

# THE WOODS UTILITY COMPANY

October 1, 2020

FILED 10/1/2020  
DOCUMENT NO. 10032-2020  
FPSC - COMMISSION CLERK

Office of Commission Clerk  
Florida Public Service Commission  
2540 Shumard Oak Blvd.  
Tallahassee, FL 32399-0850

**Re:** Docket No. 20190125-WS - Application for staff-assisted rate case in Sumter County by The Woods Utility Company – Second Update

Dear Commission Clerk:

The Woods Utility Company (The Woods) hereby submits its second update pursuant to Order No. PSC-2020-0087-PAA-WS, issued on March 25, 2020.

Please find attached the Florida Department of Environmental Protection (FDEP) inspection report of the water treatment plant dated September 21, 2020. The FDEP has determined that the water treatment plant is in compliance with FDEP rules and regulations.

In reference to the Lead & Copper testing, The Woods intends to conduct its second semi-annual lead and copper testing prior to December 2020. During this testing, the operator has been instructed to collect the sample with each homeowner.

This will include:


1. flushing inside tap while dropping off bottle
2. returning to assist in collection after 6 hours
3. flushing outside tap during initial visit.
4. collecting a corresponding lead and copper sample from the outside tap when collecting inside sample

The Woods has sampled its wells and there was little to no lead detected. See attached sample results from August 2019 and June 2020.

The Woods Utility Company  
Request for Extension

If you have any questions, please do not hesitate to contact me at (727) 848-8292, ext. 245.

Respectfully,

A handwritten signature in black ink, appearing to read "Troy Rendell". The signature is fluid and cursive, with a large initial "T" and "R".

Troy Rendell

Vice President

Investor Owned Utilities

// for *The Woods Utility Company*



# FLORIDA DEPARTMENT OF Environmental Protection

CENTRAL DISTRICT OFFICE  
3319 MAGUIRE BLVD., SUITE 232  
ORLANDO, FLORIDA 32803

Ron DeSantis  
Governor

Jeanette Nuñez  
Lt. Governor

Noah Valenstein  
Secretary

September 21, 2020

Gary Deremer, President  
The Woods Utility Company  
5320 Captain's Court  
New Port Richey, FL 34652

Re: The Woods Utility Company  
PW Facility ID #6600347  
Sumter County

Dear Mr. Deremer:

Department personnel conducted an inspection of the above-referenced facility on August 17, 2020. Based on the information provided during the inspection, the facility was determined to be in compliance with the Department's rules and regulations. A copy of the inspection report is attached for your records, and any non-compliance items which may have been identified at the time of the inspection have been corrected.

The Department appreciates your efforts to maintain this facility in compliance with state and federal rules. Should you have any questions or comments, please contact Nichole Shumard at 407-897-2957 or via e-mail at [Nichole.Shumard@FloridaDEP.gov](mailto:Nichole.Shumard@FloridaDEP.gov).

Sincerely,

A handwritten signature in cursive script, appearing to read "Jill Farris".

Jill Farris, Manager  
Central District  
Florida Department of Environmental Protection

cc: Nichole Shumard, Jill Farris, FDEP  
Melisa Rotteveel, US Water Services, [Mrotteveel@uswatercorp.net](mailto:Mrotteveel@uswatercorp.net)

# SANITARY SURVEY REPORT

Plant Name THE WOODS UTILITY COMPANY County Sumter PWS ID # 6600347  
Plant Location 11400 CR 678, Webster, FL 33597 Phone 727-848-8292  
Owner Name U.S. Water Corporation; Attn: Gary Deremer Phone 727-848-8292  
Owner Address 4939 Cross Bayou Blvd, New Port Richey, FL 34652-2480  
Contact Person US Water Title Operator Phone 727-919-1534  
This Survey Date 08/17/2020 Last Survey Date 07/25/2019 Last Compliance Inspection Date 06/28/2012

PWS TYPE: Community

PLANT CATEGORY & CLASS: 4D

MAX-DAY DESIGN CAPACITY: 63,500 gpd

PWS STATUS: Approved

## TREATMENT PROCESSES IN USE

Hypochlorination, aeration, green-sand filters, potassium permanganate, iron sequestration (aqua gold)

## SERVICE AREA CHARACTERISTICS

Subdivision \_\_\_\_\_

Food Service:  Yes  No  N/A

Number of Service Connections 78

Population Served 216 Basis CWS

## OPERATION & MAINTENANCE LOG: Yes

Location Water treatment plant

Comments \_\_\_\_\_

## CERTIFIED OPERATOR: Yes

Operator(s) & Certification Class-Number:

Gary Kissick C-7846

Hrs/day: Required \_\_\_\_\_ Visit\* \_\_\_\_\_ Actual \_\_\_\_\_ Visit\* \_\_\_\_\_

Days/wk: Required 3 Actual 3

Non-consecutive Days?  Yes  No  N/A

Comments \*Visits must total 0.6 hours/week

## MONTHLY OPERATION REPORTS (MORs)

MORs submitted regularly?  Yes  No  N/A

Data missing from MORs?  No  Yes  N/A

Average Day (from MORs) 16,942 gpd

Maximum Day (from MORs) 22,000 gpd 07/2020

Comments \_\_\_\_\_

Flow Measuring Device \_\_\_\_\_ Flow Meter \_\_\_\_\_

Meter Size & Type 2" Neptune

Date Last Calibrated 07/25/2017

## RAW WATER SOURCE

GROUND; Number of Wells 1

PURCHASED from PWS ID # \_\_\_\_\_

Emergency Water Source \_\_\_\_\_

Emergency Water Capacity \_\_\_\_\_

## STANDBY POWER SOURCE: Yes

Source Elliot Generator

Capacity of Standby (kW) Unknown

Switchover:  Automatic  Manual

Hrs Operated Under Load 4 hrs/mo.

What equipment does it operate?

Well Pumps \_\_\_\_\_

High Service Pumps \_\_\_\_\_

Treatment Equipment \_\_\_\_\_

Satisfy avg. daily demand?  Yes  No  Unknown

Audio-visual alarm?  Yes  No

Comments \_\_\_\_\_

## PLANS AND MAPS

Coliform Sampling Plan  Yes  No  N/A

D/DBP Monitoring Plan  Yes  No  N/A

Lead and Copper Plan  Yes  No  N/A

Distribution System Map  Yes  No  N/A

Emergency Response Plan  Yes  No  N/A

Comments \_\_\_\_\_

## PREVENTIVE MAINTENANCE/O&M

Operation & Maintenance Manual  Yes  No

Preventive Maintenance Program  Yes  No

Flushing Program  Yes  No  N/A

Records  Yes  No  N/A

Isolation Valve Exercise  Yes  No  N/A

Records  Yes  No  N/A

Comments \_\_\_\_\_

## CROSS CONNECTION CONTROL

# BFPAs 3 # Tested 3

WWTP RPZ Yes Date Tested 04/27/2020

Written Plan Yes Date 02/2007

Comments \_\_\_\_\_

**GROUND WATER SOURCE**

Well Number (Florida Unique Well ID #)	1(AAC1546)			
Year Drilled	1974			
Depth Drilled	136			
Drilling Method	Cable Tool			
Type of Grout	Unknown			
Static Water Level	22			
Pumping Water Level	45			
Design Well Yield	Unknown			
Test Yield	Unknown			
Actual Yield (if different than rated capacity)	Unknown			
Strainer	Unknown			
Length (outside casing)	75"			
Diameter (outside casing)	4"			
Material (outside casing)	Stainless			
Well Contamination History	Yes			
Is inundation of well possible?	No			
6' X 6' X 4" Concrete Pad	Yes			
SET BACKS	Septic Tank	>100'		
	Reuse Water	N/A		
	WW Plumbing	>100'		
	Other Sanitary Hazard	None observed		
PUMP	Type	Submersible		
	Manufacturer Name	Sta-Rite		
	Model Number	Unknown		
	Rated Capacity (gpm)	100		
	Motor Horsepower	Unknown		
Well casing 12" above grade?	Yes			
Well Casing Sanitary Seal	Yes			
Raw Water Sampling Tap	Yes			
Above Ground Check Valve	Yes			
Security	Yes			
Well Vent Protection	Yes			

COMMENTS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



**CHLORINATION (Disinfection)**

Type:  Gas  Hypo  
 Make Stenner Capacity 17 gpd  
 Chlorine Feed Rate 30.5%  
 Avg. Amount of Cl<sub>2</sub> gas used N/A  
 Chlorine Residuals: Plant 1.28 Remote 0.91  
 Remote tap location lift station  
 DPD Test Kit:  On-site  With operator  
 None  Not Used Daily  
 Injection Points After ground storage tank/after all  
treatments  
 Booster Pump Info N/A  
 Comments \_\_\_\_\_  
 \_\_\_\_\_

**FILTRATION (Suspended Solids Removal)**

Type Pressure filtration  
 Size Unknown No. of Units 3  
 Length of Filter Runs Unknown  
 Type of Filter Media GreensandPlus Media visible? No  
 Clean after BW? Unknown  
 Filter Rate 25 GPM BW Rate Unknown  
 Filter Capacity Unknown  
 Cracks/Cementation/Channeling N/A  
 Effluent Stability Unknown Algae Growth N/A  
 Turbidity in clearwell? N/A  
 Head Loss Gauge Yes  
 Comments Each filter backwashed once every three  
days (one filter backwashed each day).  
 \_\_\_\_\_

**AERATION (Gases, Fe, & Mn Removal)**

Type Tray Capacity Unknown  
 Aerator Condition Good  
 Visible Algae Growth None  
 Protective Screen Condition Good  
 Frequency of Cleaning as needed every 6 months  
 Date Last Inspected/Cleaned 08/2020  
 Comments \_\_\_\_\_  
 \_\_\_\_\_

**STORAGE FACILITIES**

(G) Ground (C) Clearwell (E) Elevated  
 (B) Bladder (H) Hydropneumatic / flow-through

Tank Type/Number	H/1	C/2
Capacity (gal)	2,500	5,000
Material	Steel	Concrete
Gravity Drain	Yes	Yes
By-Pass Piping	Yes	Yes
Protected Openings	Yes	Yes
Sight Glass or Level Indicator	Yes	No
PRV/ARV	PRV	None
Pressure Gauge	Yes	No
On/Off Pressure	40/60	N/A
Access Secured	Yes	Yes
Access Manhole	Yes	Yes
Tank Sample Tap Location	Tank discharge piping	N/A
Date of Inspection	08/25/2017	08/25/2017
Date of Cleaning	08/25/2017	08/25/2017

Comments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**HIGH SERVICE PUMPS**

Pump Number	1
Type	Jet
Make	Sta-Rite
Model	Unknown
Capacity (gpm)	Unknown
Motor HP	5
Date Installed	Unknown

Comments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**DEFICIENCIES:**

- No deficiencies noted at the time of the inspection.

**MONITORING REMINDER:**

- Lead and copper 1<sup>st</sup> biannual monitoring period (July-December 2020), collect 10 samples, including sites that had exceeded the action level in the past.
- Collect HAA5 at 11380 S US Hwy 301, Webster, FL 33597 in October 2020.
- Monitoring schedules are available on Florida's DEP website:  
[https://floridadep.gov/sites/default/files/CD\\_Monitoring\\_ScheduleQ1\\_compressed.pdf](https://floridadep.gov/sites/default/files/CD_Monitoring_ScheduleQ1_compressed.pdf)

**COMMENTS:**

- Contact FRWA (Florida Rural Water Association) at 850-668-2746, or [frwa@frwa.net](mailto:frwa@frwa.net), for free technical assistance with your system. FRWA has extended benefits offered to members.
- Provide documentation that the finished-drinking-water meter has been calibrated at least every 5 years.  
Checking the calibration of finished-drinking-water meters at treatment plants shall be performed in accordance with the equipment manufacturer's recommendations or in accordance with a written preventive maintenance program established by the supplier of water. [Rule 62-555.350(2), F.A.C.]
- Suppliers of water shall submit written notification to the Department before beginning work or alterations to the public water system. Each notification shall be submitted to the appropriate Department of Environmental Protection District Office or Approved County Health Department and shall include the following: a description of the scope, purpose, and location of the work or alterations; and assurance that the work or alterations will comply with applicable requirements listed in Rule 62-555.330, F.A.C. Suppliers of water may begin such work or alterations 14 days after providing notification to the Department unless they are advised by the Department that the notification is incomplete or that a construction permit is required.
- Suppliers of water shall telephone the SWO at 1-800-320-0519 immediately (i.e., within two hours) after discovery of any actual or suspected sabotage or security breach, or any suspicious incident, involving a public water system. [Rule 62-555.350(10)(a), F.A.C.]
- Suppliers of water shall telephone, and speak directly to a person at, the appropriate DEP District Office as soon as possible, but never later than noon of the next business day, in the event of any of the following emergency or abnormal operating conditions:
  - The occurrence of any abnormal color, odor, or taste in a public water system's raw or finished water;
  - The failure of a public water system to comply with applicable disinfection requirements; or
  - The breakdown of any water treatment or pumping facilities, or the break of any water main, in a public water system if the breakdown or break 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 "Guidelines for the Issuance of Precautionary Boil Water Notices" as adopted in Rule 62-555.335, F.A.C. [Rule 62-555.350(10)(b), F.A.C.]
- Suppliers of water shall notify affected water customers in writing or via telephone, newspaper, radio, or television; and 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 "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 Department of Health’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.]

*Nichole Shumard*

\_\_\_\_\_  
*Inspector Signature*

Nichole Shumard  
*Printed Name*

Environmental Specialist  
*Title*

09/15/2020  
*Date*

*Jill Farris*

\_\_\_\_\_  
*Reviewer Signature*

Jill Farris  
*Printed Name*

Environmental Manager  
*Title*

09/21/2020  
*Date*



## Lead and Copper Tap Sample Analysis And Result Ranking Report

Reporting Format 62-550.730(4)(a)

# REVIEWED

System Name: The Woods Subdivision  
 PWS-ID: 660-0347  
 Laboratory Name: Advanced Environmental Laboratories, Inc.  
 Laboratory Contact: Brandon O'Hara  
 Lab Phone Number: (407)937-1594

Date Submitted to Lab: 09/16/2019 16:09  
 Report Date: October 3, 2019  
 Lead or Copper: Lead  
 90th Percentile Value: 0.33

A	RANK	LOCATION		CLIENT SAMPLE		LAB SAMPLE ID	DATE SITE	LEAD (mg/L)	QUAL.	MDL (mg/L)	METHOD	ANALYSIS DATE	LAB ID
		NO	TIER	ID	SITE								
	1			21	11448 CR 675	A1907782009	08/19/2019	0.0039	I	0.0015	SM 3113B	09/20/2019	E82535
	2			7	11559 CR 678	A1907782002	08/09/2019	0.0073	I	0.0015	SM 3113B	09/20/2019	E82535
	3			20	3391 CR 679	A1907782008	08/10/2019	0.0081	I	0.0015	SM 3113B	09/20/2019	E82535
	4			14	3280 CR 676	A1907782006	08/10/2019	0.012		0.0015	SM 3113B	09/20/2019	E82535
	5			5	11490 CR 678	A1907782001	08/09/2019	0.027		0.0015	SM 3113B	09/20/2019	E82535
	6			9	3390 CR 677	A1907782003	08/12/2019	0.029		0.0015	SM 3113B	10/02/2019	E82535
	7			18	11478 CR 678	A1907782007	08/09/2019	0.054		0.0030	SM 3113B	09/20/2019	E82535
	8			12	11522 CR 675 W	A1907782005	08/11/2019	0.19		0.0060	SM 3113B	10/02/2019	E82535
	9			10	11427 CR 675	A1907782004	08/22/2019	0.33		0.030	SM 3113B	10/02/2019	E82535
	10			26	11445 CR 675	A1907782010	08/11/2019	0.41		0.030	SM 3113B	10/02/2019	E82535

CERTIFICATION. The tap samples used for lead and copper analyses were submitted by the above PWS. Each sample container had one liter of solution (+/- 100mL). All samples were taken properly by the above system and analyzed in accordance with the requirements in Chapter 10D-41, F.A.C. The sampling dates were reported for each sample received. I hereby certify that all data submitted are correct.

SIGNATURE OF AUTHORIZED LABORATORY REPRESENTATIVE:

NAME: Brandon O'Hara

*Brandon O'Hara*

TITLE and DATE: Laboratory Manager

10/3/2019

# Lead and Copper Tap Sample Analysis And Result Ranking Report

Reporting Format 62-550.730(4)(a)

System Name: The Woods Subdivision  
 PWS-ID: 660-0347  
 Laboratory Name: Advanced Environmental Laboratories, Inc.  
 Laboratory Contact: Brandon O'Hara  
 Lab Phone Number: (407)937-1594

Date Submitted to Lab: 09/16/2019 16:09  
 Report Date: October 3, 2019  
 Lead or Copper: Copper  
 90th Percentile Value: 2

A	RANK	LOCATION		CLIENT SAMPLE		LAB SAMPLE ID	DATE SITE	COPPER (mg/L)	QUAL.	MDL (mg/L)	METHOD	ANALYSIS DATE	LAB ID
		NO	TIER	ID	SITE								
	1			21	11448 CR 675	A1907782009	08/19/2019	0.14		0.027	SM 3113B	09/27/2019	E82535
	2			9	3390 CR 677	A1907782003	08/12/2019	0.18		0.027	SM 3113B	09/27/2019	E82535
	3			5	11490 CR 678	A1907782001	08/09/2019	0.43		0.027	SM 3113B	09/27/2019	E82535
	4			7	11559 CR 678	A1907782002	08/09/2019	0.44		0.027	SM 3113B	09/27/2019	E82535
	5			20	3391 CR 679	A1907782008	08/10/2019	0.76		0.055	SM 3113B	09/27/2019	E82535
	6			14	3280 CR 676	A1907782006	08/10/2019	0.78		0.027	SM 3113B	09/27/2019	E82535
	7			12	11522 CR 675 W	A1907782005	08/11/2019	1.1		0.055	SM 3113B	10/01/2019	E82535
	8			18	11478 CR 678	A1907782007	08/09/2019	1.4		0.055	SM 3113B	09/27/2019	E82535
	9			26	11445 CR 675	A1907782010	08/11/2019	2.0		0.055	SM 3113B	10/01/2019	E82535
	10			10	11427 CR 675	A1907782004	08/22/2019	2.7		0.55	SM 3113B	10/01/2019	E82535

CERTIFICATION. The tap samples used for lead and copper analyses were submitted by the above PWS. Each sample container had one liter of solution (+/- 100mL). All samples were taken properly by the above system and analyzed in accordance with the requirements in Chapter 10D-41, F.A.C. The sampling dates were reported for each sample received. I hereby certify that all data submitted are correct.

SIGNATURE OF AUTHORIZED LABORATORY REPRESENTATIVE:

NAME: Brandon O'Hara

*Brandon O'Hara*

TITLE and DATE: Laboratory Manager

10/3/2019



## Lead and Copper Tap Sample Analysis And Result Ranking Report

Reporting Format 62-550.730(4)(a)

System Name: The Woods Subdivision  
 PWS-ID: 660-0347  
 Laboratory Name: Advanced Environmental Laboratories, Inc.  
 Laboratory Contact: Brandon O'Hara  
 Lab Phone Number: (407)937-1594

Date Submitted to Lab: 06/18/2020 16:06  
 Report Date: July 14, 2020  
 Lead or Copper: Lead  
 90th Percentile Value: 0.0195

A	RANK	LOCATION		CLIENT SAMPLE		LAB SAMPLE ID	DATE SITE	LEAD (mg/L)	QUAL.	MDL (mg/L)	METHOD	ANALYSIS DATE	LAB ID
		NO	TIER	ID	SITE								
	1			12	11522 CR 796 West	A2005314012	08/10/2020	0.0015	U	0.0015	SM 3113B	06/29/2020	E82535
	2			14	3280 CR 676	A2005314014	06/11/2020	0.0015	U	0.0015	SM 3113B	06/29/2020	E82535
	3			2	11417 CR 675	A2005314002	06/12/2020	0.0015	U	0.0015	SM 3113B	06/29/2020	E82535
	4			11	11601 CR 675	A2005314011	06/15/2020	0.0015	U	0.0015	SM 3113B	06/29/2020	E82535
	5			10	11427 CR 675	A2005314010	06/16/2020	0.0015	U	0.0015	SM 3113B	06/29/2020	E82535
	6			5	11490 CR 678	A2005314005	06/17/2020	0.0015	U	0.0015	SM 3113B	06/29/2020	E82535
	7			13	11432 CR 678	A2005314013	06/17/2020	0.0015	U	0.0015	SM 3113B	06/29/2020	E82535
	8			8	3209 CR 676	A2005314008	06/09/2020	0.0015	U	0.0015	SM 3113B	06/29/2020	E82535
	9			6	11552 CR 678	A2005314006	06/11/2020	0.0015	U	0.0015	SM 3113B	06/29/2020	E82535
	10			4	11489 CR 675	A2005314004	06/08/2020	0.0035	I	0.0015	SM 3113B	06/29/2020	E82535
	11			7	11559 CR 678	A2005314007	06/18/2020	0.0047	I	0.0015	SM 3113B	06/29/2020	E82535
	12			9	3390 CR 677	A2005314009	06/15/2020	0.0053	I	0.0015	SM 3113B	06/29/2020	E82535
	13			1	11542 US 301	A2005314001	06/17/2020	0.012		0.0015	SM 3113B	06/29/2020	E82535
	14			15	11497 CR 678	A2005314015	06/15/2020	0.027		0.0015	SM 3113B	07/09/2020	E82535
	15			3	3257 CR 676	A2005314003	06/09/2020	0.041		0.0015	SM 3113B	07/09/2020	E82535

CERTIFICATION. The tap samples used for lead and copper analyses were submitted by the above PWS. Each sample container had one liter of solution (+/- 100mL). All samples were taken properly by the above system and analyzed in accordance with the requirements in Chapter 10D-41, F.A.C. The sampling dates were reported for each sample received. I hereby certify that all data submitted are correct.

SIGNATURE OF AUTHORIZED LABORATORY REPRESENTATIVE:  
 NAME: Brandon O'Hara *Brandon O'Hara*  
 TITLE and DATE: Laboratory Manager 7/14/2020



## Lead and Copper Tap Sample Analysis And Result Ranking Report

Reporting Format 62-550.730(4)(a)

System Name: The Woods Subdivision  
 PWS-ID: 660-0347  
 Laboratory Name: Advanced Environmental Laboratories, Inc.  
 Laboratory Contact: Brandon O'Hara  
 Lab Phone Number: (407)937-1594

Date Submitted to Lab: 06/18/2020 16:06  
 Report Date: July 14, 2020  
 Lead or Copper: Copper  
 90th Percentile Value: 0.1395

A	RANK	LOCATION		CLIENT SAMPLE		LAB SAMPLE ID	DATE SITE	COPPER (mg/L)	QUAL.	MDL (mg/L)	METHOD	ANALYSIS DATE	LAB ID
		NO	TIER	ID	SITE								
	1			12	11522 CR <del>765</del> West	A2005314012	06/10/2020	0.0080	I	0.0027	SM 3113B	07/13/2020	E82535
	2			5	11490 CR 678	A2005314005	06/17/2020	0.0091	I	0.0027	SM 3113B	06/25/2020	E82535
	3			2	11417 CR 675	A2005314002	06/12/2020	0.010	I	0.0027	SM 3113B	06/25/2020	E82535
	4			14	3280 CR 676	A2005314014	06/11/2020	0.011		0.0027	SM 3113B	07/13/2020	E82535
	5			11	11601 CR 675	A2005314011	06/15/2020	0.012		0.0027	SM 3113B	07/13/2020	E82535
	6			6	11552 CR 678	A2005314006	06/11/2020	0.014		0.0027	SM 3113B	06/25/2020	E82535
	7			13	11432 CR 678	A2005314013	06/17/2020	0.015		0.0027	SM 3113B	07/13/2020	E82535
	8			7	11559 CR 678	A2005314007	06/16/2020	0.018		0.0027	SM 3113B	06/25/2020	E82535
	9			8	3209 CR 676	A2005314008	06/09/2020	0.020		0.0027	SM 3113B	06/25/2020	E82535
	10			10	11427 CR 675	A2005314010	06/16/2020	0.020		0.0027	SM 3113B	06/25/2020	E82535
	11			4	11489 CR 675	A2005314004	06/08/2020	0.023		0.0027	SM 3113B	06/25/2020	E82535
	12			3	3257 CR 676	A2005314003	06/08/2020	0.025		0.0027	SM 3113B	06/25/2020	E82535
	13			1	11542 US 301	A2005314001	06/17/2020	0.089	I	0.055	SM 3113B	06/25/2020	E82535
	14			15	11497 CR 678	A2005314015	06/15/2020	0.19		0.027	SM 3113B	07/13/2020	E82535
	15			9	3390 CR 677	A2005314009	06/15/2020	0.22		0.027	SM 3113B	06/25/2020	E82535

CERTIFICATION. The tap samples used for lead and copper analyses were submitted by the above PWS. Each sample container had one liter of solution (+/- 100mL). All samples were taken properly by the above system and analyzed in accordance with the requirements in Chapter 10D-41, F.A.C. The sampling dates were reported for each sample received. I hereby certify that all data submitted are correct.

SIGNATURE OF AUTHORIZED LABORATORY REPRESENTATIVE:

NAME: Brandon O'Hara *Brandon O'Hara*  
 TITLE and DATE: Laboratory Manager 7/14/2020

**PUBLIC WATER SYSTEM INFORMATION** (to be completed by sampler - please type or print legibly)

System Name: The Woods Utility PWS I.D. #: 660-0347

System Type (check one):  Community  Nontransient Noncommunity  Transient Noncommunity

Address: US Hwy 301 & CR 677

City: St. Catherine ZIP Code: 33597

Phone # 866-753-8292 Fax #: 727-849-429 E-Mail Address: mrotteveel@uswatercorp.net

**SAMPLE INFORMATION** (to be completed by sampler)

Sample Number: 1 Sample Date: 6-3-20 Sample Time: 1545 AM  PM (Circle One)

Sample Location (be specific): POE Location Code: \_\_\_\_\_

Disinfectant Residual (Required when reporting results for trihalomethanes and haloacetic acids): 1.7 mg/L Field pH: 7.66

Sample Type (Check Only One) Reason(s) for Sample (Check all that apply)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Distribution                               | <input type="checkbox"/> Routine Compliance with 62-650  | <input type="checkbox"/> Replacement (of invalidated Sample)      |
| <input checked="" type="checkbox"/> Entry Point (to Distribution)   | <input type="checkbox"/> Confirmation of MCL Exceedance* | <input type="checkbox"/> Special (not for compliance with 62-650) |
| <input type="checkbox"/> Plant Tap (not for compliance with 62-650) | <input type="checkbox"/> Composite of Multiple Sites**   | <input type="checkbox"/> Clearance (permitting)                   |
| <input type="checkbox"/> Raw (at well or intake)                    | <input checked="" type="checkbox"/> Other: _____         |   |
| <input type="checkbox"/> Max Residence Time                         | Sampling Procedure Used or Other Comments:               |   |
| <input type="checkbox"/> Ave Residence Time                         | _____  |   |
| <input type="checkbox"/> Near First Customer                        | _____  |   |

Conductivity, Calcium, Alkalinity, orthophosphate, lead, copper  
\*See 62-650.500(6) for requirements and restrictions. And 62-650.512(3) for nitrate or nitrite exceedances. \*\*See 62-650.550(4) for requirements and attach a results page for each site.

**SAMPLER CERTIFICATION**

I, Brooks Sherman OPERATOR, do HEREBY CERTIFY  
(Print Name) (Print Title)

that the above public water system and sample collection information is complete and correct.

Signature: Brooks Sherman Date: 6/3/20

Certified Operator #: 10009 Phone #: 352-278-8219 Sampler's Fax #: 727-848-7701

Sampler's E-mail: hshelley@uswatercorp.net

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

INORGANIC CONTAMINANTS  
62-550.310(1)

Report Number / Job ID: A2004929001  
PWS ID (From Page 1): 6600347

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification
1030	Lead	0.015	mg/L	0.00024	U	EPA 200.8	0.00024	06/19/2020	21:30	E82574

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

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

SECONDARY CONTAMINANTS

62-550.320

Report Number / Job ID: A2004929001

PWS ID (From Page 1): 6600347

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1022	Copper	1	mg/L	0.010	U	EPA 200.7	0.010	06/16/2020	19:32	E82574

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





