699.310(4), F.A.	C.): C
Allicensed Operators	Name C. C. Martin Karaka	License Class License Number	Day(s)//Shif	t(s) Worked
Bead/Chlef Operator: Will Fontaine		C 6813	Days 1st Shift	
Other Operators Marty Neal	· · · · · · · · · · · · · · · · · · ·	C 10027	Days 1st Shift	
John Worrell		C 6597	Days 1st Shift	
Terry McCarthy	·	C4617	Days 1st Shift	
	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	·····
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II. Certification by Lead/Chief Operator

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

1-6-07

Signature and Date

.

Will Fontaine

Printed or Typed Name

C-6813 License Number

DEP Form 62-555..900(3)Alternate Effective August 28,2003

MONTHLY OPERATION REPORT FOR PW"Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

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PWS	dentificaito	n Number:	3481329		Plant Name:	Tangerine Park								
111. I	Daily Data	for the M	lonth/Yea	r of:	June, 2007				<u>-</u>					
				tivation/Removal:	📝 Free Chlo	prine T CH	lorine Diox	ide ("	Ozone	Combin	ed Chlorin	e (Chloramines)		
Γυ	ltraviolet R	adiation	່ 🎵 0ຄ	ter (Describe):	,	1 0,			Q20110	1 Comou			1	
-	a =				on System: 1	Free Chlorin		Combined	Chlorine (C	Chloramines)	Γ.	Chlorine Dioxic	ic	
848/C	191.92-550	NK TOR TOR	MAN COLOR	The set of street	A CHARTEN CAR		and the second second		- 1. A 1	S. Stade The				Emerican State of Automatican
	1.11		242	<u> </u>	Salculations; or l	UV Dose, to I	emostate I	our Log	Virus, Inaç	ivation, if	pplicable		average strange	
60,65	10-11-12	、基础的现代	的现在分		A KANDAR AND	CD'Calculat	ions intervent	Prairie And Deale	AND WAL	金融-公益 期	成成会儿	YIDOSO, et al N		
		2. 19 10				and the second second	Lowest CT	1516	在 上公司	12.5		Fritzen (
			19450248-5 19450-546-54			Disinfectant -	Provided					and Cate	55 A. 1997 A. 1	
	Deys:Elant		L. Net et al	S - 199	LowestiResidual	Gontaci I me i	Before or at		Sec. Barry		这个小学		Lowest Retidual	
	N.S.	必要却推	Quantity of		Construction of the second	Galdi al Galdi Galdi anglari	Solution of the second se	1/11/1	STAR OF		Contraction		Conditional Condition	Emergency of American Present
Dayo	Operator.	2.22	Water	在中华人民 学家的	Before or at First.	2Point During	During Peak			ALC: GOS	UV Dose	Minimum UV	Remote Pointsur	
う戦略	Plater	Hours plant	Producted		Quatomer During	Peak Flow	Plow, mg	Tenip of	pH of Water	Required	1.0 mWith	DosedCouncer	#Distribution	e a System Comparente Out of Se
Month	XXX	m.Operation	el gale a	Peak Flow Rate spd	Peak Flow, ng/U	dinules 4	了 min/C 小	Waters C	if Applicable	a min minut	sec/cm ²	mW-sec/cm ² +	> System mg/La	issued and the operation of the second
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- 16:	X	24.0			2.9								1,5	
217A	X	24.0			2.6				····				. 1.3	
19 <u>7</u>	Î 	24.0			2.8					<u> </u>	<u> </u>		1.5	·
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s: 16 (24.0			2.0								1.0	
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26	<u>x</u>	24.0			2.2								1.0	·
27 - 28, 1	X X	24.0 24.0			4.2	├ ╌ ─── ─ ─┤				<u> </u>			2.5	
29.4	X	24.0			3.8								2.3	
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2 31 2		24.0												
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Maximin 312,000

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* Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555.800(3)Allemate

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

July, 2007



See Pages 4 for Instructions.

I. General Information for the Month/Year of:

A. Public Water System (PWS) Information

PWS Name:	Tangerine Park						PWS Identification Numb	per: 3481329	
PWS Type:	Community	Non-Transient Non-Commu	unity 🔄 🗌 T	ransient Non-Com	munity	·	Consecutive		
Number of Service Connect	tions at End of Month	a: 358				Total	Population Served at End of	of Month: 1,253	
PWS Owner:	Aqua Utilities Florid	ia						_	
Contact Person:	Brian Heath	· · · ·				Conte	act Person's Title:	Area Manager	
Contact Person's Mailing A	ddress:	PO Box 490310			City:	Leesburg	State: Florida	Zip Code:	34749
Contact Person's Telephone	Number:	(352) 787-0980				Conta	act Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Ad		beheath@aquaamerica.co	<u>m</u>						
3. Water Treatment Pla	ant Information								
Plant Name:	Tangerine Park						Plant Telephone Number,	352-787-0	980
Plant Address:	5551 Huron Street		··		City:	Mt. Dora	State: Florida	Zip Code:	32757
Type of Water Treatment by	Plant:	Raw Ground Water	Purchased Fin	ished Water					
Permitted Maximum Day O	perating Capacity of	Plant, gallons per day:		360,000					
Plant Calegory (per subsection	ion 62-699.310(4), F.	. <u>A</u> .C.):V				Plant C	Class (per subsection 62-699	0.310(4), F.A.C.): C	
aUlcensed Operators	Print and the set	and the fail Name Even with		License Class	. Luce	nseiNunhber	,在新教徒也为如此关于如Da	iy(s)//Shift(s);Worked	KIND PHONE THE
Lead/Chief/Operatoral	Will Fontaine			С		6813	Days 1st Shift		
Other Operators (1245)	Marty Neal			С		10027	Days 1st Shift		
	John Worrell			С		6597	Days 1st Shift		
	Terry McCarthy			С		4617	Days 1st Shift		·
	· ·								
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II. Certification by Lead/Chief Operator

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- 8-8-07

Will Fontaine

Signature and Date 5

DEP Form 62-555, 900(3)Alternate Effective August 28,2003

Printed or Typed Name

C-6813

License Number

REPORT FOR PW"Ss	TREATING RAW GROUND WATER	OR PURCHASED FINISH	IED WATER

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PWS Ide	ntification	Number: 3	481329		Plant Name:	Tangerine Park									
					July, 2007										_
				ivation/Removal:			le le Dier		Drone	r Cambin	ad Chlorine	(Chloramines)			
	raviolet Ra			er (Describe):	it Hee Chio		norme Diox		02016	1 Comou		(Chiorannico)			_
	aviolet Ra		1 Ou	er (Describe):		7		Combined	Chlorine (C	hioramines)	r	Chlorine Dioxid	ė.		
Type of	Disinfec	ant Residu	al Mainta	ined in Distributio	on System: N	Pree Chioru	C C C C C C C C C C C C C C C C C C C	201101100	Children (C		Mar and the				1. Y
22	1.00		1. E. 14	GT CT CT C	alculations; or, l	JV:Dose, toil	emostate	our-Log.	Virusinact	ivation, ur/	pplicable	an an ar an ar	A CALERCON	Control of the second s	8.0
			教育会社		A SHORE WITH	P-1+CTICalcula	fique et a	夏75,235	他的全部	時時にはは	出版和印刷	/ Dose Lts Fight			
1000				MARCH SALE		数学がある		2 C 6		其称 中,列出	这一种 样				建 后
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			N P	这个人, 这个人	Dowest Residual	Contact Time	Before or at						Heart States		
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	CALLED		Rimished		Concentration (C).	Measurement	Customer			Stylinimum s	TVDAG		1Concentration at		
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1337	X	24.0	54,000		3.4							- <u>-</u>	2.0		
	x	24.0	81,000		3.2		·						2.0		
	X	24.0	91,000		3.4				· · · · · · · · · · · · · · · · · · ·			<u> </u>	2.0		
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	×	24.0	114,000		2.3								1.4		
10.6	x	24.0	133,000	· · · · · · · · · · · · · · · · · · ·	2.4								1.4		
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A12%	X	24.0	140,000		4.0	ļ 	1		· · · ·	<u>}</u>	<u> </u>		3,1		
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4 16 12	×	24.0	91,500		2,9								2.0		
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- 20	X	24.0	182,000		3,6	l	<u> </u>	├ ─────┤		<u> </u>	<u> </u>		1.9		_
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-25-	Î	24.0	95,000	<u></u>	2.0								<u> </u>		
·126	$-\hat{\mathbf{x}}$	24.0	112,000		2.3					ļ			1.5		
27	X	24.0	96,000		3.0	ļ		<u> </u>	<u> </u>	<u> </u>	<u> </u>		1.8		
-28	x	24.0			2.7			<u>+</u>		d	 -	{	1./		
· 29		24.0			3.2	<u> </u>				┼╾╼╾╌	+	·	1.8		
30	x	24.0			2.7		+	+	t	<u>+</u>	<u>†</u>		1.7		
31	X	24.0				L		<u></u>							
1 Diane	18. A		3,2,0,000	4											

Average 105,677 Idaximum #100,000

 Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555.800(3)Alternate MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instruction)IIS,								
L. General Information for	the Month/Year o	of: August, 2	2007					······································	
A. Public Water System (PW	VS) Information	· _ · · · · · · · · · · · · · · · · · ·		······································					
	erine Park						PWS Identification Numb	er: 3481	329
PWS Type:	Community	Non-Transient Non-Comm	nunity	Transient Non-Com	munity		Consecutive		<u> </u>
Number of Service Connections a	t End of Month:	358				(Tota)	Population Served at End o	f Month: 1,253	
PWS Owner: Aqua	Utilities Florida								
Contact Person: Brian	n Heath					Conta	ct Person's Title:	Area Manager	
Contact Person's Mailing Address	and the second	x 490310			City:	Leesburg	State: Florida	Zip C	ode: 34749
Contact Person's Telephone Num		787-0980				Conta	ct Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Address:		ath@aquaamerica.c	om						
3. Water Treatment Plant I									
	crine Park	······					Plant Telephone Number:	the second s	87-0980
	Huron Street			· · · · · · · · · · · · · · · · · · ·	City:	Mt. Dora	State: Florida	Zíp C	lade: <u>327</u> 57
Type of Water Treatment by Plan		Raw Ground Water	Purchased I	Finished Water					
Permitted Maximum Day Operati		gallons per day:		360,000					
Plant Category (per subsection 62	-099.310(4), F.A.C.):		Subdition in a start the		311282.00	Plant C	ass (per subsection 62-699	.310(4), F.A.C.);	C
Lead/Chief Operators will	Contrine	A PARAMIC SALES AND		22- TEICEISO ATASS	Tricel			V(S) Shin(S) WOL	1007-00-00-00-00-00-00-00-00-00-00-00-00-
Other Operators 12 Mart						6813 10027	Days 1st Shift Days 1st Shift		
The second s	Worrell				<u></u>	6597	Days 1st Shift		<u> </u>
	McCarthy				<u> </u>	4617	Days 1st Shift		
						4017	Days Ist Stillt		
					<u> </u>			······································	
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		······································							
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II. Certification by Lead/Chief Operator

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

9.7.07

Signature and Date

DEP Form 62-555.,900(3)Alternate Effective August 28,2003 Will Fontaine

Printed or Typed Name

C-6813 License Number

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		MONTH				PW"Ss TR	EATING	RAW	GROUNI	D WATE		URCHASE	D FINISHE		ર
PWS Ider	ntificaito	n Number:	3481329		Plant Name:	Tangerine Parl									
III. Dai	ilv Data	for the M	onth/Yea	r of:	August, 2007										
				tivation/Removal:	🔽 Free Ch		hlorine Dio:	nida l	- Ozone	Combi		- (Chlann-inco	·····		
		adiation		her (Describe):	14 1144 011			006 (OZONE	(Combi	nea Chiorin	e (Chloramines)		•
F	Distant	ata - t D i d		alian and the Distance in the second	ion System:	🔽 Free Chloriu	ne l	Combined	d Chlorine (Chloramines		Chlorine Dioxi	ie		
	248.74	- 	A. Soci Quei	Anned In Distributi	Entration of	A BLACK STORE	NG WY CAR	4.4.7 G		A			CONTRACT N	N. C. C. C.	
			2.2.3	<u> </u>	Calculations, or	WDose, to I	Demostate,	Four-Log	V.mus.Inac	tivation; if	Applicable				
	(1,1)		8,404.7		The second s	A Cli Calcula I estata	tions's ? Self		ente provinción Technicador de la	THE HIM		V Dose a mara	and the second		
	¥ 5,000				10016142-0-000		t Lowest CT.	A State State	Sec. 1	油砂 港道	「東京市	15-3-3-2-18		1000	
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	e di dicitati Sedicolori		Quarteryof		1. Disinfectant.		E Birst re			10.5	Lowester		A DIGREGATING	Binding-navol	ູ່ ໃຫ້ເອົາເຫັນເອົາເອົາ
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	4.92.01 -	n Operation		Pencerlow Rate rend	SPeak Flow mg/b	a sminules a	Liow mg-	Waters C	if Applicable				a selen en e	STATISTICS STATISTICS	
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	<u>x</u> x	24.0			2.6			 		<u> </u> `		<u> </u>	1.8	 	
	<u> </u>	24.0	120,000	<u> </u>	2.7	<u> </u>		<u> </u>		`~	<u> </u>	<u> </u>	1.8		
200 S	X	24 0			2.4			1	<u> </u>	<u>}</u>	<u>}</u>	·	1.7		
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1948 1949	X	24.0	140,000		2.5							[1.6		
S-410-5	X	24.0			2.4	<u> </u>		<u></u>			·	}	1.7		i
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123	·	24.0													
674151A 3/1475	x	24.0			1.9			[·	}	[1,2		
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28	<u>x</u>	24.0			2.8		ļ						1.7		
29 30	X	24.0	147,000		2.6		<u> </u>	 		<u> </u>		····-	1.6		· · · · · · · · · · · · · · · · · · ·
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Maximum Refer to the instructions for this report to determine which plants must provide this information. DEP form 62-555 800(3)Alternate

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:

September, 2007

A. Public Water System (PWS) Information

PWS Name:	Tangerine Park					PWS Identification Num	iber: 3481329	
PWS Type:	Community	Non-Transient Non-Comm	unity Transie	ent Non-Communit	tγ 🗌	Consecutive		
Number of Service Connect	tions at End of Month	1:358			Total I	Population Served at End	of Month: 1,253	
PWS Owner:	Aqua Utilities Florid	ta						
Contact Person:	Brian Heath				Contac	ct Person's Title:	Area Manager	
Contact Person's Mailing A		PO Box 490310		City:	Leesburg	State: Florida	Zip Code;	34749
Contact Person's Telephone	e Number:	(352) 787-0980			Contac	ct Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Ac		beheath@aquaamerica.cc	om					
3. Water Treatment Pla	ant Information							
Plant Name:	Tangerine Park					Plant Telephone Number	r: 352-787-09	80
Plant Address:	5551 Huron Street	× .		City:	: Mt. Dora	State: Florida	Zip Code:	32757
Type of Water Treatment by	y Plant:	Raw Ground Water	Purchased Finished	Water				
Permitted Maximum Day O	perating Capacity of	Plant, gallons per day:	360,	000		· · · · · · · · · · · · · · · · · · ·		
Plant Category (per subsect		.A.C.):V				lass (per subsection 62-69		
difficensed.Operators	Service and the service of the servi						9.310(4), F.A.C.): C Day(s)/Shift(s).Worked	199. S. S. A. M. A. M.
Ellicensed Operators a Beld/Ghief Operators	Will Fontaine	.A.C.):V						
Schurchsed Operators Schurch Operators Office Operators	Service and the service of the servi	.A.C.):V			ense Number 6813	Barna Barna Andere		
Ellicensed.Operators Beld/Gluet.Operators Office.Operators	Will Fontaine Marty Neal John Worrell	.A.C.):V			cense Number' 6813 10027	Days 1st Shift		
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II. Certification by Lead/Chief Operator

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

ロ・リーロフ

Will Fontaine Printed or Typed Name C-6813

Signature and Date

DEP Form 62-555..900(3)Attemate Effective August 28,2003

Page 1

License Number

MONTHLY OPERATION REPORT FOR PW"Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

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PWS Id	entification	n Number:			Plant Name:	Tangerine Park								
HL D	aily Data	for the M	onth/Yea	r of:	September, 2007									
				tivation/Removal:			alorine Dia	vide E	Ozone	[Combir	ed Chlorin	e (Chloramines)		
	raviolet R			her (Describe):	,		House Die		01,010	i Comou		e (emotamines)	,	
Type of	f Disinfec	tant Residu		aturat in Diracitati	on System:	Free Chlorin	e Г	Combined	Chlorine (C	(hloramines)		Chlorine Dioxid		
3.15 M	CONCEPTS	19 C C	3 500 V 12	Ret Barreto Cara	Washer of the M	Sec. Margaret	histria.	والموالي المحالية المحالية	Aller Tables	and the second se	Andreas and a state	a transformer and the		
6.44		and the se	See. She		Calculations, or.	UV: Dose, to L	emostate.	our-Log	Varusanaci	ivation, if	Applicable	<u> </u>		No. (no. 17 Street Street)
		6 N.J. M.		and a start of some of a	<u></u>	CT Calcula	tions of the	المراجع المراجع المراجع المراجع		a Farth Control 7.	λοίμ - <u>P</u> U)	V Dose		
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你 必要		1.4.194	S Nel Alt		Lowest Residual	Contact Lime	Before of at				Lowest		Disinfertant	
	Visited by	3.00	, Finished		Concentration (C)	Measurement	Customer	and a star		Minimum	Operating		Concentration at	Conductions & sharrior, Maintenaru
Diffet	Cipenade	12.00	e Waters		Before on at First	# Point During	During Peak	283	A CAR	a Cr	UV Dose,	Minimum UV-	Rentoic Point in	Worksthatthweises/ratingsWale
SUDO IS		Hours plant	Erodučiedi	· 中国 · 中国 · 中国	Customer During	Peak Flow	-Flowing-	Li emp or	pH of Water	Required,	, m₩- Sign (2)	Dose Required	Distribution	c. System/Components/Our of a
	X X	n Operation 24.0	108,000	Incence low ketter Bbg	Peak Plow mg/15	servininuce of a	DACHINE (18	Water 732	n Abbicanic	ំពាន-យាហទ	i sec/cm;	mw-sec/cm ⁻³	System, mg/LS	Emergent Of A profile of a feat water System of a profile of a feat water System of a profile of a feat water System Composition of a feat of water Stem Composition of a feat of water Stee Operation of a feat of the stee of a feat of the stee of a feat of the stee o
3.2		24.0	100,000	·	1	<u> </u>	<u>_</u>	├───┤					1.0	·····
1.16	X	24,0	100,000		2.2								1.5	
100	X	24.0			2.0								1.0	
- 54K	X X	24.0 24.0	117,000	<u> </u>	2.9			┟───┤					1.3	
1.1.760	x	24.0	143,000	<u> </u>	2.3			┢					<u> </u>	<u> </u>
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25	X	24.0	88,000		1.9	[11					1.0	
-26	x	24.0	98,000		2.5				·				2,0	
.27	x	24.0	77,000		2.8								1.7	
28 29	<u>x</u>	24.0	119,000	}	2.7			├		·	_		1.7	
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Total			3,275,000			·							······································	· · · · · · · · · · · · · · · · · · ·
			105,645											
Maximuz	<u>n</u>	<u>,</u> »	151,000]								•		

* Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555-900(3)Akemste

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

October, 2007



See Pages 4 for Instructions.

1. General Information for the Month/Year of:

A. Public Water System (PWS) Information

PWS Name:	Tangerine Park			· · · · ·		PWS Identification Number:	3481329
PWS Type:	Community	Non-Transient Non-Comm	unity [Transient Non-C	Community	Consecutive	
Number of Service Connectio	ns at End of Month:	358				al Population Served at End of Month:	1,253
PWS Owner:	Aqua Utilitics Florida						
Contact Person:	Brian Heath				Co	ntact Person's Title: Area M	lanager
Contact Person's Mailing Add	iress:	PO Box 490310			City: Leesburg.	State: Florida	Zip Code: 34749
Contact Person's Telephone N	lumber:	(352) 787-0980	· · · ·		Co	ntact Person's Fax Number: (352) 7	787-6333
Contact Person's E-Mail Addr	1058:	beheath@aquaamerica.co	om				
Water Treatment Pla	nt Information			· · · · · · · · · · · · · · · · · · ·			
Plant Name:	Tangerine Park					Plant Telephone Number:	352-787-0980
Plant Address:	5551 Huron Street				City: Mt. Dora		Zip Code; 32757
Type of Water Treatment by I	Plant;	Raw Ground Water	Purchased	Rnished Water			
Permitted Maximum Day Op		lant, gallons per day:		360,000		and the second	
Plant Category (per subsection				······		nt Class (per subsection 62-699.310(4),	F.A.C.): C
Licensed Operators	经书 化过程分析 医	Name Sale	A RECEIPTED	License Ol	assi detectise Numb	er Synth Martin CalDay Gins	hift(s)Warked & Associate
Lead/Chief.Operator:	Will Fontaine			C	6813	. Days 1st Shift	
	Marty Neal			c	10027	Days 1st Shift	·····
	John Worrell	and the second		lc .	6597	Days 1st Shift	
20 M	Terry McCarthy	2 and the a state for the		C	4617	The second s	
			Carl Sale		1		
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II Certification by Lead/Chief Operator

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

1/0-07

Signature and Date

DEP Form 62-555..900(3)Alternate Effective August 28,2003

Will Fontaine

Printed or Typed Name

C-6813 License Number

MONTHLY OPERATION REPORT FOR PW"Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER PWS Identification Number: 3481329 Plant Name: Tangerine Park HI. Daily Data for the Month/Year of: October, 2007 Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide C Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation [Other (Describe): Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chiorine Dioxide CINCILIATION ាលាកីឡាំ ALC: A CONTRACTOR OF A CONTRAC A. Star ICIN AB TITY ay e 1400 Mont ALXON 一, " X 24.0 97,000 3.5 . . . 15 444 X 24.01 87,000 22 · . . ч. ^{с.} С. Г. 2.64 4.20 13 Bie X 24.0 87,000 * 2,4 6 P.F 1.1.2 X 24.0 75,000 2.4 65 Te ... 15.545 X 24.0 75,000 2.2 2.59 2 r 1.5 **4.66** X 24:0 89,000 23 5 . C. S. 1.3 编列编 24.0 109,000 · · · · · · 1----22 86 16 B X 24.0 109,000 1.2.5 1.1.1.1. 51 6. 17 - 16 V - 16 ∛. **1** 34 A-1. 1983 Χ. 24.0 78.000 2.2 'ľ.3' 2.000mg X 24.0 .95.000 22. 3.366.6 S. 74 . C . Sa. 和社会 X 24.0 104,000 1422 _____ A N. 6 53 M . S . 13. X 24.0 104,000 .2.8 εù 4 7. 4.1 Cartes A 14 1.50 S. 14 Arel 9 25 : X' 24.0 114,000 3.4 4044 24.0 123:500 31. 14 - 44 - 12 24.0 123,500 ·X 2.8 公平1649 X 24.0 \$7,000 2.8 2.0. 14 M 1 X 24:0 134,000 \$ 3.6 Sec. 1. 1. 1. 1. 5453 Serve She che out . St. . 180 X 24.0 130,000 WB1 Acres See. 86. 4 . 6 . 1.0 1 40. W 1 + 2.4 **新闻日体** X 24.0 115,000 1. 5.95 1. 1. 1600 diam'r ar a d CF. DEC. $x \sim g_{2}$ 9 20 4 24.0 X-· 96,000 Section of the sectio 4 3.0 Sec. 3.0 Sec. A. in 1210 24.0 S. O. S. Sand 1 54 8 20 442.2 X 24.0 89,500 + **2**' I. 4.1. 28 2. $-De^{-1}$ X 24.0 .75,000 S. M. S. S. S. 3.0 × > X turk 191. AL 191. 194. 19. . A Sugar Sec. 368 2.0 192.3 X 24.0 Sec. Sec. ~ 99,000 23.1 SUSA A A 12 325.5 X .24.0 87,000 2.8 A State State 1. Sec. 1. Sec. 31 9. 182 0.2642 24.0 X 86,000 2.8 A. A. Acres 1 1.8 1.8 M. S. **4**.27的 X 24.0 100.000 1 P. 19 1 8m 181.5 2.1 (* . j. s 15.28 24.0 -100,500 dite. 2.05 144 18 P. 18 16 18 1974 N. 1 14 14 S 12 QQ.) X 24.0 100,500 2,8 14.1 Ja ** 1. m . . 2.2 8. SO 3 X 24.0 68,000 2.4 1.6.1 Sec. 34 Sec. 8 8 8 V S F. 14 A 19 19 193 6 3. 63. 6 24.0 - 99,000 513316 X 1. 1. 18 A Storage 7. 8. 22 8. 78 Print States 3,026,000 97,613 Marinum 134,000

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

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MONTHL	Y OPERATION	N REPORT FOR F	PWSs TREA	TING RAW GR		R OR PURCH	ASED FINI	SHED WA	TER
THE HORN DE									
FLORIDA									
See Pages 4 for Inst	tructions								
General Informatic	on for the Month/	Year of: Nov	ember, 2007				e telefore en		Mr. All Michel
Public Water Syste	m (PWS) Informs	tion							
PWS Name:	Tangerine Park			· · · · · · · · · · · · · · · · · · ·		PWS Identification N	umber:	3481329	
PWS Type:	Community	Non-Transient Non-	Community	Transient Non-Con	nmunity	Consecutive			
Number of Service Conne	ctions at End of Month	358			Tota	Population Served at E	nd of Month:	1,253	
PWS Owner:	Aqua Utilitics Florid	8							
Contact Person:	Brian Heath	ويتراوين والمروي والمعرين	a sterit i set		Cont	act Person's Title:	Агеа Мапаз	¢T.	
Contact Person's Mailing	Address:	PO Box 490310		· · ·	City: Leesburg	State: Florida		Zip Code:	34749
Contact Person's Telephon	ne Number:	(352) 787-0980		· · · · · · · · · · · · · · · · · · ·	Cont	act Person's Fax Numbe		333	
Contact Person's E-Mail /		beheath@aquaamer	ca.com	· · · · · · · · · · · · · · · · · · ·			a de la compañía de l		
Water Treatment P	'lant Information								
Plant Name:	Tangerine Park		·	· · · · · · · · · · · · · · · · · · ·		Plant Telephone Num	iber:	352-787-09	80
Plant Address:	5551 Huron Street			1	City: Mt. Dora	State: Florida	And the second	Zip Code:	32757 . a. La.
ype of Water Treatment		Raw Ground Water	Purchas	ed Finished Water					
ermitted Maximum Day				360,000		· · · · · · · · · · · · · · · · · · ·			
Plant Category (per subse			V		Plant (Class (per subsection 62	-699.310(4), F.A.(C.): <u>C</u>	
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H. Certification by Lead/Chief Operator

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

12-6-07

Signature and Date

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 DEP Form 62-555.900(3)Alternale Effective August 28,2003

Will Fontaine

Printed or Typed Name

C-6813 License Number

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		for the Ma			November, 2007											· · · · · · · · · · · · · · · · · · ·
				tivation/Removal:	Free Chi		Chlorine Dio	ide [Ozone	Combiz	ed Chlorin	e (Chloramines)				
	aviolet Ra			her (Describe):	J♥ Piœ en	, (44C	02012	1		- (
				ained in Distributio	on System:	Free Chlor	ine 🔽	Combined	Chlorine (Chloramines)	, T	Chlorine Dioxid	e			
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 Refer to the instructions for this report to determine which plants must provide this information. DEP Form 82-855.900(3)Alternate

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MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER Polymer Page 3 Due in December See Pages 4 for Instructions. I. General Information for the Month/Year of: December, 2007 1. . . . A. Public Water System (PWS) Information PWS Name: Tangerine Park PWS Identification Number: 3481329 PWS Type: Community Non-Transient Non-Community Transient Non-Community Consecutive Number of Service Connections at End of Month: 358 Total Population Served at End of Month: 1:253 PWS Owner: Aqua Utilities Florida Contact Person: Area Manager Brian Heath ... <u>.</u>* Contact Person's Title: A 17 Contact Person's Mailing Address: PO Box 490310 City: Leesburg State: Florida Zip Code: 34749 . Contact Person's Telephone Number: (352) 787-0980 Contact Person's Fax Number: (352) 787-6333 Contact Person's E-Mail Address; beheath@aguaamerica.com **B. Water Treatment Plant Information** Plant Name: Tangerine Park Plant Telephone Number: 352-787-0980 14 14 Plant Address: 5551 Huron Street City: Mt. Dora Zin Code: 32757 State: Florida Purchased Finished Water Type of Water Treatment by Plant: Raw Ground Water Permitted Maximum Day Operating Capacity of Plant, gallons per day; 360.000 Plant Category (per subsection 62-699.310(4), F.A.C.): v Plant Class (per subsection 62-699,310(4), F.A.C.): Ċ License Class License Number albicensed Operators and the second ad/Chief Operator Will Fontaine IC. 6813 Days 1st Shift er Opérators Marty Neal С 10027 Days 1st Shift John Worrell С 6597 Days Ist Shift Terry McCarthy Ĉ 4617 Days 1st Shift . .

II Certification by Lead/Chief Operator

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

- 1-9-08 Signature and Date

Will Fontaine Printed or Typed Name C-6813 License Number

DEP Form 62-555, 900(3)Alternete Effective August 28,2003

PWS Ider	tificailo	Number:	3481329		Plant Name:	Tange	rine Park									
UL Dai	ly Data	for the M	outh/Yea	r of:	December, 200	7										
				tivation/Removal:	🔽 Free C	hlorine	Гс	hlorine Dio:	dde f	- Ozone	🖵 Combi	ned Chlorir	c (Chloramines)		
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* Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555.600(3)Alternation

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

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PW	S ID:	3481329	Plant Name:	Tangerine Pa	rk	
IV.	Summary of Use of Poly	mer Containing Acrylami	de, Polymer C	ontaining E	pichlorohydrin, and tro	n or Manganese Sequestrant for the Year: * 2007
A	. Is any polymer containing the me follows:	onomer acrylamide used at the wa	ater treatment plant	?	✓ No	he polymer dose and the acrylamide level in the polymer are as
	Polymer Dose ppm =				Acrylamide Level, %'=	
В.	, is any polymer containing the mo polymer are as follows:	onomer <u>epichlorohydrin</u> used at t	he water treatment	plant?		s, and the polymer dose and the epichlorohy drin level in the
	Polymer Dose ppm =				Epichlorohydrin Level, %'=	
C.	. Is any iron or manganese seques!	trant used at the water treatment p	lant?	No No	Yes, and the type of se	questrant, sequestrant dose, ect., are as follows:
	Type of Sequestrant (polyphosph	ate or sodium silicate):	······································			
	Sequestrant Dose, mg/L of phose	phate as PO4 or mg/L of silicate a	s SiO₂ ⇔			
	If sodium silicate is used, the am	ount of added plus naturally occu	mring silicate, in m	g/L as SiO ₂ =		

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

⁴ Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

HON THEY OF ERATION REPORT FOR PWSS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

January, 2006



See Pages 4 for Instructions.

I. General Information for the Month/Year of:

A. Public Water System (PWS) Information

PWS Name:	Tangerine Park		······································		·····	PWS Identification Numb	ber: 3481329	
PWS Type:	Community	Non-Transient Non-Co	ommunity	ransient Non-Comr	nunity	Consecutive		· · · · · · · · · · · · · · · · · · ·
Number of Service Connect	tions at End of Month	1: 358				otal Population Served at End of	of Month: 1,253	
PWS Owner:	Aqua Utilities Florid	ia						
Contact Person:	Brian Heath		·		0	ontact Person's Title:	Area Manager	
Contact Person's Mailing A		PO Box 490310			City: Leesburg	State: Florida	Zip Code:	34749
Contact Person's Telephone	the second se	(352) 787-0980				ontact Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Ad		beheath@aquaameric	a.com		· · · · · · · · · · · · · · · · · · ·			
3. Water Treatment Pla	ant Information							
Plant Name:	Tangerine Park					Plant Telephone Number:	352-787-0980)
Plant Address:	5551 Huron Street				City: Mt. Dora	State: Florida	Zip Code:	32777
Type of Water Treatment by		Raw Ground Water	Purchased Fini	shed Water				
Permitted Maximum Day C	Operating Capacity of	Plant, gallons per day:		360,000		· · · · ·		
Plant Category (per subsect	tion 62-699.310(4), F.		V		Pla	unt Class (per subsection 62-699	9.310(4), F.A.C.): C	
Licensed Operators		Name		License Class	License Num	ber	ay(s) / Shift(s) Worked	
Lead/Chief Operator:	Will Fontaine			С	6813	Days 1st Shift		
Other Operators:	Marty Neal			С	10027	Days 1st Shift		
	John Worrell			С	6597	Days 1st Shift		
	i							
	·							
		······		i				

II Certification by Lead/Chief Operator

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

2-6-06 Signature and Date

Will Fontaine Printed or Typed Name

DEP Form 62-555..900(3)Alternate Effective August 28,2003

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Page 1

<u>C-6813</u>

License Number

Staffed or Visited by Operator (Place (Place WaterQuantity of FinishedDisinfectant Concentration (C) Before or a First Operator (Place Water(T) at C Measurement Customer Dend Dring Dend First (Diater During) Dend Toring (Place TO TO TO (Place TO (Place TO TO (Place (Place TO (Place (Place TO (Place TO (Place TO (Place TO (Place TO (Place (Place (Place TO (Place <	FINISHEI Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
III. Daily Data for the Munth/Venr of: January, 2006 Means of Achieving Four-Log Virus Inactivation/Removal: If Free Chlorine Construction Dioxide Ozone Combined Chlorine (Chloramines) Type of Disinfectant Residual Maintained in Distribution System: If Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide Days Plant Net CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable* It was the combined Chlorine (Chloramines) Chlorine Dioxide Staffed or Visited by Prinsbed Concentrations Concentrations UV Dose It was the comparison of the compari	Disinfectant Concentration at Remote Point in Distribution	Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of
Means of Achieving Four-Log Virus Inactivation/Removal: Image: Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Type of Disinfectant Residual Maintained in Distribution System: Image: Chlorine Combined Chlorine (Chloramines) Image: Chlorine	Disinfectant Concentration at Remote Point in Distribution	Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of
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Type of Disinfectant Residual Maintained in Distribution System: Image: Cr Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable* Chorne Dioxide Days Plant Net Cr Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable* UV Dose Days Plant Net Demostate Four-Log Virus Inactivation, if Applicable* UV Dose Days Plant Net Demostate Four-Log Virus Inactivation, if Applicable* Invest Cr Days Plant Net Demostate Residual Contact Time: Before or at First Howest Cr Operator Water Prinished Demostrate Residual Contact Time: Before or at First Howest, Fouring Plant Lowest, Fouring Plant Net 1 24.0 116,500 27 Minimum V Plant Provided mW- more readiant	Disinfectant Concentration at Remote Point in Distribution	Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of
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Avgerage 131,968 Maximum 181,000		

 Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555.900(3)Alternate

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See Pages 4 for Instructions. I. General Information for the Month/Year of:

February, 2006

A. Public Water System (PWS) Information

PWS Name:	Tangerine Park				in a star picture of		PWS Identification Number:	3481329
PWS Type:	✓ Community	Non-Transien	t Non-Community	Transient Nor	-Community	/	Consecutive	
Number of Service Co	onnections at End of Mon	th:	358		in an		I Population Served at End of Month:	1,253
PWS Owner:	Aqua Utilities Flor	ida			Jul 2005	製品 泉の石油	an a	and the second
Contact Person:	Brian Heath					Con	tact Person's Title: Area Man	lager
Contact Person's Mail	ing Address:	PO Box 490310			City:	Leesburg	State: Florida	Zip Code: 34749
Contact Person's Tele	phone Number:	(352) 787-0980			2. 198 Z	Con	tact Person's Fax Number: (352) 787	-6333
Contact Person's E-M		beheath@aquaa	america com					
Water Treatmen	t Plant Information	1						
Plant Name:	Tangerine Park						Piant Telephone Number:	352-787-0980
Plant Address:	5551 Huron Street				City:	Mt. Dora	State: Florida	Zip Code: 32777
Type of Water Treatm	ent by Plant:	Raw Ground W	/ater Purchas	ed Finished Water				
Permitted Maximum I	Day Operating Capacity o	f Plant, gallons per day:		360,000				
Plant Category (per su	ubsection 62-699.310(4), 1	F.A.C.):	X				Class (per subsection 62-699.310(4), F.A	
	ons estate the second	A second states	an in a start and a start a	sees dicensed	ARS CLIP	insensionitie	n Development of Day(s) (Shi	ft(s) Worked in 15
	Will Fontaine		an sa kata ang tang tang tang tang tang tang ta	C	- iQ.	6813	Days 1st Shift	
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II Certification by Lead/Chief Operator

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

3-6-06 Signature and Date

Will Fontaine

Printed or Typed Name

C-6813

License Number

DEP Form 62-555..900(3)Alternate Effective August 28,2003

5 Identificant	on Number:	3481329		Plant Name:	Tangerine Par	k –	·					
Daily Dat	a for the N	lonth/Yea	ir of:	February, 2006								
ins of Achiev	ing Four-Log	g Virus Inac	tivation/Removal:	🔽 Free Chi	orine Г	Chlorine Dioxide	☐ Ozone	C Combi	ned Chlorir	e (Chloramine		
Ultraviolet F	adiation	C Ot	her (Describe):				1 02012	J. Comon			5)	
e of Disinfe	ctant Resid	ual Maint	ained in Distribut	ion System:	Free Chlori	ine Com	oined Chlorine	(Chloramines)		Chlorine Diox	ide	
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* Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555.900(3)Atlemate

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HONINLY CHERATION REPORT FOR PWSS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of:

March, 2006

A. Public Water System (PWS) Information

PWS Name:	Tangerine Park						PWS Identification Number:	3481329
PWS Type:	Community	Non-Transient Non-Com	munity	Transient Non-C	Community		Consecutive	
Number of Service Co	onnections at End of Mor	nth: 358				Tot	al Population Served at End of Month:	1,253
PWS Owner:	Aqua Utilities Flo	nida 🕺 🖉						
Contact Person:	Brian Heath					Cor	ttact Person's Title: Area Man	ager
Contact Person's Maili	ing Address:	PO Box 490310			City:	cesburg	State: Florida	Zip Code: 34749
Contact Person's Telep	ohone Number:	(352) 787-0980			1.10 ST	Cor	tact Person's Fax Number: (352) 787	-6333
Contact Person's E-Ma	ail Address:	beheath@aquaamerica.c	om					
Water Treatmen	t Plant Informatio	n						
Plant Name:	Tangerine Park						Plant Telephone Number:	352-787-0980
Plant Address:	5551 Huron Stree		ىرىنى ئېزىكى رونىي يېزىكى شىيى		City:	Mt. Dora	State: Florida	Zip Code: 32777
Type of Water Treatme	ent by Plant:	Raw Ground Water	Purcha	sed Finished Water				
Permitted Maximum E	Day Operating Capacity	of Plant, gailons per day:		360,000				
Plant Category (per su	bsection 62-699.310(4),	F.A.C.):					Class (per subsection 62-699.310(4), F.A	
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II. Certification by Lead/Chief Operator

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

Signature and Date

DEP Form 62-555..900(3)Alternate Effective August 28,2003 Printed or Typed Name

Will Fontaine

C-6813 License Number

Identifica	aiton Numbe	: 3481329	ERATION RE	Plant Name:	Tangerine Par	-				in the second se		<u> </u>		
Daily D	ata for the	Month/Ye	ar of:	March, 2006	1	a. Tariya ara								
is of Achi	eving Four-L	og Virus Ina	ctivation/Removal:			Chlorine Dio	anida F	- 0			(0) 1			· · · · · ·
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WUNTEL OFERATION REPORT FOR PWSS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

Antonio Carlos Carlos

April, 2006



See Pages 4 for Instructions.

1. General Information for the Month/Year of:

A. Public Water System (PWS) Information

PWS Name:	Tangerine Park				PWS Identification Number:	3481329
PWS Type:	Community	Non-Transient Non-Community	/ Transient Non-Con	munity	Consecutive	
Number of Service Co	onnections at End of Mon	nth: 358			al Population Served at End of Month:	1,253
PWS Owner:	Aqua Utilities Flo	rida				and a second
Contact Person:	Brian Heath			Сог	tact Person's Title: Area Mar	iager
Contact Person's Mail		PO Box 490310		City: Leesburg	State: Florida	Zip Code: 34749
Contact Person's Telep	phone Number:	(352) 787-0980		THE LOCAL DATA AND A DATA	tact Person's Fax Number: (352) 787	-6333
Contact Person's E-Ma		beheath@aquaamerica.com	te de la companya de	 A (1.2) A (1.2)		
Water Treatmen	t Plant Informatio	n				· · ·
Plant Name:	Tangerine Park				Plant Telephone Number:	352-787-0980
Plant Address:	5551 Huron Street			City: Mt Dora	State: Florida	Zip Code: 32757
Type of Water Treatm		Raw Ground Water	Purchased Finished Water			
Permitted Maximum I	Day Operating Capacity	of Plant, gallons per day:	360,000	and the second		
Plant Category (per su	bsection 62-699.310(4),	F.A.C.):		Plant	Class (per subsection 62-699.310(4), F.A.	A.C.): C
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II. Certification by Lead/Chief Operator

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

5.5.06

Signature and Date

DEP Form 62-555..900(3)Alternate Effective August 28,2003 Will Fontaine

Printed or Typed Name

C-6813

License Number

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* Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555.900(3)Atternate .

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See Pages 4 for Instructions.

I. General Information for the Month/Year of:

May, 2006

A. Public Water System (PWS) Information

Tangerine Park			and the state of t		·····	PWS Identification Nu	mber:	3481329	
		Community		community		Consecutive			
nections at End of Mon	th: 358					al Population Served at En	d of Month:	1,253	
Aqua Utilities Flori	ida				•				
Brian Heath					Con	ntact Person's Title:	Area Mana	ger	
ng Address:	PO Box 490310			City:	Leesburg	State: Florida		Zip Code:	34749
hone Number:	(352) 787-0980				Con		(352) 787-6	333	,
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Plant Information)								
Tangerine Park						Plant Telephone Numb	er:	352-787-09	80
5551 Huron Street				City:	Mt. Done			Zip Code:	32757
nt by Plant:	✓ Raw Ground Water	Purchased	Finished Water						<u> </u>
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II. Certification by Lead/Chief Operator

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

6-5-06 Signature and Date

Will Fontaine

Printed or Typed Name

C-6813

License Number

DEP Form 62-555..900(3)Alternate Effective August 28,2003

6 Identification				Plant Name:	Tanger	ine Park								
Daily Data				May, 2006										
ns of Achievin	ng Four-Log	Virus Inactiv	ation/Removal:	🔽 Free C	hlorine	Chlorine	Dioxide	Ozone	Combi	ned Chlori	ne (Chloramir			
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 Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555.900(3)Atternate

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Page 2

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: June, 2006

A. Public Water System (PWS) Information

PWS Name:	Tangerine Park	· · · · · · · · · · · · · · · · · · ·				PWS Identification Number	er: 3481329	
PWS Type:	Community	Non-Transient Non-Comm	iunity T	ransient Non-Comr	nunity	Consecutive		
Number of Service Connect	tions at End of Month:	358				Population Served at End of	Month: 1,253	
PWS Owner:	Aqua Utilities Florida	8.			<u></u>			
Contact Person:	Brian Heath				Conta	ct Person's Title:	Area Manager	
Contact Person's Mailing A		PO Box 490310			City: Leesburg	State: Florida	Zip Code:	34749
Contact Person's Telephone		(352) 787-0980			Contac	ct Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Ad		beheath@aquaamerica.co	om					
. Water Treatment Pla	ant Information				· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
	Tangerine Park					Plant Telephone Number:	352-787-09	30
	5551 Huron Street				City: Mt. Dora	State: Florida	Zip Code:	32757
Type of Water Treatment by		Raw Ground Water	Purchased Fini	shed Water		• ·		
Permitted Maximum Day O	perating Capacity of H	Plant, gallons per day:		360,000				
Plant Category (per subsecti	ion 62-699.310(4), F.A		·		Plant Cl	lass (per subsection 62-699.		
Licensed Operators		Name	and Man in Arm	License Class	License Number	Da	y(s) / Shift(s) Worked	an san sa tina s
Lead/Chief Operator				с	6813	Days 1st Shift		
	Marty Neal			С	10027	Days 1st Shift		
	John Worrell			С	6597	Days 1st Shift		
		· · · · · · · · · · · · · · · · · · ·						
Manus Carter								
						l	······································	
and a second second	l				· · · · · · · · · · · · · · · · · · ·			

IL Certification by Lead/Chief Operator

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

-7.7.06 Signature and Date

Will Fontaine

Printed or Typed Name

C-6813 License Number 1

DEP Form 62-555...900(3)Alternate Effective August 28,2003

Page 1

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1	•			RATION REP		W"Ss TRE	EATING	RAW	ROUND	WATER		IRCHASE		WATER
PWS Id	-	Number:				Tangerine Park							<u> </u>	
		for the M		r of:	June, 2006									
				tivation/Removal:	Free Chlo	rine (C)	lorine Diox	ide Г	Ozone	Combin	ed Chlorine	c (Chloramines)	•	
	raviolet Ra			ner (Describe):	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, .								
L'				ained in Distributio	on System:	Free Chlorin		Combined	Chlorine (C	hioramines)	L L	Chlorine Dioxid	ie	
Type of	- Distince	ALL INCOIC	Can Ivianita		Calculations, or I			L AND THE	Vinis Inact	ivation if	Applicable			
		4		<u> </u>	alculations, or l	SAL OT GALLAND	Sec. Sec. Sec.	and the second second	and branches from		U.	Dose		
							uons -	1.1933	pH of Water		17 MARIED GAR	Fill States		
							Lowest GT				See a second			
						Disinfectant	Before or at				10-11-1 		Lowest Residual	
	Days Plant Staffed or	And a start of the start of the	Net Quantity of		Lowest Residual	T) at C	First				Lowest			Emergency or Abnormal Operation
	Visited by		Finished		Concentration (C)	Measurement	Customer	2 m		Minimum	Operating UV Dose,	Minimum UV	Concentration at Remote Point in	Conditions; Repair or Maintenan Work that Involves Taking Wate
Day of	Operator	85 S	Water		Before or at First	Point During	During Peak	Tampof		CT Required,	mW-	Dose Required,		System Components Out of
the 🗟	(Place	Hours plant	Producted,	Peak Flow Rate, gpd.	Customer During Peak Flow, mg/L	Peak Flow,	Flow, mg-	Water OC	if Applicable	mg-min/L	sec/cm2	mW-sec/cm2	System, mg/L	Operation
Month	"X") - X	in Operation 24.0		Peak Flow Rate, gpd.	Peak rlow, mg/L	ANY THURSEN	South Press						1.3	
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·湖(4-3)家		24.0	211,000				<u>}</u>	 			┼────		1.3	
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8	x	24.0	156,000		2.3				<u> </u>		<u> </u>		1.1	
9.7	X	24.0			2,3		<u> </u>		<u> </u>	<u> </u>	<u> </u>			
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13	X	24.0			1.7						Į	ļ	0.8	
4	x	24.0		the second s	3.0				<u> </u>	╄────			1,3	
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7 24		24.			2.8									
254		24.0					┿╍╌╌──		┥────	┟────	+	- <u>+</u>	2.2	
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31		24.						<u> </u>			<u> </u>			
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* Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555.900(3)Alternate

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HON ... LY CERATION REPORT FOR PWSS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

July, 2006



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See Pages 4 for Instructions.

I. General Information for the Month/Year of:

A. Public Water System (PWS) Information

PWS Name:	Tangerine Park					PWS Identification Numb	er: 3	481329	
PWS Type:	Community	Non-Transient Non-Com	nunity	Transient Non-Commun	ity	Consecutive		· .	
Number of Service Co	onnections at End of Month:	358	land a the second s		To	al Population Served at End o	f Month: 1	,253	<u> </u>
PWS Owner:	Aqua Utilities Florida								
Contact Person:	Brian Heath				Co	ntact Person's Title:	Area Manager		
Contact Person's Mail	ing Address: P	O Box 490310	6	City	: Leesburg	State: Florida		ip Code:	34749
Contact Person's Telep	phone Number: (3	352) 787-0980				ntact Person's Fax Number:	(352) 787-6333		
Contact Person's E-Ma		eheath@aquaamerica.c	om						
Water Treatmen	t Plant Information	·····			<u> </u>	<u></u>			
Plant Name:	Tangerine Park	ang ang tang tang tang tang tang tang ta				Plant Telephone Number:	3:	52-787-09	80
Plant Address:	5551 Huron Street			City	Mt. Dora	State: Florida		ip Code:	32757
Type of Water Treatm	ent by Plant:	Raw Ground Water	Purchase	ed Finished Water			<u> </u>		
Permitted Maximum I	Day Operating Capacity of Pl	ant, gallons per day:		360.000					
Plant Category (per su	bsection 62-699.310(4), F.A.	<i>C</i> .):			Plan	t Class (per subsection 62-699	.310(4), F.A.C.):	C	
Blicensed20perat	OFS ASSACCE AND ADD	SULL STATE		STATION GRAVILL		on the state of the		/orked/	Trans. 2 Per
Lead/Chie@pera				C	6813	Days 1st Shift			
Oliver Oppishing Sec	Marty Neal			C	10027	Days 1st Shift			
	John Worrell			C	6597	Days 1st Shift			
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						· · · · · · · · · · · · · · · · · · ·		<u> </u>	

II. Certification by Lead/Chief Operator

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

Signature and Date

Will Fontaine Printed or Typed Name C-6813 License Number

DEP Form 62-555..900(3)Alternate Effective August 28,2003

Page 1

		n Number:			Plant Name:	Tangerine Par	<u>د</u>							······································
			Ionth/Yea		July, 2006									
				tivation/Removal:	🔽 Free Chi	orine Γ C	hlorine Dio	xide [- Ozone	Combi	ned Chlorin	e (Chloramines))	
		adiation		her (Describe):									· .	
be of D	isinfe	tant Resid	lual Maint	ained in Distributi	on System:	Free Chlori		Combined	i Chlorine (C	Chioramines) Г	Chlorine Dioxid	ie .	
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						Spinduretow	NEOWEST OU	C. C. C. C. C.			S. Sterring S.			
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	rators		A cinisned a		Conternation (Conternation) (Conternation)	A distanting the	Considered			Minima	BITCH INT		concentationat	Conditions; Repair or Mainter
	lace	Hours plant	Producted		ENGINE & AUNTON	and a second	During Peak	and the second	สาระชุวีสระสาระ	States and and and a state of the second states and a state of the	100 00 00 00 00 00 00 00 00 00 00 00 00	Nummur W	Remote Point ini	Work that Involves Taking W
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* Refer to the instructions for this report to determine which plants must provide this information. DEP Form 82-555.900(3)Alternate

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See Pages 4 for Instructions.

I. General Information for the Month/Year of:

August, 2006

A. Public Water System (PWS) Information

PWS Name:	Tangerine Park	and the second sec			PWS Identification Number:	3481329
PWS Type:	Community			on-Community	Consecutive	
Number of Service C	Connections at End of Mon	1th: 358		Tota	I Population Served at End of Month:	1,253
PWS Owner:	Aqua Utilitics Flor	ida: 🐨				
Contact Person:	Brian Heath			Con	tact Person's Title: Area Ma	nager
Contact Person's Mai	iling Address:	PO(Box490310		City: Leesburg	State: Florida	Zip Code: 34749
Contact Person's Tele	ephone Number:	(352) 787-0980		Con	tact Person's Fax Number: (352)-78	7-6333
Contact Person's E-M	fail Address:	behealh@aquaameric				
Water Treatmen	nt Plant Information	a				
Plant Name:	Tangerine Park			and the second	Plant Telephone Number:	352-787-0980
Plant Address:	5551 Huron Street			City: Mt. Dota	State: Florida	Zip Code: 32757
Type of Water Treatm	nent by Plant:	Raw Ground Water	Purchased Finished Water			
Permitted Maximum	Day Operating Capacity of	of Plant, gallons per day:	360,000			
Plant Category (per si	ubsection 62-699.310(4),	F.A.C.);	· V · Line.	Plant	Class (per subsection 62-699.310(4), F.	A.C.): C
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Qinity Caleranases.	Marty Neal			10027	Days 1st Shift	
	John Worrell		C	6597	Days 1st Shift	
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II Certification by Lead/Chief Operator

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

- 9-6-06 Signature and Date

Will Fontaine

Printed or Typed Name

C-6813

DEP Form 62-555..900(3)Alternate Effective August 28,2003

Page 1

License Number

WS Ide	entificatio	on Number:	3481329		Plant Name:	Tangerine Pa	rk	·						
I. Da	ily Data	a for the M	onth/Year of:	1	August, 2006									
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Refer to the instructions for this report to determine which plants must provide this information.
 DEP Form 62-555.900(3)Alternate

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Page 2

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See Pages 4 for Instructions.

I. General Information for the Month/Year of:

September, 2006

A. Public Water System (PWS) Information

PWS Name:	Tangerine Park			PWS Identification Number:	3481329
PWS Type:	Community	Non-Transient Non-Community		Consecutive	
Number of Service C	Connections at End of Mon	nth:358		Total Population Served at End of Month:	1,253
PWS Owner:	Aqua Utilities Flor				
Contact Person:	Brian Heath			Contact Person's Title: Area Ma	nager
Contact Person's Mai	iling Address:	PO Box 490340	City: Lee	sburg State: Florida	Zip Code: 34749
Contact Person's Tele	ephone Number:	(352) 787-0980		Contact Person's Fax Number: (352) 78	7-6333
Contact Person's E-M		beheath@aquaamerica.com		the second s	······
Water Treatmen	nt Plant Information				
Plant Name:	Tangerine Park	and a state of the		Plant Telephone Number:	352-787-0980
Plant Address:	5551 Huron Street			Dora State: Florida	Zip Code: 32757
Type of Water Treatm	nent by Plant:	Raw Ground Water	Purchased Finished Water		
Permitted Maximum	Day Operating Capacity of	of Plant, gallons per day:	360,800		
Plant Category (per s	ubsection 62-699.310(4),	F.A.C.):		Plant Class (per subsection 62-699.310(4), F.	A.C.): C
ALIGATISTIC A DATA			Party of the second sec	Number - Charles - Day(s)/-Sh	iff(s) Worked
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II. Certification by Lead/Chief Operator

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

10.6.06

Will Fontaine

C-6813

Signature and Date

Printed or Typed Name

DEP Form 62-555..900(3)Alternate Effective August 28,2003

Page 1

License Number

WS Identificait	on Number: 3481329	Plant N	lame:	Tangerine Par	rk							
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* Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555,900(3)Alternate

Page 2

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See Pages 4 for Ins	tructions.												
General Informatio	on for the Mont	h/Year of:	ළත්බ	er;2006		44 	and the second second	N. P		·····			
. Public Water Syste	em (PWS) Infor	mation					,						
PWS Name:	Tangenne Park							PWS	dentification N	umber:	34	81329	
PWS Type:	Community		ransient Non-C			sient Non-Con	imunity	Consec	utive				
Number of Service Conne				a second and a second			1973 - 17 - 19 44		on Served at E		: 1,2	2.53	
PWS Owner:	Aqua Utilities El						an an an an a n an			ados de la			· .
Contact Person:											Manager	1999 - C.	
Contact Person's Mailing			ia distanti				City: Loesbi		Florida			p Code: 1	34749
Contact Person's Telephone			a persona a constante de la con	a state of the second			Contraction and the second states of the second states of the second states of the second states of the second	Contact Perso			787-6333	<u> </u>	
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Water Treatment P		*										0 202 0000	
Plant Name: Plant Address:	Tangerine Bark		Street and a long	and the second second		- 16 A.	ALCONT TO MAN		elephone Num			2-787-0980	
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II Certification by Lead/Chief Operator

C-6813

License Number

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

11-3-06 Signature and Date

Will Fontaince of the server

DEP Form 62-555..900(3)Alternate Effective August 28,2003

Page 1

S Identificaito	MONTHLY OP		Plant Name:	Tangerine Pa								
Daily Data	for the Month/Yea	ur of:	October, 2006									
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 Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555.900(3)Attempts

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Page 2

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... INT TOI _. JATI ... REF UNT FUN PWSS TREATING NAW GROUND WATER OR PURCHASED FINISHED WATER

November, 2006



See Pages 4 for Instructions.

I. General Information for the Month/Year of:

A. Public Water System (PWS) Information

PWS Name:	Tangerine Park						PWS Identification Numb	юг:	3481329	
PWS Type:	✓ Community	Non-Transient Non-Com	nmunity	Transient No	on-Commun	ity [Consecutive	1		
Number of Service Co	nnections at End of Mon	th: 358		n senge og konstruktion og konstruktion Statute og konstruktioner og konstruktioner og konstruktioner og konstruktioner og konstruktioner og konstruktio	alastation de Théis anna an	Tot	al Population Served at End o	f Month:	1,253	
PWS Owner:	Aqua Utilities Flor	ida		Section Sectors		299	n an	ing the state of the second		· · · · · · · · · · · · · · · · · · ·
Contact Person:	Brian Heath		· · · · · · · · · · · · · · · · · · ·		in the second	Con	tact Person's Title:	Area Manager		
Contact Person's Maili	ng Address:	PO Box 490310			Cit	: Leesburg	State: Florida		Zip Code:	34749
Contact Person's Telep	hone Number:	(352) 787-0980				Сол	tact Person's Fax Number:	(352) 787-633	3	
Contact Person's E-Ma		beheath@aquaamerica.	com	a la state a st		S		an a		
Water Treatment	t Plant Information	1								
Plant Name:	Tangerine Park			her states search			Plant Telephone Number:		352-787-09	80
Plant Address:	5551 Huron Street				Cit	: Mt. Dora	State: Florida		Zip Code:	32757
Type of Water Treatme	ent by Plant:	Raw Ground Water	Purc	hased Finished Wate	r					
Permitted Maximum D	ay Operating Capacity o	f Plant, gallons per day:		360,000	station in the				S. C. Angler	n na s
Plant Category (per sub	bsection 62-699.310(4), 1	F.A.C.):	Valat	· ·		Plant	Class (per subsection 62-699	.310(4), F.A.C.)	: C	· · · · ·
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Lcad/Chief Operat	OF: Will Fontaine	and the second secon		C	- A	6813	Days 1st Shift			
Quier Chorneorse-	Marty Neal			C.		10027	Days 1st Shift			
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H Certification by Lead/Chief Operator

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

12-8-06

Signature and Date

Printed or Typed Name

Will Fontaine

DEP Form 62-555..900(3)Alternate Effective August 28,2003 Page 1

C-6813

License Number

TANGERINE



4049 Reid Street • P.O. Box 1429 • Palatka, FL 32178-1429 • (386) 329-4500 On the Internet at www.sjrwmd.com

CERTIFIED NUMBER: 7004 0750 0003 3823 0172

August 24, 2004

Aqua Utilities of Florida 6960 Professional Parkway East, Suite 400 Sarasota, Fl 34240

SUBJECT: Consumptive Use Permit #51073

The District has received a copy of the Bill of Sale naming Aqua Utilities Florida as the owner of the parcel of property formerly owned by Florida Water Services.

The above referenced permit is hereby transferred to Aqua Utilities Florida as the new permit holder, you are required to comply with all the conditions as noted in the permit. If you have any questions concerning the conditions of your permit, please contact Shannon Joyce, Hydrologist IV, 407-659-4848.

Thank you for your cooperation with this matter. If you have any questions or if the District can be of further assistance, please do not hesitate to contact us.

Sincerely,

ens Alan Ferris

Gloria Lewis, Director Division of Permit Data Services

Enclosures:

Permit Conditions of Issuance Compliance Forms Well Tags

CC: District Permit File Lynn Minor, Data Management Superviso

GOVERNING BOARD ------Ometrias D Long Councies David G. Graham, V/CE CHARMAN B Clay Albright SECRETARY Duana Ottenstroer TREASURER IACKSON/AU E 1POPIC2 ACKSON/ MAT DCA_A W Michael Branch John G. Sownski Ann T. Moore Susan N Hughes William Kerr нырчалаты қасарғары SUMMER: -one-nee WELLBOOR NE BEACH MCKSOWELF

04320 MAY 22 8 FPSC-COMMISSION CLERE

DOCUMENT NUMBER-DAT

40C-1.612 TRANSFER OF OWNERSHIP OF PERMIT

- (1) Transfer of Permitted Facility. Within (30) days of any sale, conveyance, or other transfer of a facility, system, or well permitted by the District, the existing permittee must notify the District, in writing, of such transfer, giving the name and address of the transferee and providing a copy of the instrument effectuating the transfer.
- (2) Transfer of Interest in Real Property. Within (30) days of any transfer of ownership or control of the real property at which any permitted facility, system, consumptive use, or activity is located the permittee must notify the District, in writing, of the transfer, giving the name and address of the new owner or person in effectuating the transfer.
- (3) Transfer of Permit. To transfer a permit, the permittee must provide the information required in subsections (1) and (2), together with a written statement from the proposed transferee that it will bound by all terms and conditions of the permit. Additionally, where applicable, the transferee must demonstrate that it is capable of constructing, operating and maintaining the permitted facility, system, consumptive use, well or activity. Once the required information has been provided, the District may transfer the permit to the transferee.

PERMIT NO. 51073

ORIGINAL PERMIT ISSUED: <u>September 30, 1999</u> TRANSFER PROCESS DATE: August 23, 2004

PROJECT NAME: Tangerine Park

A PERMIT AUTHORIZING:

Use of 48.388 million gallons per year of ground water from the Floridan aquifer system for public supply type uses to serve an estimated population of 843 people in 2009.

LOCATION:

Site: Tangerine Park Orange County

Section(s): 4, 5, 6, 7, 8, 9 Township(s):

): 20S

Range(s): 27E

ISSUED TO:

Aqua Utilities Florida 6960 Professional Parkway East, Suite 400 Sarasota, FL 34240

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 maps and specifications attached thereto, is by reference made a part hereof.

This permit does not convey to permittee any property rights nor any rights of 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, Florida Statutes and 40C-1, Florida Administrative Code.

PERMIT IS CONDITIONED UPON:

See conditions on attached "Exhibit A", dated September 30, 1999

AUTHORIZED BY: St. Johns River Water Management District Department of Resource Management

By: Dwight Jenkins

Division Director

"EXHIBIT A" CONDITIONS FOR ISSUANCE OF PERMIT NUMBER 51073 AQUA UTILITIES FLORIDA DATED SEPTEMBER 30, 1999

- 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, is declared by the District Governing Board, the permittee must adhere to the water shortage restriction as specified by the District, even though the specified water shortage restrictions may be inconsistent with the terms and conditions of this permit.
- 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 the permit application may not be interfered with by the consumptive use. If unanticipated interference occurs, the District may revoke the permit in whole or in part to curtail or abate the interference unless the permittee mitigates for the interference. In those cases where other permit holders are identified by the District as also contributing to the interference, the permittee may choose to mitigate in a cooperative effort with these other permittees. The permittee must submit a mitigation plan to the District for approval prior to implementing such mitigation.
- 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.
- 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, Florida Administrative Code.
- 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. If the permittee does not serve a new projected demand located within the service area upon which the annual allocation was calculated, the annual allocation will be subject to modification.

- 10. The permittee must ensure that all service connections are metered.
- 11. 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.

- 12. The lowest quality water source, such as reclaimed water and surface/storm water, must be used as irrigation water when deemed feasible pursuant to District rules and applicable state law.
- 13. This permit will expire on September 30, 2009.
- 14. The maximum annual withdrawals for all uses within the site Tangerine Park must not exceed 48.388 million gallons.
- Maximum annual withdrawal from the Floridan Aquifer for household type uses must not exceed:
 49,000 million college from 1000 to 2000.

48.388 million gallons from 1999 to 2009

- 16. Legal uses of water existing at the time of the permit application may not be interfered with by the consumptive use. If unanticipated interference occurs, the District may revoke the permit in whole or in part to curtail or abate the interference unless the permittee mitigates for the interference. In those cases where other permit holders are identified by the District as also contributing to the interference, the permittee may choose to mitigate in a cooperative effort with these other permittees. The permitee must submit a mitigation plan to the District for approval prior to implementing such mitigation.
- All submittals made to demonstrate compliance with this permit must include the permit number 51073 plainly labeled.
- 18. The common discharge point from Well no's A and B as listed on the application is equipped with a totalizing flow meter. This meter must maintain 95% accuracy, be verifiable and be installed according to the manufacturer's specifications.
- 19. The total withdrawal from well numbers A and B, as listed on the application must be recorded continuously, totaled monthly, and reported to the District at least every six months from the initiation of the monitoring using 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 - December July 31 January 31

- 20. The permittee must maintain all flow meters. 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.
- 21. The permittee must have the flow meter checked for accuracy at least 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/calibration.

		BACTERIO]	E					
Fort Pier	S 1 North ce, FL 34946 # E96080	4155 SL Johns I Suite 1300 Sanford, FL 32 FDOH # E83) Lah 2775	307 Coolidge ligh Acres, FL FDOH # E8	33936	16331 Co Brooksville FDOH #	9, FL 346	D Pho		65-2400	. Ext. 28	5 Fax;	(772) 467-51
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Date issued: October 22, 2007

To: Brian Heath Aqua Utilities Florida, Inc. POB 490310 Leesburg, FL - 34749

Client:Aqua Utilities Florida, Inc.Workorder ID:Tangerine NO2/NO3Received:10/17/07 11:42

[2129704]

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:

E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,

Cindy Cromer / Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080 Printed: 10/22/07 4155 St. Johns Pkwy Suite 1300 Senford, FL 32771 FDOH # E83509



307 Coolidge Avenue16331 (Lehigh Acres, FL33936BrooksFDOH # E85370FDOH #

16331 Cortez Blvd Brooksville, FL 34601 FDOH # E84418



Client: Aqua Utilities Florida, Inc. Workorder ID: Tangerine NO2/NO3 10/17/07 11:42 Received:

Quality Control Summary

[2129704]

HBEL Sample		Method Narratives (If Applicable)	h in the second s
Number	Sample ID	Analytical Method	Description
····	••••••••••••••••••••••••••••••••••••••	Quality Control Summary	
Viethod HBE	L Batch Analyte	Analytical Issue	
EPA 300.0		· · · · · · · · · · · · · · · · · · ·	
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2129704001	Nitrate as N	Accuracy - Outside acceptance limits in the M	S.
2129704001	Nitrate as N	Accuracy - Outside acceptance limits in the M	SD.
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2129704001	Nitrite as N	Accuracy - Outside acceptance limits in the Mi	SD.

above due to matrix effects. Accuracy demonstrated with other

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080 Printed: 10/22/07

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4155 St. Johns Pkwy Suile 1300 Sanford, FL 32771 FDOH # E83509



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307 Coolidge Avenue 16331 Cortez Blvd Lehigh Acres, FL 33936 Brooksville, FL 34601 FDOH # E85370

FDOH # E84418

HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.

CERTIFICATE OF ANALYSIS [2129704]

Client: Aqu	a Utilities Florida,	Inc.	Wa	orkorder ID: Tar	ngerine N	NO2/NO3			
Parameter	Qualifier Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID: Sample ID:	2129704001 WTP POE Grab			Sampled: 10/17/07 Matrix: Water		Received:	10/17/07 Net Weight E		
Nitrate as N	0.0052	m g/L	0.0030	EPA 300.0	IC7409		10/18/07 12:21	JL	E96080
Nitrite as N	0.0022 U	mg/L	0.0022	EPA 300.0	IC7409		10/18/07 12:21	JL.	E96080

¹Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080 Printed: 10/22/07

4155 St. Johns Pkwy Suite 1300 Sanford, FL 32771 FDOH # E83509



307 Coolidge Avenue Lehigh Acres, FL 33936 FDOH # E85370

16331 Cortez Bivd Brooksville, FL 34601 FDOH # E84418



7

Date issued: October 9, 2006

To: Brian Heath Aqua Utilities Florida, Inc. POB 490310 Leesburg, FL 34749

Client:Aqua Utilities Florida, Inc.Workorder ID:6428 Tangerine Reg VOCReceived:9/19/06 13:20

[2126853]

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #s:

E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,

Cindy Cromer Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

5600 US 1 North Fort Pierce, FL 34948 FDOH # E96080 Printed: 10/9/06 4155 St. Johns Pkwy Sulte 1300 Senford, FL 32771 FDOH # E83509



307 Coolidge Avenue 16 Lehigh Acres, FL 33936 Bi FDOH # E85370 FL

16331 Cortez Blvd Brooksville, FL 34601 FDOH # E84418

Page 1 of 5



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Quality Control Summary

Client:	Aqua Utilities Florida, Inc.
Workorder ID:	6428 Tangerine Reg VOC
Received:	9/19/06 13:20

[2126853]

MB=Method Blank	LCS=Laboratory (Control Sample LCSD=Laboratory	Control Sample Duplicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplicate
HBEL Sample			larratives (if Applicable)
<u>Number</u>	Sample ID	Analytical Method	Description
Method HBEL	Batch Analyte	=	Control Summary Analytical Issue

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080 Printed: 10/9/06

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4155 St. Johns Pkwy Suite 1300 Sanford, FL 32771 FDOH # E83509



307 Coolidge Avenue Lehigh Acres, FL 33938 FDOH # E85370

16331 Cortez Blvd Brooksville, FL 34601 FDOH # E84418

Page 2 of 5

HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.

CERTIFICATE OF ANALYSIS

[2126853]

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6428 Tangerine Reg VOC

Parameter	Qualifier	1 Result	Units	Reporting	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analysi	Lab ID
	26853001 128 Point o	of Entry Gi	rab		Sampled: 09/19/ Matrix: Water		Received.	: 09/19/06 Wet Weight E		
1,1,1-Trichloroethane		0.21 U	ug/L	0.21	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
1,1,2-Trichloroethane		0.44 U	ug/L	0.44	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
1,1-Dichloroethene		0.23 U	ug/L	0.23	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
1,2,4-Trichlorobenzene	•	0.41 U	ug/L	0.41	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
1,2-Dichlorobenzene		0.21 U	ug/L	0.21	EPA 524.2	VDC2701		09/30/06 20:21	WR	E96080
1,2-Dichloroethane		0.29 U	vg/L	0.29	EPA 524.2	VOC2701		09/30/06 20:21	I WR	E96080
1,2-Dichloropropane		0.40 U	ug/L	0.40	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
1,4-Dichlorobenzene		0,23 U	ug/L	0.23	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
Benzene		0.20 U	89/L	0.20	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
Carbon tetrachloride		0.24 U	ug/L	0.24	EPA 524,2	VOC2701		09/30/06 20:21	WR	E96080
Chlorobenzene		0.30 U	ug/L	0.30	EPA 524.2	VOC2701		09/30/06 20:21	I WR	E96080
cis-1,2-Dichloroethene		0.21 U	ug/L	0,21	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
Ethylbenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
Methylene chloride		0.23 U	ug/L	0.23	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
Styrene		0.21 U	ug/L	0.21	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
Tetrachloroethene		0.24 U	ug/L	0.24	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
foluene		0.22 U	ug/L	0.22	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
Total Xylenes		0.46 U	ug/L	0.46	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
trans-1,2-Dicnloroether	ne	0.35 U	ug/L	0.35	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
Trichloroethene		0.36 U	ug/L	0.36	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080
Vinyl chloride		0.32 U	ug/L	0.32	EPA 524.2	VOC2701		09/30/06 20:21	WR	E96080

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080 Printed: 10/9/06 4155 St. Johns Pkwy Suite 1300 Senford, FL 32771 FDOH # EB3509



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307 Coolidge Avenue Lehigh Acres, FL 33936 FDOH # E85370

16331 Cortez Blvd Brooksville, FL 34601 FDOH # E84418

Page 3 of 5

HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC. 5600 U.5.1 North Fort Plent FL 34946 North (772) 465-2400, 641 285 - 742 467-584

CERTIFICATE OF ANALYSIS

[2126853]

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6428 Tangerine Reg VOC

Parameter	Qualifier	1 Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
	26853002 ip Blank		_		Sampled: Matrix: Water	Results	Received			···· _
1,1,1-Trichloroethane		0.21 U	ug/L	0.21	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
1,1,2-Trichloroethane		0.44 U	ug/L	0.44	EPA 524.2	VOC2701		09/30/06 20:53	WR	E9608
1,1-Dichloroethene		0.23 U	ug/L	0.23	EPA 524.2	VOC2701		09/30/06 20:55	5 WR	E9608
1,2,4-Trichlorobenzene		0.41 U	ug/L	0.41	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
1,2-Dichlorobenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
1,2-Dichloroethane		0.29 U	vg/L	0.29	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
1,2-Dichloropropane		0.40 U	UgA	0.40	EPA 524.2	VOC2701		09/30/06 20:55	i wr	E9608
1,4-Dichlorobenzene		0.23 U	ug/L	0.23	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
Benzene		0.20 U	ug/L	0.20	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
Carbon tetrachloride		0.24 U	ug/L	0.24	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
Chlorobenzene		0.30 U	ug/L	0.30	EPA 524.2	V0C2701		09/30/06 20:55	WR	E9608
cis-1,2-Dichloroethene		0.21 U	ug/i.	0.21	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
Ethylbenzene		0.21 U	ug/L	0.21	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
Methylene chloride		0.23 U	ug/L	0.23	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
Styrene		0.21 U	ug/L	0.21	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
Tetrachloroethene		0.24 U	ug/L	0.24	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
. oluene		0.22 U	ug/L	0.22	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
Total Xylenes		0.46 U	ug4.	0.46	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
trans-1,2-Dichloroethen	e	0.35 U	ug/L	0.35	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608
Trichloroethene		0.36 U	ug/L	0.36	EPA 524.2	VOC2701		09/30/06 20:55		E9608
Vinyl chloride		0.32 U	ug/L	0.32	EPA 524.2	VOC2701		09/30/06 20:55	WR	E9608

Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080 Printed: 10/9/06

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4155 St. Johns Pkwy Suite 1300 Sanford, FL 32771 FDOH # E83509



307 Coolidge Avenue Lehigh Acres, FL 33936 FDOH # E85370

16331 Cortez Blvd Brooksville, FL 34601 FDOH # E84418

Page 4 of 5



Date issued: October 3, 2006

To: Brian Heath Aqua Utilities Florida, Inc. POB 490310 Leesburg, FL 34749

Client:Aqua Utilities Florida, Inc.Workorder ID:Tangerine 6428 THM/HAA5 GrabReceived:9/12/06 13:00

[2126776]

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2002 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Clean Water Act and RCRA Certification #'s:

E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,

Cindy Cromer / Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080 Printed: 10/3/06 4155 St. John's Pkwy, Suite 1300 Santord, FL 32771 FDOH # E83509



307 Coolidge Avenue Lehigh Acres, FL 3393 FDOH # E85370 16331 Cortez Boulevard Brooksville, FL 34601 FDOH # E84418 Page 1 of 4



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7600 U.S. I North, Fort Pierce R. 34946 Thome: (772) 465-2400, Ext. 285 Fax; (772) 467-584 **Quality Control Summary**

Client:Aqua Utilities Florida, Inc.Workorder ID:Tangerine 6428 THM/HAA5 GrabReceived:9/12/06 13:00

[2126776]

MB=Method E	Itank LCS=Laboratory (Control Sample LCSD=Laboratory Control Sample Dup	Nicate MS=Matrix Spike MSD=Matrix Spike Duplicate DUP=Sample Duplk	cate
HBEL Sample		Method Narratives (If	Applicable)	
Number	Sample ID	Analytical Method	Description	
······		······		
		Quality Control Summ	nary	
Method HB	EL Batch Analyte	Analytical Issue	•	

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080 Printed: 10/3/06

4155 St. John's Pkwy, Suite 1300 Sanford, FL 32771 FDOH # E83509



307 Coolidge Avenue Lehigh Acres, FL 3393 FDOH # E85370

16331 Cortez Boulevard Brooksville, FL 34601 FDOH # E84418 Pege 2 of 4

HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.

CERTIFICATE OF ANALYSIS

[2126776]

*600 U.S. | North, Fort Pierce FL 34946 'home: (772) 465-2400, Ext. 295 Fax: (772) 467-584

Client: Aqua Utilities Florida, Inc.

Workorder ID: Tangerine 6428 THM/HAA5 Grab

Parameter	Qualifier	t Result	Units	Reporting	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID: Sample ID:	2126776001 4652 Wadsw	rorth MR1	Location		Sampled: 09/12/0 Matrix: Water	_	Received:	09/12/06 Wet Weight E	-	,
Bromodichlorometh	ane	2.0	ug/L	0.25	EPA 524.2	VOC2696		09/25/06 17:34	WR	E96080
Bromoform		0.41 U	ug/L	0.41	EPA 524.2	VOC2696		09/25/06 17:34	WR	E96080
Chloroform		3.6	ug/L	0.25	EPA 524.2	VOC2698		09/25/08 17:34	WR	E96080
Dibromochlorometh	ane	0.86	ugA	0.30	EPA 524.2	VOC2696		09/25/06 17:34	WR	E9608(
Total THMs		6.4	ug/t_	0.50	EPA 524.2	VOC2696		09/25/06 17:34	WR	E96080
Laboratory ID: Sample ID:	2126776003 Trip Blank				Sampled: Matrix: Water	Regults	Received.			
Bromodichlorometh	ane	0.25 U	ug/t	0.25	EPA 524.2	VOC2696		09/25/06 18:08		E96080
Bromotorm		0.41 U	ug/L	0.41	EPA 524.2	VOC2696		09/25/06 18:08	WR	E96080
Chloroform		0.25 U	ug/L	0.25	EPA 524.2	VOC2696		09/25/06 18:08	WR	E9608
Dibromochlorometh	але	0.30 U	ug/L	0.30	EPA 524.2	VOC2696		09/25/06 18:08	WR	E9608
Total THMs		0.50 U	ug/L	0.50	EPA 524.2	VOC2595		09/25/06 18:08	WR	E96080

¹Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit Applicable Florida Department of Environmental Protection Qualifiers defined belo Statement of Estimated Uncertainty available upon request.

5600 US 1 North Fart Pierce, FL 34946 FDOH # E96080 Printed: 10/3/06

4155 St. John's Pkwy, Suite 1300 Senford, FL 32771 FDOH # E83509

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307 Coolidge Avenue Lehigh Acres, FL 3393 FDOH # E85370

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16331 Cortez Boulevard Brooksville, FL 34601 FDOH # E84418 Page 3 of 4



Date issued: June 26, 2006

To: Brian Heath Aqua Utilities Florida, Inc. POB 490310 Leesburg, FL 34749

Client:Aqua Utilities Florida, Inc.Workorder ID:6428 Tangerine TriannualReceived:5/24/06 13:30

[2125811]

Dear Brian Heath;

Analytical results presented in this report have been reviewed for compliance with the HARBOR BRANCH Environmental Laboratories Inc.'s (HBEL) Quality Systems Manual and have been determined to meet applicable Method guidelines and Standards referenced in the July 2003 National Environmental Laboratory Accreditation Program (NELAP) Quality Manual unless otherwise noted. The Analytical Results within these report pages reflect the values obtained from tests performed on Samples As Received by the laboratory unless indicated differently.

FDOH Safe Drinking Water Act, Glean Water Act and RCRA Certification #'s:

E96080, E83509, E85370, E84418

Questions regarding this report should be directed to the Report Signatory at (772) 465-2400, Ext. 285 referencing the HBEL Workorder ID [Number].

Respectfully submitted,

Cindy Cromer ^k Technical Director or Designee

Note: This report is not to be copied, except in full, without the expressed written consent of the HARBOR BRANCH Environmental Laboratories, Inc.

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080 Printed: 6/26/08

4165 St. Johns Pkwy Suite 1300 Sanford, FL 32771 FDOH # E83509



307 Coolidge Avenue Lehigh Acres, FL 33936 FDOH # E86370 16331 Cortez Blvd Brooksville, FL 34601 FDOH # E84418

Page 1 of 5

(NC. 467-E84		Qual	ity Control Summa
	Workorder ID:	Aqua Utilities Fk 6428 Tangerine 5/24/06 13:30				[2125811
	MB=Method Blank LC	S=Laboratory Control Samola	LCSD=Laboratory Contr	ni Samole Dunicate M	IS=Matrix Spike MSD=Matrix Spike	
	HBEL Sample Number	Sample ID Analytical 6428 Point of Entry Grab EPA 525.2	Method Narr Method	atives (If Appli		
	—	<u> </u>	······································	trol Summary		
	EPA 505 PEST474		<u>Anal</u>	<u>ylical' Issue</u>		
	2125811001 Deca	chlorobiphenyl	Surrogate - Outside	acceptance Limits		
	EPA 515.1 PEST474 2125811001 Dinos	,	• - ·			
	21758711813 11863		Accuracy - Outside :	acceptance limits in	the MS.	
1	2125811001 Dinos	seb	Precision - Outside	_	etween the MS and MSD.	
1	2125811001 Dinos	· ·	Precision - Outside	_	etween the MS and MSD.	
1	2125811001 Dinos	seb	Precision - Outside	_	etween the MS and MSD.	
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HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC. \$500 U.S. I North, Fort Plance R. 34946 Thome: (772) 465-2400, Ext. 285 Fax: (772) 467-584

CERTIFICATE OF ANALYSIS [2125811]

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2,4,5-TP 2,4-D Dalapon Dinoseb Pentachlorophenol

- Picloram

Jachior

Atrazine

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Client: Aqua Utilities Florida, Inc.

Workorder ID: 6428 Tangerine Triannual

Parameter	Qualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID: Sample ID:	2125811001 6428 Point (of Entry Grai	6		Sampled: 05/24 Matrix: Water		Received reported on	: 05/24/06 Wet Weight E		
Odor		2.8	T.O.N.	1.0	EPA 140.1	WCDE14651		05/24/06 16:30		E83509
pH [6.5-8.5]	Q	8.08	SU	0.200	EPA 150.1	WCGE25657		05/26/06 16:49		E96080
Aluminum		0.0030 U	mg/L	0.0030	EPA 200.7	META7971		05/26/06 15:11	SP	E96080
Barium		0.021	mg/L	0.0018	EPA 200.7	META7971		05/26/06 15:11	SP	E96080
Beryllium		0.00010 U	mg/L	0.00010	EPA 200.7	META7971		05/26/06 15:11	SP	E96080
Cadmium		0.00070 U	mgA.	0.00070	EPA 200.7	META7971		05/26/06 15:11	SP	E9608(
Chromium		0.0018 U	mg/L	0.0018	EPA 200.7	META7971		05/26/06 15:11	S₽	E96080
Copper		0.0042	mg/t	0.0014	EPA 200.7	META7971		05/25/06 15:11	SP	E96080
ron		0.025 U	mğ/L	0.025	EPA 200.7	META7971		05/26/06 15:11	SP	E96080
Manganese		0.0037 U	-mg/L	0.0037	EPA 200.7	META7971		05/26/06 15:11	SP	E96080
Nickel		0.0020 U	mg/L	0.0020	EPA 200.7	META7971		05/26/06 15:11	SP	E96080
Silver		0.0010 U	mg/L	0.0010	EPA 200.7	META7971		05/26/06 15:11	SP	E96080
Sođum		14	mg/L	0.50	EPA 200.7	META7971		05/26/06 15:11	SP	E96080
Zinc		0.010 U	mg/L	0.010	EPA 200.7	META7971		05/26/06 15:11	SP	E96080
bee.		0.00070	mg/L	0.00061	EPA 200.9	META7972		05/26/06 11:50	SP	E96080
Selenium		ົ້ນ.0022 ບ	mg/L	0.0022	EPA 200.9	META7976		06/2/06 17:24	SP	E95080
hallium		0.0010 U	mg/L	0.0010	EPA 200.9	META7973		06/2/06 15:11	SP	E96080
Vercury		0.000060 U	mg/L	0.000060	EPA 245.1	META7988	06/15/06 11:00	06/16/06 15:58	DM	E96080
Chloride		19	mg/L	5.0	EPA 300.0	IC6809		05/30/06 21:00	JL	E96080
Fluoride		0.12	mg/L	0.011	EPA 300.0	IC6806		05/25/06 15:05	JL	E96080
vitrate as N		0.0064	mg/L	0.0030	EPA 300.0	iC6806		05/25/06 15:05	JL,	E96080
Villite as N		0.0022 U	mg/L	0.0022	EPA 300.0	IC6806		05/25/06 15:05	JŁ	E96080
Sulfate		5.5	mg/L i	- 1.4	EPA 300.0	IC6809		05730/06 21:00	JL.	E96080
1,2-Dibromo-3- taloropropana		0.0020 U	ug/L	0.0020	EPA 504.1	PEST4745	06/7/06 16:20	06/7/06 18:39	CAC	E96080
,2-Dibromoethane		0.00 48 U .	ug/L	0.0048	EPA 504.1	PEST4745	06/7/06 16:20	06/7/06 18:39	CAC	E96080
Chlordane		0.13 U	ug/L	0.13	EPA 505	PEST4743	05/31/06 12:26	05/31/06 23:25	JL	E96080
Endrin		0.10 U	` ນ ໘∕້າ:	0.10	EPA 505	PEST4743	C5/31/06 12:26	05/31/06 23:25	JL	E96080
jamma-BHC (Linda)	ne)	0.020 U	Ug/L	0.020	* EPA 505 *	PEST4743	05/31/06 12:26	05/31/06 23:25	JL.	E96080
leptachlor		0.036 U	ug A	0.036	EPA 505	PEST4743	05/31/06 12:26	05/31/06 23:25	JL	E96080
leplachlor epoxide		0.027 U	ugA.	0.027	EPA 505		05/31/06 12:26		JL.	E96080
/lethoxychlor		0.043 U	ug/L	0.043	EPA 505		05/31/06 12:26		JL	E96080
PCB		0.14 U	ug/L	0.14	EPA 505	PEST4743	05/31/06 12:26	05/31/06 23:25	JL	E96080
oxaphene		0.59 ป	vg/L	0.59	EPA 505	PEST4743	05/31/06 12:26	05/31/06 23:25	JL	E96080
4,5-TP		0.19 U	ugAL	0.19	EPA 515.1	PEST4741	05/30/06 7:26	06/6/06 22:53		E96080
,4-D		0.22 U	ug/L	0.22	EPA 515.1	PEST4741	05/30/06 7:26	06/6/06 22:53		E96080
Jalapon		2.3 U	Ug/L	2.3	EPA 515.1	PEST4741	05/30/06 7:26	06/6/06 22:53		E96080
)inoseb		0.23 U	ug/L	0.23	EPA 515.1	PEST4741	05/30/06 7:26	06/6/06 22:53		E96080
			-		-		-		-	

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080

Printed: 6/26/06

0.39 U

0.23 U

0.59 U

0.47 U

ug/L

ug/L

ugit.

ug/L

4155 St. Johns Pkwy Suite 1300 Sanford, FL 32771 FDOH # E83509

0.39

0.23

0.59

0.47



EPA 515.1

EPA 515.1

EPA 525.2

EPA 525.2

307 Coolidge Avenue 16331 Cortez Blvd Lehigh Acres, FL 33936 Brooksville, FL 34601 FDOH # E85370 FDOH # E84418

05/30/06 7:26 06/6/06 22:53

05/30/06 7:26 06/6/06 22:53

05/31/06 9:58 06/4/06 21:20

05/31/06 9:58 06/4/06 21:20

PEST4741

PEST4741

\$V0C2412

SVOC2412

Page 3 of 5

CAC E96080

CAC E96080

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E96080

WR

WR

HARBOR BRANCH ENVIRONMENTAL LABORATORIES, INC.

CERTIFICATE OF ANALYSIS [2125811]

5600 U.S. | North Fort Plance FL 34946 Phone: (772) 465-2400, Ext. 285 Fax: (772) 467-584

Client: Aqua Utilities Florida, Inc.

Workorder ID: 6428 Tangerine Triannual

Parameter Q	ualifier	Result	Units	Reporting Limit	Method	Laboratory Batch	Prep Date/Time	Analyzed Date/Time	Analyst	Lab iD
Benzo(a)pyrene		U 880.0	ugh	0.068	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 21:20	WR	E96080
bis(2-ethy/hexyl)phthalate		0.82 U	ug/L	0.82	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 21:20	WR	E96080
Di(2-ethylhexyl)adipate		0.66 U	ug/L	0.66	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 21:20	WR	E96080
Hexachtorobenzene		0.30 U	ug/L	0.30	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 21:20	WR	E96080
Hexachtorocyclopentadiene	2	0.23 V	Ug/L	0.23	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 21:20	WR	E96060
Simazine		0.61 V	ug/L	0.61	EPA 525.2	SVOC2412	05/31/06 9:58	06/4/06 21:20	WR	E96080
Carboluran		0.50 U	vg/L	0.50	EPA 531.1	SAL1013		06/20/06 19:08	SAL	E84129
Oxamyl		0.50 U	ug/L	0.50	EPA 531.1	SAL1013		08/20/06 19:08	SAL	E84129
Glyphosate		26 U	UQ/L	26	EPA 547	HPLC2303		05/25/06 15:03	MUL 5	E96080
Endothalit		2.8 U	ug/L	2.8	EPA 548.1	SVOC2415	05/30/06 7:26	06/13/06 18:21		E96080
Diquat		4.8 U	ugA	4.8	EPA 549.2	HPLC2306	05/30/06 8:01	06/8/06 9:05	JJM	E96080
Antimony		0.0010 U	mgA.	0.0010	SM 3113 B	SAL1014		06/6/06 14:29	SAL	E84129
Arsenic		0.0010 U	mgA_	0.0010	SM 3113 B	SAL1014		06/6/06 11:26		E84129
Color		4.0	ĊŬ	1.8	SM2120 B	WCGE25640		05/25/06 14:15		E96080
Total Dissolved Solids		170	mg/L	16	SM2540 C	WCGE25661		05/28/06 12:45		E96080
Cyanide		0.0047 U	mg/L	0.0047	SM4500CN E	WCGE25699	05/29/06 9:30		-	E96080
Surfactants as LAS, Mol.wt.340		0.023	mg/L	0.022	SM5540 C		05/25/05 13:15			E96080

¹Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.

Q Sample held beyond the accepted holding time.

5600 US 1 North Fort Pierce, FL 34946 FOOH # E96080 Printed: 6/28/06 4155 St. Johns Pkwy Suile 1300 Sanford, FL 32771 FDOH # E83509



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307 Coolidge Avenue Lehigh Acres, FL 33936 FDOH # E85370 16331 Cortez Bivd Brooksville, FL 34601 FDOH # E84418

Page 4 of 5

		B R A N C H IMENTAL TORIES, INC. ROPERCE - Part (772) 467-684	Date issued	l: March 20, 2006
To:	POB 4	Itilities Florida, Inc.		
Client				
	order ID:	Aqua Utilities Florida, Inc. 6428 Tangerine NO2/NO3 3/16/06 13:45	[2125110]	
Dear	Brian He	eath;		· · · · · · · · · · · · · · · · · · ·
		•		
(́Н	IARBOR I	results presented in this report BRANCH Environmental Labor been determined to meet applie	atories Inc.'s (HBEL) Quality cable Method guidelines and	Systems Manual Standards
(H a re (1 re	IARBOR I and have b aferenced NELAP) 0 aport page	results presented in this report BRANCH Environmental Labor	atories Inc.'s (HBEL) Quality cable Method guidelines and ronmental Laboratory Accre e noted. The Analytical Resu rom tests performed on Sam	Systems Manual Standards ditation Program uts within these
(H a re (1) re	IARBOR I and have b aferenced NELAP) C aport page y the labo	results presented in this report BRANCH Environmental Labor been determined to meet applie in the July 2003 National Envi Quality Manual unless otherwis es reflect the values obtained f pratory unless indicated differen	atories Inc.'s (HBEL) Quality cable Method guidelines and ronmental Laboratory Accre- e noted. The Analytical Resi rom tests performed on Sam htty.	Systems Manual Standards ditation Program uts within these ples As Received
(H a re (1 re	IARBOR I and have b aferenced NELAP) C aport page y the labo	results presented in this report BRANCH Environmental Labor been determined to meet applie in the July 2003 National Envi Quality Manual unless otherwis es reflect the values obtained f pratory unless indicated different Safe Drinking Water Act, Clea	atories Inc.'s (HBEL) Quality cable Method guidelines and ronmental Laboratory Accrete noted. The Analytical Rest rom tests performed on Sam htty.	Systems Manual Standards ditation Program uts within these ples As Received
(H a re (1 re	IARBOR I and have b aferenced NELAP) C aport page y the labo	results presented in this report BRANCH Environmental Labor been determined to meet applie in the July 2003 National Envi Quality Manual unless otherwis es reflect the values obtained f pratory unless indicated differen	atories Inc.'s (HBEL) Quality cable Method guidelines and ronmental Laboratory Accrete noted. The Analytical Rest rom tests performed on Sam htty.	Systems Manual Standards ditation Program uts within these ples As Received
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Quality Control Summary

Client:Aqua Utilities Florida, Inc.Workorder ID:6428 Tangerine NO2/NO3Received:3/16/06 13:45

[2125110]

MB=Mat	hod Blank LCS	-Laboratory (Control Sample LCSD=Laboratory Control	i Sample Duplicate iv	AS-Matrix Spike MSD-Matrix Spike Duplik	ale DUP=Semple Duplicate	
HBEL Sam	ple		Method Narra				
Number	<u>S</u>	ample ID	Analytical Method			Description	
		·	Availie Acut				
Method	HBEL Batcl	<u>h Analyte</u>		trol Summary dical Issue			

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080 Printed: 3/20/06

4155 St. Johns Pkwy Suite 1300 Sanford, FL 32771 FDOH # E83509



307 Coolidge Avenue Lehigh Acres, FL 33936 FDOH # E85370

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2514 Osawaw Boulevard Spring Hill, FL 34607 FDOH # E84418

Page 2 of 4



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CERTIFICATE OF ANALYSIS

[2125110]

Client: Aqu	a Utilities Florida, I	nc.	Wa	orkorder ID: 6	428 Tange	nine NO2	2/NO3		
Parameter	Qualifier Result	Units	Reporting Limit	Method	Laboratory Batch	_ r	Analyzed Date/Time	Analyst	Lab ID
Laboratory ID: Sample ID:	2125110001 POEntry "Tangerine" (Grab		Sampled: 03/16 Matrix: Water		Received.	: 03/16/06 Wet Weight I		
Nitrate as N Nitrite as N	0.0061 0.0022 U	rng/L mg/L	0.0030 0.0022	EPA 300.0 EPA 300.0	IC6725 IC6725		03/17/06 15:30	RS	E96080 E96080

¹Result Qualifiers: U = Not Detected I = Analyte detected between the Laboratory Method Detection Limit and Laboratory Reporting Limit Applicable Florida Department of Environmental Protection Qualifiers defined below. Statement of Estimated Uncertainty available upon request.

5600 US 1 North Fort Pierce, FL 34946 FDOH # E96080 Printed: 3/20/06

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4155 St. Johns Pkwy Sulte 1300 Sanford, FL 32771 FDOH # E83509

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307 Coolidge Avenue Lehigh Acres, FL 33936 FDOH # E85370

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2514 Osawaw Boulevard Spring Hill, FL 34607 FDOH # E84418

Page 3 of 4



FEB 2 3 2007 arlie Crist Governor **Florida Departmen FKottkamp** Environmental Protectio Governor

Central District 3319 Maguire Boulevard, Suite 232 Orlando, Florida 32803-3767

Michael W. Sole Secretary

February 15, 2007

Aqua Utilities Florida, Inc. 1100 Thomas Avenue Leesburg, FL 34748

Attention: Jack Lihvarcik

Orange County - PW **Tangerine Water Company** PWS ID Number 3481329

Dear Mr. Lihvarcik:

The Department conducted a sanitary survey of your public water system on February 1, 2007. This inspection was conducted by Chris Rossing. 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, please contact Chris Rossing at the above address or by phone at (407) 893-... DOCUMENT NUMBER-DATI 3318, extension 2294.

Sincerely,

Kim M. Dodson, Environmental Manager Drinking Water Compliance and Enforcement

OCD-PW-SS-07-0088

FPSC-COMMISSION CLERK 80 2 MAY 04320

KMD/cr Enclosure (Tank Cleaning Document)

cc: William Fontaine, Aqua Utilities of Florida Chris Rossing, Drinking Water Compliance and Enforcement fili

State of Florida Department of Environmental Protection Central District SANITARY SURVEY REPORT

Plant Name	County <u>Orange</u> PWS ID # <u>3481329</u>
Plant Location 5539 Huron Street, Tangerine, FL 32777	Phone <u>352/732-6027</u>
Owner Name Aqua Utilities of Florida, Attn: Jack Lihva	rcik Phone 352/732-6027
Owner Address P.O. Box 490310, Leesburg, FL 34749	
Contact Person Jerry Connolly	Title Manager of Operations Phone 352/787-0980
This Survey Date2/1/07 Last Survey Date	4/28/04 Last C.I. Date <u>10/4/01</u>
	RAW WATER SOURCE
PWS TYPE & CLASS	GROUND; Number of Wells 2
Community (5C)	
Non-transient Non-community Non-Community	PURCHASED from PWS ID #
	Emergency Water Source
PWS STATUS	Emergency Water Capacity
Approved system with approval number & date	Energency water Capacity
3302, 4/28/59	AUXILIARY POWER SOURCE
<u> </u>	X Yes None Not Required
Lingaporovad system	Source Katolight Generator
Unapproved system	Source <u>Katolight Generator</u> Capacity of Standby (kW) <u>80</u>
SERVICE AREA CHARACTERISTICS	Switchover: 🛛 Automatic 🗌 Manual
Municipality/City	Standby Plan: X Yes No
	Hrs Operated Under Load4 hrs/mo
Food Service: Yes No N/A	What equipment does it operate?
OPERATION & MAINTENANCE	Well pumps High Service PumpsN/A
Certified Operator: X Yes No Not required	Treatment Equipment
Operator(s) & Certification Class-Number	Satisfy average day demand? Yes No Unk
William Fontaine C-6813	Comments
O & M Log: Yes No Not required	
Operator Visitation Frequency	TREATMENT PROCESSES IN USE
Hrs/day: Required Visit Actual Visit	Disinfection
Days/Wk: Required 6 Actual 6	
Non-consecutive Days? Yes No NA	What additional treatment is needed?
MORs submitted regularly? X Yes No NA	None
Data missing from MORs? 🛛 No 🔲 Yes 🗍 N/A	For control of what deficiencies?
	<u>N/A</u>
Number of Service Connections 243	DISTRIBUTION SYSTEM
Population Served 851 Basis Operator	Flow Measuring Device <u>Flow Meter</u> Meter Size & Type <u>4" Master</u>
Average Day (from MORs) <u>135,314 gpd</u>	Packflow Provention Devices: W Ves No
Max. Day (from MORs) <u>288,000 gpd 5/06</u>	Backflow Prevention Devices: 🖾 Yes 🗌 No
Max-day Design Capacity <u>360,000 gpd</u>	Cross-connections <u>None observed</u>
Comments	Written Cross-connection Control Program: Yes
	Coliform Sampling Plan: 🛛 Yes 🔲 No 📋 N/A
	Comments

 PWS ID #
 3481329

 Date
 2/1/07

GROUND WATE	R SOURCE
Melt Number	

Well Number		1	2		1
Year Drilled		1945	1959		-
Depth Drilled		438'	413'		
Drilling Me	ethod	Cable tool	Cable tool		
Type of G	rout	Unknown	Unknown		
Static Wa	ter Level	Unknown	Unknown		
Pumping	Water Level	Unknown	Unknown	······	
Design W	ell Yield	Unknown	Unknown		
Test Yield	· · · · · · · · · · · · · · · · · · ·	Unknown	Unknown		·····
Actual Yie	d (if different than rated capacity)	Unknown	Unknown		<u> </u>
Strainer		None	None		
Length (or	utside casing)	130'	176'	······	·······
Diameter	(outside casing)	6"	6"		
Material (outside casing)	Black iron	Black iron		
Well Cont	amination History	None	*None - see comments		
Is inundat	ion of well possible?	No	No		1
6' X 6' X 4	" Concrete Pad	Yes	Yes		
	Septic Tank	>200'	>200'		
SET	Reuse Water	N/A	N/A		
BACKS	WW Plumbing	>100'	>100'		
	Other Sanitary Hazard	N/A	N/A	· · · · ·	·
	Туре	Vertical turbine	Vertical turbine		
	Manufacturer Name	Goulds	Peerless	· · · · ·	
PUMP	Model Number	6DH2	Unknown		
	Rated Capacity (gpm)	250	250	····	
	Motor Horsepower	25	25	······································	
Well casing 12" above grade?		Yes	Yes		·
Well Casing Sanitary Seal		Yes	Yes		
Raw Water Sampling Tap		Yes	Yes		
Above Ground Check Valve		Yes	Yes		
Fence/Ho	using	Yes	Yes	<u>_</u>	
Well Vent	Protection	Yes	N/A	·······	<u> </u>

COMMENTS <u>Provide information for items marked "unknown." *Well #2:</u> Due to repeated total coliform positive raw water samples, disinfection and a 20-sample survey was required to determine if the well is susceptible to microbial contamination. Results of the January 2006 bacteriological survey were satisfactory.

PWS ID #	3481329
Date	2/1/07

	CHLORINATION (Disinfection) Type: 🗍 Gas 🛛 Hypo
	Make <u>Chem-Tech (3)</u> Capacity <u>30 gpd</u>
	Chlorine Feed Rate 65% stroke
•	Avg. Amount of Cl ₂ gas used N/A
	Chlorine Residuals: Plant 2.02 Remote >2.2
	Remote tap location 5107 Dora Drive
	DPD Test Kit: 🛛 On-site 🛛 With operator
	None Not Used Daily
	Injection Points Prior to hydropneumatic tank
	Booster Pump Info N/A
•	Comments

-	Chlorine Gas Use	YES	NO	Comments
	Requirements			Vuinienta
يى <u>ت</u> ە	Dual System			
	Auto-switchover			
an a	Alarms: Loss of Cl ₂ sapability Loss of Cl ₂ residual Cl ₂ leak detection			
	Scale			
	Chained Cylinders			
	Reserve Supply	Q		
	Adequate Air-pak			
	Sign of Leaks			
يقت م و	Fresh Ammonia		Ď	
	Ventilation			
-	Room Lighting			
	Warning Signs			
	Repair Kits			
~	Fitted Wrench			
	Housing/Protection			

STORAGE F	ACILITIES	
(G) Ground	(H) Hydropneumatic	(E) Elevated

Tank Type/Number	Н		
Capacity (gal)	20,000		1
Material	Steel		
Gravity Drain	Yes		
By-pass Piping	Yes		
Pressure Gauge	Yes		
Sight Glass or Level Indicator	Yes	·	
Fittings for Sight Glass	Yes		
Protected Openings	Yes		
PRV/ARV	PRV		
On/Off Pressure	35/60		
Access Padlocked	Yes		
Comments	L	· · · · · · · · · · · · · · · · · · ·	

HIGH SERVICE PUMPS

Pump Number			
Туре			
Make			
Model			
Capacity (gpm)			
Motor HP	<u> </u>		
Date Installed			
Maintenance			
Comments	·	· · · · · · · · · · · · · · · · · · ·	
	<u>.</u>		 \rightarrow

AERATION (Gases,	Fe, & Mn Removal)
Туре	Capacity
Aerator Condition	

	Bloodworm Presence	
	Visible Algae Growth	
	Protective Screen Condition	
	Comments	

PWS ID #	3481329
Date	2/1/07

DEFICIENCIES:

No deficiencies noted during this inspection. Nice work!

COMMENTS/REMINDERS:

 Monitoring for nitrate and nitrite must be conducted at the point of entry to the distribution system no later than December 31, 2007. Early sampling is recommended.

Results shall be submitted within the first ten days following the end of the required monitoring period, or the first ten days following the month in which the sample results were received, whichever time is shortest.

- The consumer confidence report (CCR) must be delivered to consumers and the Department no later than July 1, 2007, and certification of delivery of the CCR must be submitted to the Department no later than August 10, 2007.
- Provide date of last cleaning for finished drinking water storage tank. A document explaining some requirements for tank maintenance is enclosed.

Inspector

_____ Title _____ Env. Specialist 1 _____ Date _____2/5/07 _____ ____ Title _____ Environmental Manager _____ Date ____2/15/07 _____

Approved by

FINISHED-DRINKING-WATER STORAGE TANK CLEANING & INSPECTION

Provide documentation of cleaning for finished water storage tanks.

Accumulated sludge and bio-growths shall be cleaned routinely (i.e., at least annually) from all treatment facilities that are in contact with raw, partially treated, or finished drinking water and that are not specifically designed to collect sludge or support a bio-growth; and blistering, chipped, or cracked coatings and linings on treatment or storage facilities in contact with raw, partially treated, or finished drinking water shall be rehabilitated or repaired.

Provide documentation of inspection and cleaning of finished water storage tanks.

Finished-drinking-water storage tanks, including conventional hydropneumatic tanks with an access manhole but excluding bladder- or diaphragm-type hydropneumatic tanks without an access manhole, shall be checked at least annually to ensure that hatches are closed and screens are in place; shall be cleaned at least once every five years to remove bio-growths, calcium or iron/manganese deposits, and sludge from inside the tanks; and shall be inspected for structural and coating integrity at least once every five years by personnel under the responsible charge of a professional engineer licensed in Florida. [Rule 62-555.350(2), F.A.C.]

All suppliers of water shall keep records documenting that their finished-drinking-water storage tanks, including conventional hydropneumatic tanks with an access manhole but excluding bladder- or diaphragm-type hydropneumatic tanks without an access manhole, have been cleaned and inspected during the past five years in accordance with subsection 62-555.350(2), F.A.C. [Rule 62-555.350(12)(c), F.A.C.]

Provide documentation showing proper disinfection following cleaning and/or inspection of the finisheddrinking-water storage tank.

Before new or altered storage facilities and storage facilities taken out of operation for repair or maintenance that might lead to contamination of water are placed into, or returned to, operation, they shall be properly disinfected in accordance with American Water Works Association (AWWA) Standard C652. [Rule 62-555.340(1), F.A.C.]

Note: Disinfection methods allowing discharge of the initially heavily chlorinated water that may contain various chlorinated organic compounds into the distribution system are discouraged. It is advised that the free chlorine residual in the storage facility be reduced to a concentration appropriate for distribution by completely draining the storage facility and refilling with potable water.

Prior to disposal of heavily chlorinated water from the tank disinfection process, the environment into which the chlorinated water is being discharged shall be inspected, and if there is any likelihood that the chlorinated discharge will cause damage, then a reducing agent shall be applied to the water to be wasted to thoroughly neutralize the chlorine residual in the water. Federal, state, or local environmental regulations may require special provisions or permits prior to disposal of highly chlorinated water. The proper authorities should be contacted prior to disposal of highly chlorinated water.

Provide results of a bacteriological evaluation following disinfection.

Bacteriological evaluations to verify proper disinfection of storage facilities shall be conducted. A total of at least two samples -- each taken on a separate day and taken at least six hours apart from the other sample(s) -- shall be collected at each of the locations indicated in the applicable AWWA standard. The chlorine residual in the facilities shall be no more than four milligrams per liter. Samples containing more than four milligrams per liter of total chlorine shall be considered invalid. [Rule 62-555.340(2)(a), F.A.C.]

If any sample shows the presence of total coliform, the facilities shall be redisinfected and resampled until two consecutive samples at each sampling location show the absence of total coliform. [Rule 62-555.340(2)(b), F.A.C.]

Bacteriological test results shall be considered unacceptable if the tests were completed more than 60 days before the Department received the results. [Rule 62-555.340(2)(c), F.A.C.]

FINISHED-DRINKING-WATER STORAGE TANK CLEANING & INSPECTION Page 2 of 2

Except as allowed under the next paragraph and except as allowed under special construction permit conditions established in accordance with paragraph 62-555.533(2)(f), F.A.C., no disinfected storage facilities shall be placed into, or returned to, operation until a bacteriological evaluation has been satisfactorily completed, results of the evaluation have been submitted to the appropriate Department of Environmental Protection (DEP) District Office, and said DEP District Office has approved the facilities for operation. [Rule 62-555.340(3), F.A.C.]

When constructing or altering storage facilities, for which a public water system construction permit is not required per subsection 62-555.520(1), F.A.C., and when taking storage facilities out of operation for repair or maintenance that might lead to contamination of water, the facilities may be placed into, or returned to, operation without the Department's approval after disinfection and satisfactory completion of a bacteriological evaluation. The results of the bacteriological evaluation shall be submitted to the appropriate DEP District Office along with the next monthly operation report(s), or if no monthly operation report is required, within ten days after the end of the month during which the bacteriological evaluation was completed. [Rule 62-555.340(4), F.A.C.]

Ensure proper notification to affected customers and the Department.

Suppliers of water shall notify affected water customers in writing or via telephone, newspaper, radio, or television by no later than the previous business day before taking public water system (PWS) components out of operation for planned maintenance or repair work if the work is expected to adversely affect finished-water quality or interrupt water service to any service connection. [Rule 62-555.350(10)(d), F.A.C.]

Suppliers of water shall telephone, and speak directly to a person at, the appropriate DEP District Office by no later than the previous business day before taking PWS components out of operation for planned maintenance or repair work if the work is expected to adversely affect finished-water quality, interrupt water service to 150 or more service connections or 350 or more people, interrupt water service to any one service connection for more than eight hours, or necessitate the issuance of a precautionary "boil water" notice in accordance with the Department of Health's (DOH) "Guidelines for the Issuance of Precautionary Boil Water Notices" as adopted in Rule 62-555.335, F.A.C. [Rule 62-555.350(10)(d), F.A.C.]

Suppliers of water shall issue precautionary "boil water" notices as required or recommended in the DOH's "Guidelines for the Issuance of Precautionary Boil Water Notices" as adopted in Rule 62-555.335, F.A.C. [Rule 62-555.350(11), F.A.C.]

Suppliers of water shall describe in the monthly operation reports all emergency or abnormal operating conditions and all maintenance or repair work that involves taking out of operation public water system components other than water service lines. [Rule 62-555.350(10)(e), F.A.C.]

Suppliers of water shall describe in the operation and maintenance logs all emergency or abnormal operating conditions and all maintenance or repair work that involves taking out of operation public water system components other than water service lines. [Rule 62-555.350(10)(e), F.A.C.]