ORIGINAL

DOCKET NO. 050281-SU

Application of PLANTATION BAY UTILITY COMPANY,
for an increase in water and wastewater
rates in Volusia County, Florida

EXHIBIT 7

Additional Engineering Information

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07654 AUG-8 05
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CLASS B
WATER AND/OR WASTEWATER UTILITIES

FINANCIAL, RATE AND ENGINEERING MINIMUM FILING REQUIREMENTS

OF

Plantation Bay Utility Company

Exact Legal Name of Utility

VOLUME IIIa

FOR THE

Test Year Ended: 12/31/2004

1 of 2
DOCUMENT NUMBER-DATE
07654 AUG-8 05

PLANTATION BAY UTILITY COMPANY, INC.

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IIIa

1. Chemicals

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Plantation Bay Utility Company, Inc
Schedule of Chemicals
Docket No. 050281-WS
January 1, 2004 - December 31, 2004

	Aqua Mag		SM Hical Pebble QL		Chlorine Gas		HTH Shock Treatment		Total
	55 Gal Drum	Amount	Tons	Amount	150# Cylinder	Amount	100#	Amount	Amount
1/16/2004	1	759.00							759.00
1/20/2004			26.26	3,296.59					3,296.59
1/27/2004					8	560.00			560.00
2/13/2004	1	808.34							808.34
3/2/2004					8	560.00			560.00
3/26/2004					8	560.00			560.00
5/6/2004	1	808.34							808.34
4/22/2004					8	560.00			560.00
5/21/2004					8	600.00			600.00
6/16/2004					8	600.00			600.00
7/1/2004	1	808.34							808.34
7/7/2004					8	600.00			600.00
7/29/2004							2	195.96	195.96
7/26/2004			24.94	3,149.59					3,149.59
8/6/2004					8	600.00			600.00
9/13/2004					8	600.00			600.00
10/6/2004					8	600.00			600.00
10/20/2004	1	808.34							808.34
11/4/2004					10	750.00			750.00
11/3/2004			26.56	3,384.20					3,384.20
11/24/2004					8	600.00			600.00
12/16/2004					8	600.00			600.00
12/17/2004	1	808.34	-	-	-	-	-	-	808.34
	6	$4,800.70	77.76	$9,830.38	106	$7,790.00	2	$195.96	$22,617.04
Quantity Purchased	330		78		15,900		200		
Unit of Measure	Gallons		Tons		Pounds		Pounds		
Avg Cost per Unit	$ 14.55		$ 126.42		$ 0.49		$ 0.98		
Where Used (Specify Water Plant, Sewer Plant, Ponds, etc)	Water Plant		Water Plant		60% Water; 40% Sewer		Sewer		
Specify dosage rate:									
Water	2.67 gallons per 1 million gals.		1,780 lbs per 1 million gals.		25 lbs per day		N/A		
Sewer	N/A		N/A		18 lbs. per day		As needed to clean weirs		

October 17, 2003

Ms. Nancy Boccuzzi
Plantation Bay Utility Co., Inc.
100 Plantation Bay Drive
Ormond Beach, FL 32174

RE: Plantation Bay Order No.: F03100040

Dear Ms. Nancy Boccuzzi:

ELAB, Inc. received 1 sample on 10/1/2003 for the analyses presented in the following report.

Analyses are performed with method-required calibration and QA/QC samples, whenever applicable. Method performance, which is based on the calibration and QA/QC data, establishes the validity and certainty of the reported sample results. These data are provided along with the sample results, when requested.

Thank you for this opportunity to let Elab, Inc. be of service. If you have any questions regarding this report, please feel free to call me at (386) 672-5668, extension 304.

Sincerely,

Joseph J. Vondrick,
Project Manager
ELAB, Inc.
8 E. Tower Circle
Ormond Beach, FL 32174

THIS DOCUMENT MEETS NELAC STANDARDS
NELAC Certification # E83079

The following acronyms may be utilized within this report:

%REC	Percent Recovery
A	Absent
ABLK	Analytical Method Blank
DUP	Sample Duplicate
LCS	Laboratory Control Spike (may also be appended with an abbreviation indicating spiking level)
MBLK	Preparation Method Blank
MDL	Method Detection Limit
MS	Matrix Spike (may also be appended with an abbreviation indicating spiking level)
MSD	Matrix Spike Duplicate (may also be appended with an abbreviation indicating spiking level)
ND	Not Detected
P	Present
PQL	Practical Quantitation Limit
QCS	Alternate source Calibration Verification Standard (may also be reported as analytical LCS in some applications).
RL	Reporting Limit
RPD	Relative Percent Difference
SPK	Spike

Case Narrative

CLIENT: Plantation Bay Utility Co., Inc.
Project: Plantation Bay
Lab Order: F03100040

I. SAMPLE RECEIVING ACTIVITY

The samples were received on October 1, 2003. The samples arrived in good condition and were processed by sample control. Upon completion of the initial inspection, the samples were distributed within the laboratory for analysis.

II. DATA

Samples were prepped, analyzed and reported per method guidelines and specifications. No concentration were detected over drinking water MCLs. VOC bottles were taken separately but reported with this report.

III. QUALITY CONTROL

All QA/QC data meet method specifications, unless otherwise specified on the QC report. The Quality Control data for this submission are included with the sample analytical results.

ELAB, Inc. 8 East Tower Cr., Ormond Beach, FL 32174-8759

Date: *22-Oct-03*

Analytical Report

CLIENT: Plantation Bay Utility Co., Inc.
Lab Order: F03100040
Project: Plantation Bay
Lab ID: F03100040-001

Client Sample ID: 1 Entry to Dist.
Collection Date: 10/1/03 10:15:00 AM
Sample Description:
Matrix: Drinking Water

Analyses	Result	Qual	MDL	Limit	Units	DF	Date Analyzed	Batch ID
ANIONS BY ION CHROMATOGRAPHY		**E300.0**	PrepDate:				Analyst: **ACO**	
Chloride	49		0.061	0.50	mg/L	1	10/01/03 21:14	r19214-B
Fluoride	0.091		0.010	0.050	mg/L	1	10/01/03 21:14	r19214-B
Nitrogen, Nitrate	0.16		0.012	0.050	mg/L	1	10/01/03 21:14	r19214-B
Nitrogen, Nitrite	0.0056	U	0.0056	0.050	mg/L	1	10/01/03 21:14	r19214-B
Nitrogen, Nitrate-Nitrite	0.16		0.012	0.050	mg/L	1	10/01/03 21:14	r19214-B
Sulfate	0.65		0.058	0.50	mg/L	1	10/01/03 21:14	r19214-B
COLOR		**SM2120 B**	PrepDate:				Analyst: **MMA**	
Color	5.0	U	5.0	5.0	Color Units	1	10/01/03 16:45	R19208
CYANIDE, TOTAL		**E335.4**	PrepDate:	**10/6/03 11:00:00 AM**			Analyst: **SST**	
Cyanide	0.0053	I	0.0030	0.010	mg/L	1	10/07/03 12:53	14357
ODOR		**SM2150B**	PrepDate:				Analyst: **MMA**	
Odor	2.0		1.0	1.0	t.o.n.	1	10/01/03 16:45	R19203
PH		**E150.1**	PrepDate:				Analyst: **MMA**	
pH	7.72		0		pH units	1	10/01/03 16:34	R19205
SOLIDS, TOTAL DISSOLVED		**SM2540 C**	PrepDate:	**10/2/03**			Analyst: **MMA**	
Solids, Total Dissolved	230		1.2	5.0	mg/L	1	10/07/03	14296
SURFACTANTS (MBAS AS LAS, MOL.WT.)		**E425.1**	PrepDate:	**10/2/03 3:00:00 PM**			Analyst: **ACO**	
MBAS	0.050	I	0.027	0.10	mg/L	1	10/02/03 16:47	14295
ANTIMONY BY GFAA		**SM3113 B**	PrepDate:				Analyst: **TPE**	
Antimony	0.00035	U	0.00035	0.0030	mg/L	1	10/06/03	R19307
ICP METALS		**E200.7**	PrepDate:				Analyst: **JCO**	
Aluminum	0.025	I	0.012	0.10	mg/L	1	10/08/03 13:59	R19471-A
Arsenic	0.0020	U	0.0020	0.010	mg/L	1	10/08/03 13:59	R19471-A
Barium	0.0038	I	0.000074	0.010	mg/L	1	10/08/03 13:59	R19471-A
Beryllium	0.00012	U	0.00012	0.0010	mg/L	1	10/08/03 13:59	R19471-A
Cadmium	0.00024	U	0.00024	0.0010	mg/L	1	10/08/03 13:59	R19471-A
Chromium	0.00060	U	0.00060	0.0050	mg/L	1	10/08/03 13:59	R19471-A
Copper	0.0017	I	0.00058	0.0050	mg/L	1	10/08/03 13:59	R19471-A
Iron	0.029	I	0.013	0.040	mg/L	1	10/08/03 13:59	R19471-A
Manganese	0.00053	I	0.00038	0.0050	mg/L	1	10/08/03 13:59	R19471-A
Nickel	0.0020	U	0.0020	0.0050	mg/L	1	10/08/03 13:59	R19471-A
Silver	0.0014	U	0.0014	0.0050	mg/L	1	10/08/03 13:59	R19471-A

Data Qualifier Code Key: I Analyte detected below quantitation limits U Not Detected at the Reporting Limit

ELAB, Inc. 8 East Tower Cr., Ormond Beach, FL 32174-8759

Date: *22-Oct-03*

Analytical Report

CLIENT: Plantation Bay Utility Co., Inc.
Lab Order: F03100040
Project: Plantation Bay
Lab ID: F03100040-001

Client Sample ID: 1 Entry to Dist.
Collection Date: 10/1/03 10:15:00 AM
Sample Description:
Matrix: Drinking Water

Analyses	Result	Qual	MDL	Limit	Units	DF	Date Analyzed	Batch ID
ICP METALS		**E200.7**	PrepDate:				Analyst: **JCO**	
Sodium	22		0.23	0.50	mg/L	1	10/10/03 12:10	R19478-A
Zinc	0.0043	I	0.0023	0.020	mg/L	1	10/08/03 13:59	R19471-A
LEAD BY GFAA		**SM3113 B**	PrepDate:				Analyst: **TPE**	
Lead	0.00050	U	0.00050	0.0010	mg/L	1	10/10/03	R19492
MERCURY		**E245.1**	PrepDate: **10/2/03 12:16:00 PM**				Analyst: **TPE**	
Mercury	0.000036	U	0.000036	0.00010	mg/L	1	10/02/03	14284
SELENIUM BY GFAA		**SM3113 B**	PrepDate:				Analyst: **TPE**	
Selenium	0.00079	U	0.00079	0.0020	mg/L	1	10/13/03	R19545
THALLIUM BY GFAA		**E200.9**	PrepDate:				Analyst: **TPE**	
Thallium	0.00025	U	0.00025	0.0010	mg/L	1	10/07/03	R19351
504: EDB/DBCP		**E504.1**	PrepDate: **10/7/03 3:30:00 PM**				Analyst: **EM**	
1,2-Dibromo-3-chloropropane	0.0041	U	0.0041	0.020	µg/L	1	10/08/03	14383
1,2-Dibromoethane	0.0038	U	0.0038	0.010	µg/L	1	10/08/03	14383
Surr: Bromofluorobenzene	101		0		%REC	1	10/08/03	14383
508: PESTS/PCB'S, ORGANOCHLORINE		**E508.1**	PrepDate: **10/3/03 10:30:00 AM**				Analyst: **DVA**	
Alachlor	0.023	U	0.023	0.10	µg/L	1	10/07/03	14307
Atrazine	0.13	U	0.13	0.30	µg/L	1	10/07/03	14307
gamma-BHC	0.0060	U	0.0060	0.010	µg/L	1	10/07/03	14307
Chlordane	0.080	U	0.080	0.10	µg/L	1	10/07/03	14307
Endrin	0.0080	U	0.0080	0.010	µg/L	1	10/07/03	14307
Heptachlor	0.0080	U	0.0080	0.030	µg/L	1	10/07/03	14307
Heptachlor epoxide	0.0060	U	0.0060	0.010	µg/L	1	10/07/03	14307
Hexachlorobenzene	0.0080	U	0.0080	0.10	µg/L	1	10/07/03	14307
Hexachlorocyclopentadiene	0.018	U	0.018	0.10	µg/L	1	10/07/03	14307
Methoxychlor	0.0090	U	0.0090	0.050	µg/L	1	10/07/03	14307
Simazine	0.24	U	0.24	1.5	µg/L	1	10/07/03	14307
Toxaphene	0.10	U	0.10	0.18	µg/L	1	10/07/03	14307
PCB 1016	0.10	U	0.10	0.10	µg/L	1	10/07/03	14307
PCB 1221	0.10	U	0.10	0.10	µg/L	1	10/07/03	14307
PCB 1232	0.080	U	0.080	0.10	µg/L	1	10/07/03	14307
PCB 1242	0.090	U	0.090	0.10	µg/L	1	10/07/03	14307
PCB 1248	0.10	U	0.10	0.10	µg/L	1	10/07/03	14307
PCB 1254	0.060	U	0.060	0.10	µg/L	1	10/07/03	14307

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Analytical Report

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Lab Order: F03100040
Project: Plantation Bay
Lab ID: F03100040-001

Client Sample ID: 1 Entry to Dist.
Collection Date: 10/1/03 10:15:00 AM
Sample Description:
Matrix: Drinking Water

Analyses	Result	Qual	MDL	Limit	Units	DF	Date Analyzed	Batch ID
508: PESTS/PCB'S, ORGANOCHLORINE		**E508.1**	PrepDate: **10/3/03 10:30:00 AM**				Analyst: **DVA**	
PCB 1260	0.090	U	0.090	0.10	µg/L	1	10/07/03	14307
Total PCBs	0.10	U	0.10	0.10	µg/L	1	10/07/03	14307
Surr: 4,4´-Dichlorobiphenyl	98.4		0		%REC	1	10/07/03	14307
515.1: CHLORINATED HERBICIDES		**E515.1**	PrepDate: **10/8/03 5:00:00 PM**				Analyst: **EM**	
2,4-D	0.060	U	0.060	0.10	µg/L	1	10/10/03	14355
Dalapon	0.14	U	0.14	1.0	µg/L	1	10/10/03	14355
Dinoseb	0.090	U	0.090	0.20	µg/L	1	10/10/03	14355
Pentachlorophenol	0.030	U	0.030	0.040	µg/L	1	10/10/03	14355
Picloram	0.090	U	0.090	0.10	µg/L	1	10/10/03	14355
2,4,5-TP (Silvex)	0.030	U	0.030	0.20	µg/L	1	10/10/03	14355
Surr: DCAA	96.8		0		%REC	1	10/10/03	14355
524.2: VOLATILE ORGANIC COMPOUNDS		**E524.2**	PrepDate: **10/10/03**				Analyst: **LGO**	
Benzene	0.12	U	0.12	0.50	µg/L	1	10/10/03	14528
Carbon tetrachloride	0.12	U	0.12	0.50	µg/L	1	10/10/03	14528
o-Dichlorobenzene	0.070	U	0.070	0.50	µg/L	1	10/10/03	14528
p-Dichlorobenzene	0.070	U	0.070	0.50	µg/L	1	10/10/03	14528
1,2-Dichloroethane	0.13	U	0.13	0.50	µg/L	1	10/10/03	14528
1,1-Dichloroethene	0.22	U	0.22	0.50	µg/L	1	10/10/03	14528
cis-1,2-Dichloroethene	0.11	U	0.11	0.50	µg/L	1	10/10/03	14528
trans-1,2-Dichloroethene	0.13	U	0.13	0.50	µg/L	1	10/10/03	14528
Dichloromethane	0.27	U	0.27	0.50	µg/L	1	10/10/03	14528
1,2-Dichloropropane	0.090	U	0.090	0.50	µg/L	1	10/10/03	14528
Ethylbenzene	0.30	U	0.30	0.50	µg/L	1	10/10/03	14528
Monochlorobenzene	0.080	U	0.080	0.50	µg/L	1	10/10/03	14528
Styrene	0.080	U	0.080	0.50	µg/L	1	10/10/03	14528
Tetrachloroethene	0.090	U	0.090	0.50	µg/L	1	10/10/03	14528
Toluene	0.060	U	0.060	0.50	µg/L	1	10/10/03	14528
1,2,4-Trichlorobenzene	0.10	U	0.10	0.50	µg/L	1	10/10/03	14528
1,1,1-Trichloroethane	0.080	U	0.080	0.50	µg/L	1	10/10/03	14528
1,1,2-Trichloroethane	0.080	U	0.080	0.50	µg/L	1	10/10/03	14528
Trichloroethene	0.14	U	0.14	0.50	µg/L	1	10/10/03	14528
Vinyl chloride	0.17	U	0.17	0.50	µg/L	1	10/10/03	14528
Xylenes, Total	0.13	U	0.13	0.50	µg/L	1	10/10/03	14528
Surr: 4-Bromofluorobenzene	101		0		%REC	1	10/10/03	14528
Surr: Dibromofluoromethane	98.2		0		%REC	1	10/10/03	14528

Data Qualifier Code Key: I Analyte detected below quantitation limits U Not Detected at the Reporting Limit

Analytical Report

CLIENT: Plantation Bay Utility Co., Inc.
Lab Order: F03100040
Project: Plantation Bay
Lab ID: F03100040-001

Client Sample ID: 1 Entry to Dist.
Collection Date: 10/1/03 10:15:00 AM
Sample Description:
Matrix: Drinking Water

Analyses	Result	Qual	MDL	Limit	Units	DF	Date Analyzed	Batch ID
524.2: VOLATILE ORGANIC COMPOUNDS		**E524.2**	PrepDate:	**10/10/03**			Analyst: **LGO**	
Surr: 1,2-Dichloroethane-d4	99.7		0		%REC	1	10/10/03	14528
Surr: Toluene-d8	100		0		%REC	1	10/10/03	14528
525.2: BASE NEUTRAL EXTRACTABLES		**E525.2**	PrepDate:	**10/1/03 1:00:00 PM**			Analyst: **JAS**	
Benzo(a)pyrene	0.078	U	0.078	0.10	µg/L	1	10/07/03 10:12	14218
Di(2-ethylhexyl)adipate	0.23	U	0.23	1.6	µg/L	1	10/07/03 10:12	14218
Di(2-ethylhexyl)phthalate	0.50	I	0.50	2.0	µg/L	1	10/07/03 10:12	14218
Surr: 1,3-Dimethyl-2-nitrobenzene	106		0		%REC	1	10/07/03 10:12	14218
Surr: Perylene-d12	77.0		0		%REC	1	10/07/03 10:12	14218
Surr: Triphenylphosphate	105		0		%REC	1	10/07/03 10:12	14218
531.1: CARBAMATES		**E531.1**	PrepDate:	**10/9/03 2:00:00 PM**			Analyst: **LB**	
Carbofuran	2.0	U	2.0	2.0	µg/L	1	10/09/03	R19516
Oxamyl	0.86	U	0.86	2.0	µg/L	1	10/09/03	R19516
Surr: Propoxur	118		0		%REC	1	10/09/03	R19516
547: GLYPHOSATE		**E547**	PrepDate:	**10/2/03**			Analyst: **LB**	
Glyphosate	2.9	U	2.9	6.0	µg/L	1	10/02/03	R19290
548: ENDOTHALL		**E548.1**	PrepDate:	**10/2/03 8:20:00 AM**			Analyst: **TKA**	
Endothall	3.3	U	3.3	9.0	µg/L	1	10/04/03 01:58	14267
549: DIQUAT/PARAQUAT BY HPLC		**E549.2**	PrepDate:	**10/2/03 1:40:00 PM**			Analyst: **LB**	
Diquat	0.36	U	0.36	0.40	µg/L	1	10/08/03	14262
GROSS ALPHA (SUBCONTRACT)		**E900.0**	PrepDate:	**10/14/03**			Analyst: **SUB**	
Alpha, Gross	<0.50+/-0.4		0.50	0.50	pci/L	1	10/15/03	R19703

Data Qualifier Code Key: I Analyte detected below quantitation limits U Not Detected at the Reporting Limit

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 504_W

Sample ID **MB-14383**	SampType: **MBLK**	TestCode: **504_W**	Units: **µg/L**	Prep Date: **10/7/2003**	RunNo: **19392**
Client ID:	Batch ID: **14383**	TestNo: **E504.1**		Analysis Date: **10/8/2003**	SeqNo: **364934**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
1,2-Dibromo-3-chloropropane	ND	0.020									
1,2-Dibromoethane	ND	0.010									
Surr: Bromofluorobenzene	14.88	0	14.3	0	104	70	130	0	0		

Sample ID **LCS-14383**	SampType: **LCS**	TestCode: **504_W**	Units: **µg/L**	Prep Date: **10/7/2003**	RunNo: **19392**
Client ID:	Batch ID: **14383**	TestNo: **E504.1**		Analysis Date: **10/8/2003**	SeqNo: **364935**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
1,2-Dibromo-3-chloropropane	0.2150	0.020	0.25	0	86	60	140	0	0		
1,2-Dibromoethane	0.2580	0.010	0.25	0	103	60	140	0	0		
Surr: Bromofluorobenzene	14.30	0	14.3	0	100	70	130	0	0		

Sample ID **LCSD-14383**	SampType: **LCSD**	TestCode: **504_W**	Units: **µg/L**	Prep Date: **10/7/2003**	RunNo: **19392**
Client ID:	Batch ID: **14383**	TestNo: **E504.1**		Analysis Date: **10/8/2003**	SeqNo: **364946**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
1,2-Dibromo-3-chloropropane	0.2298	0.020	0.25	0	91.9	60	140	0.215	6.67	40	
1,2-Dibromoethane	0.2748	0.010	0.25	0	110	60	140	0.258	6.30	40	
Surr: Bromofluorobenzene	14.19	0	14.3	0	99.2	70	130	14.3	0	0	

Sample ID **F03090824-001EMS**	SampType: **MS**	TestCode: **504_W**	Units: **µg/L**	Prep Date: **10/7/2003**	RunNo: **19392**
Client ID:	Batch ID: **14383**	TestNo: **E504.1**		Analysis Date: **10/8/2003**	SeqNo: **364937**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
1,2-Dibromo-3-chloropropane	0.2380	0.020	0.25	0	95.2	60	140	0	0		
1,2-Dibromoethane	0.2940	0.010	0.25	0	118	60	140	0	0		

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 504_W

Sample ID F03090824-001EMS	SampType: MS	TestCode: 504_W	Units: µg/L	Prep Date: 10/7/2003	RunNo: 19392
Client ID:	Batch ID: 14383	TestNo: E504.1		Analysis Date: 10/8/2003	SeqNo: 364937

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Surr: Bromofluorobenzene	13.90	0	14.3	0	97.2	70	130	0	0		

Sample ID F03090824-001EMS	SampType: MSD	TestCode: 504_W	Units: µg/L	Prep Date: 10/7/2003	RunNo: 19392
Client ID:	Batch ID: 14383	TestNo: E504.1		Analysis Date: 10/8/2003	SeqNo: 364938

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
1,2-Dibromo-3-chloropropane	0.2410	0.020	0.25	0	96.4	60	140	0.238	1.25	40	
1,2-Dibromoethane	0.2920	0.010	0.25	0	117	60	140	0.294	0.683	40	
Surr: Bromofluorobenzene	13.60	0	14.3	0	95.1	70	130	13.9	0	0	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 508.1_W

Sample ID **MB-14307**	SampType: **MBLK**	TestCode: **508.1_W**	Units: **µg/L**	Prep Date: **10/3/2003**	RunNo: **19350**
Client ID:	Batch ID: **14307**	TestNo: **E508.1**		Analysis Date: **10/6/2003**	SeqNo: **363992**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Alachlor	ND	0.10									
Atrazine	ND	0.30									
gamma-BHC	ND	0.010									
Chlordane	ND	0.10									
Endrin	ND	0.010									
Heptachlor	ND	0.030									
Heptachlor epoxide	ND	0.010									
Hexachlorobenzene	ND	0.10									
Hexachlorocyclopentadiene	ND	0.10									
Methoxychlor	ND	0.050									
Simazine	ND	1.5									
Toxaphene	ND	0.18									
PCB 1016	ND	0.10									
PCB 1221	ND	0.10									
PCB 1232	ND	0.10									
PCB 1242	ND	0.10									
PCB 1248	ND	0.10									
PCB 1254	ND	0.10									
PCB 1260	ND	0.10									
Total PCBs	ND	0.10									
Surr: 4,4´-Dichlorobiphenyl	0.5190	0	0.5	0	104	70	130	0	0		

Sample ID **LCS-14307**	SampType: **LCS**	TestCode: **508.1_W**	Units: **µg/L**	Prep Date: **10/3/2003**	RunNo: **19350**
Client ID:	Batch ID: **14307**	TestNo: **E508.1**		Analysis Date: **10/6/2003**	SeqNo: **363993**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Alachlor	0.5960	0.10	0.5	0	119	70	130	0	0		
Atrazine	5.140	0.30	5	0	103	70	130	0	0		

Qualifiers:

- E Value above quantitation range
- H Holding times for preparation or analysis exceeded
- J Analyte detected below quantitation limits
- ND Not Detected at the Reporting Limit
- R RPD outside accepted recovery limits
- S Spike Recovery outside accepted recovery limits
- U Not Detected at the Reporting Limit

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 508.1_W

Sample ID **LCS-14307**	SampType: **LCS**	TestCode: **508.1_W**	Units: **µg/L**	Prep Date: **10/3/2003**	RunNo: **19350**
Client ID:	Batch ID: **14307**	TestNo: **E508.1**		Analysis Date: **10/6/2003**	SeqNo: **363993**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
gamma-BHC	0.4910	0.010	0.5	0	98.2	70	130	0	0		
Endrin	0.5110	0.010	0.5	0	102	70	130	0	0		
Heptachlor	0.4550	0.030	0.5	0	91	70	130	0	0		
Heptachlor epoxide	0.5280	0.010	0.5	0	106	70	130	0	0		
Hexachlorobenzene	0.4850	0.10	0.5	0	97	70	130	0	0		
Hexachlorocyclopentadiene	0.5180	0.10	0.5	0	104	70	130	0	0		
Methoxychlor	0.6070	0.050	0.5	0	121	70	130	0	0		
Simazine	5.020	1.5	5	0	100	70	130	0	0		
Surr: 4,4´-Dichlorobiphenyl	0.4960	0	0.5	0	99.2	70	130	0	0		

Sample ID **LCSD-14307**	SampType: **LCSD**	TestCode: **508.1_W**	Units: **µg/L**	Prep Date: **10/3/2003**	RunNo: **19350**
Client ID:	Batch ID: **14307**	TestNo: **E508.1**		Analysis Date: **10/6/2003**	SeqNo: **364014**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Alachlor	0.5710	0.10	0.5	0	114	70	130	0.596	4.28	40	
Atrazine	5.080	0.30	5	0	102	70	130	5.14	1.17	40	
gamma-BHC	0.4960	0.010	0.5	0	99.2	70	130	0.491	1.01	40	
Endrin	0.4930	0.010	0.5	0	98.6	70	130	0.511	3.59	40	
Heptachlor	0.5150	0.030	0.5	0	103	70	130	0.455	12.4	40	
Heptachlor epoxide	0.5140	0.010	0.5	0	103	70	130	0.528	2.69	40	
Hexachlorobenzene	0.4480	0.10	0.5	0	89.6	70	130	0.485	7.93	40	
Hexachlorocyclopentadiene	0.5500	0.10	0.5	0	110	70	130	0.518	5.99	0	
Methoxychlor	0.6060	0.050	0.5	0	121	70	130	0.607	0.165	40	
Simazine	5.600	1.5	5	0	112	70	130	5.02	10.9	40	
Surr: 4,4´-Dichlorobiphenyl	0.5000	0	0.5	0	100	70	130	0.496	0	0	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 515.1_W

Sample ID **MB-14311**	SampType: **MBLK**	TestCode: **515.1_W**	Units: **µg/L**	Prep Date: **10/3/2003**	RunNo: **19384**
Client ID:	Batch ID: **14311**	TestNo: **E515.1**		Analysis Date: **10/7/2003**	SeqNo: **364725**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
2,4-D	ND	0.10									
Dalapon	ND	1.0									
Dinoseb	ND	0.20									
Pentachlorophenol	ND	0.040									
Picloram	ND	0.10									
2,4,5-TP (Silvex)	ND	0.20									
Surr: DCAA	7.266	0	10	0	72.7	70	130	0	0		

Sample ID **MB-14355**	SampType: **MBLK**	TestCode: **515.1_W**	Units: **µg/L**	Prep Date: **10/8/2003**	RunNo: **19588**
Client ID:	Batch ID: **14355**	TestNo: **E515.1**		Analysis Date: **10/10/2003**	SeqNo: **369228**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
2,4-D	ND	0.10									
Dalapon	ND	1.0									
Dinoseb	ND	0.20									
Pentachlorophenol	ND	0.040									
Picloram	ND	0.10									
2,4,5-TP (Silvex)	ND	0.20									
Surr: DCAA	9.030	0	10	0	90.3	70	130	0	0		

Sample ID **LCS-14311**	SampType: **LCS**	TestCode: **515.1_W**	Units: **µg/L**	Prep Date: **10/3/2003**	RunNo: **19384**
Client ID:	Batch ID: **14311**	TestNo: **E515.1**		Analysis Date: **10/7/2003**	SeqNo: **364726**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
2,4-D	9.180	0.10	10	0	91.8	70	130	0	0		
Dalapon	21.77	1.0	25	0	87.1	70	130	0	0		
Dinoseb	3.080	0.20	5	0	61.6	20	108	0	0		
Pentachlorophenol	0.2850	0.040	0.3	0	95	70	130	0	0		

Qualifiers:
E Value above quantitation range
H Holding times for preparation or analysis exceeded
J Analyte detected below quantitation limits
ND Not Detected at the Reporting Limit
R RPD outside accepted recovery limits
S Spike Recovery outside accepted recovery limits
U Not Detected at the Reporting Limit

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 515.1_W

Sample ID LCS-14311	SampType: LCS	TestCode: 515.1_W	Units: µg/L	Prep Date: 10/3/2003	RunNo: 19384
Client ID:	Batch ID: 14311	TestNo: E515.1		Analysis Date: 10/7/2003	SeqNo: 364726

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Picloram	0.7000	0.10	2	0	35	10	150	0	0		
2,4,5-TP (Silvex)	1.010	0.20	1	0	101	70	130	0	0		
Surr: DCAA	8.590	0	10	0	85.9	70	130	0	0		

Sample ID LCS-14355	SampType: LCS	TestCode: 515.1_W	Units: µg/L	Prep Date: 10/8/2003	RunNo: 19588
Client ID:	Batch ID: 14355	TestNo: E515.1		Analysis Date: 10/10/2003	SeqNo: 369229

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
2,4-D	7.640	0.10	10	0	76.4	70	130	0	0		
Dalapon	18.60	1.0	25	0	74.4	70	130	0	0		
Dinoseb	3.360	0.20	5	0	67.2	20	108	0	0		
Pentachlorophenol	0.3240	0.040	0.3	0	108	70	130	0	0		
Picloram	0.4850	0.10	2	0	24.2	10	150	0	0		
2,4,5-TP (Silvex)	0.8800	0.20	1	0	88	70	130	0	0		
Surr: DCAA	9.030	0	10	0	90.3	70	130	0	0		

Sample ID F03100079-001CMS	SampType: MS	TestCode: 515.1_W	Units: µg/L	Prep Date: 10/3/2003	RunNo: 19384
Client ID:	Batch ID: 14311	TestNo: E515.1		Analysis Date: 10/7/2003	SeqNo: 364734

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
2,4-D	8.950	0.10	10	0	89.5	70	130	0	0		
Dalapon	22.37	1.0	25	0	89.5	70	130	0	0		
Dinoseb	2.970	0.20	5	0	59.4	20	108	0	0		
Pentachlorophenol	0.2750	0.040	0.3	0	91.7	70	130	0	0		
Picloram	0.6730	0.10	2	0	33.6	10	150	0	0		
2,4,5-TP (Silvex)	1.050	0.20	1	0	105	70	130	0	0		
Surr: DCAA	8.820	0	10	0	88.2	70	130	0	0		

Qualifiers:

- E Value above quantitation range
- H Holding times for preparation or analysis exceeded
- J Analyte detected below quantitation limits
- ND Not Detected at the Reporting Limit
- R RPD outside accepted recovery limits
- S Spike Recovery outside accepted recovery limits
- U Not Detected at the Reporting Limit

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 515.1_W

Sample ID F03100140-001HMS	SampType: MS	TestCode: 515.1_W	Units: µg/L	Prep Date: 10/8/2003	RunNo: 19588
Client ID:	Batch ID: 14355	TestNo: E515.1		Analysis Date: 10/10/2003	SeqNo: 369236

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
2,4-D	7.230	0.10	10	0	72.3	70	130	0	0		
Dalapon	21.40	1.0	25	0	85.6	70	130	0	0		
Dinoseb	3.960	0.20	5	0	79.2	20	108	0	0		
Pentachlorophenol	0.3250	0.040	0.3	0	108	70	130	0	0		
Picloram	0.2180	0.10	2	0	10.9	10	150	0	0		
2,4,5-TP (Silvex)	0.8680	0.20	1	0	86.8	70	130	0	0		
Surr: DCAA	9.100	0	10	0	91	70	130	0	0		

Sample ID F03100079-001CMS	SampType: MSD	TestCode: 515.1_W	Units: µg/L	Prep Date: 10/3/2003	RunNo: 19384
Client ID:	Batch ID: 14311	TestNo: E515.1		Analysis Date: 10/7/2003	SeqNo: 364735

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
2,4-D	9.170	0.10	10	0	91.7	70	130	8.95	2.43	40	
Dalapon	26.86	1.0	25	0	107	70	130	22.37	18.2	40	
Dinoseb	3.200	0.20	5	0	64	20	108	2.97	7.46	40	
Pentachlorophenol	0.2650	0.040	0.3	0	88.3	70	130	0.275	3.70	40	
Picloram	0.5880	0.10	2	0	29.4	10	150	0.673	13.5	40	
2,4,5-TP (Silvex)	1.010	0.20	1	0	101	70	130	1.05	3.88	40	
Surr: DCAA	8.500	0	10	0	85	70	130	8.82	0	40	

Sample ID F03100140-001HMS	SampType: MSD	TestCode: 515.1_W	Units: µg/L	Prep Date: 10/8/2003	RunNo: 19588
Client ID:	Batch ID: 14355	TestNo: E515.1		Analysis Date: 10/10/2003	SeqNo: 369237

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
2,4-D	7.640	0.10	10	0	76.4	70	130	7.23	5.51	40	
Dalapon	27.30	1.0	25	0	109	70	130	21.4	24.2	40	
Dinoseb	3.960	0.20	5	0	79.2	20	108	3.96	0	40	
Pentachlorophenol	0.3660	0.040	0.3	0	122	70	130	0.325	11.9	40	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 515.1_W

Sample ID **F03100140-001HMS**	SampType: **MSD**	TestCode: **515.1_W**	Units: **µg/L**	Prep Date: **10/8/2003**	RunNo: **19588**
Client ID:	Batch ID: **14355**	TestNo: **E515.1**		Analysis Date: **10/10/2003**	SeqNo: **369237**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Picloram	0.1600	0.10	2	0	8	10	150	0.218	30.7	40	S
2,4,5-TP (Silvex)	0.8930	0.20	1	0	89.3	70	130	0.868	2.84	40	
Surr: DCAA	9.320	0	10	0	93.2	70	130	9.1	0	40	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 524_W

Sample ID **MB-14528**	SampType: **MBLK**	TestCode: **524_W**	Units: **µg/L**	Prep Date: **10/10/2003**	RunNo: **19547**
Client ID:	Batch ID: **14528**	TestNo: **E524.2**		Analysis Date: **10/10/2003**	SeqNo: **367943**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Benzene	ND	0.50									
Carbon tetrachloride	ND	0.50									
o-Dichlorobenzene	ND	0.50									
p-Dichlorobenzene	ND	0.50									
1,2-Dichloroethane	ND	0.50									
1,1-Dichloroethene	ND	0.50									
cis-1,2-Dichloroethene	ND	0.50									
trans-1,2-Dichloroethene	ND	0.50									
Dichloromethane	ND	0.50									
1,2-Dichloropropane	ND	0.50									
Ethylbenzene	ND	0.50									
Monochlorobenzene	ND	0.50									
Styrene	ND	0.50									
Tetrachloroethene	ND	0.50									
Toluene	ND	0.50									
1,2,4-Trichlorobenzene	ND	0.50									
1,1,1-Trichloroethane	ND	0.50									
1,1,2-Trichloroethane	ND	0.50									
Trichloroethene	ND	0.50									
Vinyl chloride	ND	0.50									
Xylenes, Total	ND	0.50									
Surr: 4-Bromofluorobenzene	39.96	0	40	0	99.9	70	130	0	0		
Surr: Dibromofluoromethane	40.48	0	40	0	101	70	130	0	0		
Surr: 1,2-Dichloroethane-d4	39.78	0	40	0	99.4	70	130	0	0		
Surr: Toluene-d8	40.73	0	40	0	102	70	130	0	0		

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 524_W

Sample ID LCS-14528	SampType: LCS	TestCode: 524_W	Units: µg/L	Prep Date: 10/10/2003	RunNo: 19547
Client ID:	Batch ID: 14528	TestNo: E524.2		Analysis Date: 10/10/2003	SeqNo: 367944

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Benzene	19.39	0.50	20	0	97	70	130	0	0		
1,1-Dichloroethene	19.90	0.50	20	0	99.5	70	130	0	0		
Monochlorobenzene	20.57	0.50	20	0	103	70	130	0	0		
Toluene	19.37	0.50	20	0	96.8	70	130	0	0		
Trichloroethene	20.67	0.50	20	0	103	70	130	0	0		
Surr: 4-Bromofluorobenzene	40.19	0	40	0	100	70	130	0	0		
Surr: Dibromofluoromethane	40.14	0	40	0	100	70	130	0	0		
Surr: 1,2-Dichloroethane-d4	40.10	0	40	0	100	70	130	0	0		
Surr: Toluene-d8	40.88	0	40	0	102	70	130	0	0		

Sample ID F03100105-001EMS	SampType: MS	TestCode: 524_W	Units: µg/L	Prep Date: 10/10/2003	RunNo: 19547
Client ID:	Batch ID: 14528	TestNo: E524.2		Analysis Date: 10/10/2003	SeqNo: 367958

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Benzene	20.79	0.50	20	0	104	70	130	0	0		
1,1-Dichloroethene	20.65	0.50	20	0	103	70	130	0	0		
Monochlorobenzene	21.28	0.50	20	0	106	70	130	0	0		
Toluene	20.44	0.50	20	0	102	70	130	0	0		
Trichloroethene	21.55	0.50	20	0	108	70	130	0	0		
Surr: 4-Bromofluorobenzene	39.51	0	40	0	98.8	70	130	0	0		
Surr: Dibromofluoromethane	39.78	0	40	0	99.4	70	130	0	0		
Surr: 1,2-Dichloroethane-d4	40.26	0	40	0	101	70	130	0	0		
Surr: Toluene-d8	40.30	0	40	0	101	70	130	0	0		

Sample ID F03100105-001EMS	SampType: MSD	TestCode: 524_W	Units: µg/L	Prep Date: 10/10/2003	RunNo: 19547
Client ID:	Batch ID: 14528	TestNo: E524.2		Analysis Date: 10/10/2003	SeqNo: 367959

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual

Qualifiers:

- E Value above quantitation range
- ND Not Detected at the Reporting Limit
- U Not Detected at the Reporting Limit
- H Holding times for preparation or analysis exceeded
- R RPD outside accepted recovery limits
- J Analyte detected below quantitation limits
- S Spike Recovery outside accepted recovery limits

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 524_W

Sample ID **F03100105-001EMS**	SampType: **MSD**	TestCode: **524_W**	Units: **µg/L**	Prep Date: **10/10/2003**	RunNo: **19547**
Client ID:	Batch ID: **14528**	TestNo: **E524.2**		Analysis Date: **10/10/2003**	SeqNo: **367959**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Benzene	20.26	0.50	20	0	101	70	130	20.79	2.58	40	
1,1-Dichloroethene	20.11	0.50	20	0	101	70	130	20.65	2.65	40	
Monochlorobenzene	21.11	0.50	20	0	106	70	130	21.28	0.802	40	
Toluene	20.49	0.50	20	0	102	70	130	20.44	0.244	40	
Trichloroethene	20.80	0.50	20	0	104	70	130	21.55	3.54	40	
Surr: 4-Bromofluorobenzene	38.73	0	40	0	96.8	70	130	39.51	0	0	
Surr: Dibromofluoromethane	40.36	0	40	0	101	70	130	39.78	0	0	
Surr: 1,2-Dichloroethane-d4	40.14	0	40	0	100	70	130	40.26	0	0	
Surr: Toluene-d8	40.75	0	40	0	102	70	130	40.3	0	0	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 525_W

Sample ID **MB-14218**	SampType: **MBLK**	TestCode: **525_W**	Units: **µg/L**	Prep Date: **9/30/2003**	RunNo: **19268**
Client ID:	Batch ID: **14218**	TestNo: **E525.2**		Analysis Date: **10/1/2003**	SeqNo: **362697**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Benzo(a)pyrene	ND	0.10									
Di(2-ethylhexyl)adipate	ND	1.6									
Di(2-ethylhexyl)phthalate	ND	2.0									
Surr: 1,3-Dimethyl-2-nitrobenzene	5.080	0	5	0	102	70	130	0	0		
Surr: Perylene-d12	4.790	0	5	0	95.8	70	130	0	0		
Surr: Triphenylphosphate	5.240	0	5	0	105	70	130	0	0		

Sample ID **MB-14218-2**	SampType: **MBLK**	TestCode: **525_W**	Units: **µg/L**	Prep Date: **10/1/2003**	RunNo: **19268**
Client ID:	Batch ID: **14218**	TestNo: **E525.2**		Analysis Date: **10/7/2003**	SeqNo: **364636**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Benzo(a)pyrene	ND	0.10	0	0	0	0	0	0	0		
Di(2-ethylhexyl)adipate	ND	1.6	0	0	0	0	0	0	0		
Di(2-ethylhexyl)phthalate	ND	2.0	0	0	0	0	0	0	0		
Surr: 1,3-Dimethyl-2-nitrobenzene	5.370	0	5	0	107	70	130	0	0		
Surr: Perylene-d12	5.200	0	5	0	104	70	130	0	0		
Surr: Triphenylphosphate	5.710	0	5	0	114	70	130	0	0		

Sample ID **LCS-14218**	SampType: **LCS**	TestCode: **525_W**	Units: **µg/L**	Prep Date: **9/30/2003**	RunNo: **19268**
Client ID:	Batch ID: **14218**	TestNo: **E525.2**		Analysis Date: **10/1/2003**	SeqNo: **362698**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Benzo(a)pyrene	5.390	0.10	5	0	108	70	130	0	0		
Di(2-ethylhexyl)adipate	5.020	1.6	5	0	100	70	130	0	0		
Di(2-ethylhexyl)phthalate	5.040	2.0	5	0	101	70	130	0	0		
Surr: 1,3-Dimethyl-2-nitrobenzene	5.370	0	5	0	107	70	130	0	0		
Surr: Perylene-d12	5.280	0	5	0	106	70	130	0	0		
Surr: Triphenylphosphate	5.250	0	5	0	105	70	130	0	0		

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 525_W

Sample ID **LCSD-14218**	SampType: **LCSD**	TestCode: **525_W**	Units: **µg/L**	Prep Date: **9/30/2003**	RunNo: **19268**
Client ID:	Batch ID: **14218**	TestNo: **E525.2**		Analysis Date: **10/1/2003**	SeqNo: **362699**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Benzo(a)pyrene	4.840	0.10	5	0	96.8	70	130	5.39	10.8	40	
Di(2-ethylhexyl)adipate	4.860	1.6	5	0	97.2	70	130	5.02	3.24	40	
Di(2-ethylhexyl)phthalate	4.840	2.0	5	0	96.8	70	130	5.04	4.05	40	
Surr: 1,3-Dimethyl-2-nitrobenzene	5.060	0	5	0	101	70	130	5.37	0	0	
Surr: Perylene-d12	4.930	0	5	0	98.6	70	130	5.28	0	0	
Surr: Triphenylphosphate	5.390	0	5	0	108	70	130	5.25	0	0	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 531_W

Sample ID MB-R19516	SampType: MBLK	TestCode: 531_W	Units: µg/L	Prep Date: 10/9/2003	RunNo: 19516
Client ID:	Batch ID: R19516	TestNo: E531.1		Analysis Date: 10/9/2003	SeqNo: 367384

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Carbofuran	ND	2.0									
Oxamyl	ND	2.0									
Surr: Propoxur	21.00	0	20	0	105	80	120	0	0		

Sample ID LCS-R19516	SampType: LCS	TestCode: 531_W	Units: µg/L	Prep Date: 10/9/2003	RunNo: 19516
Client ID:	Batch ID: R19516	TestNo: E531.1		Analysis Date: 10/10/2003	SeqNo: 367385

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Carbofuran	10.30	2.0	10	0	103	80	120	0	0		
Oxamyl	10.30	2.0	10	0	103	80	120	0	0		
Surr: Propoxur	10.60	0	10	0	106	80	120	0	0		

Sample ID F03100008-001AMS	SampType: MS	TestCode: 531_W	Units: µg/L	Prep Date: 10/9/2003	RunNo: 19516
Client ID:	Batch ID: R19516	TestNo: E531.1		Analysis Date: 10/9/2003	SeqNo: 367387

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Carbofuran	11.00	2.0	10	0	110	80	120	0	0		
Oxamyl	11.60	2.0	10	0	116	80	120	0	0		
Surr: Propoxur	11.70	0	10	0	117	80	120	0	0		

Sample ID F03100008-001AMS	SampType: MSD	TestCode: 531_W	Units: µg/L	Prep Date: 10/9/2003	RunNo: 19516
Client ID:	Batch ID: R19516	TestNo: E531.1		Analysis Date: 10/9/2003	SeqNo: 367388

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Carbofuran	10.20	2.0	10	0	102	80	120	11	7.55	20	
Oxamyl	10.60	2.0	10	0	106	80	120	11.6	9.01	20	
Surr: Propoxur	10.50	0	10	0	105	80	120	11.7	0	0	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 547_W

Sample ID MB-R19290	SampType: MBLK	TestCode: 547_W	Units: µg/L	Prep Date: 10/2/2003	RunNo: 19290
Client ID:	Batch ID: R19290	TestNo: E547		Analysis Date: 10/2/2003	SeqNo: 363041

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Glyphosate	ND	6.0									

Sample ID LCS-R19290	SampType: LCS	TestCode: 547_W	Units: µg/L	Prep Date: 10/2/2003	RunNo: 19290
Client ID:	Batch ID: R19290	TestNo: E547		Analysis Date: 10/2/2003	SeqNo: 363042

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Glyphosate	43.20	6.0	50	0	86.4	70	130	0	0		

Sample ID F03090665-001HMS	SampType: MS	TestCode: 547_W	Units: µg/L	Prep Date: 10/2/2003	RunNo: 19290
Client ID:	Batch ID: R19290	TestNo: E547		Analysis Date: 10/2/2003	SeqNo: 363044

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Glyphosate	45.00	6.0	50	0	90	70	130	0	0		

Sample ID F03090767-002LMS	SampType: MS	TestCode: 547_W	Units: µg/L	Prep Date: 10/2/2003	RunNo: 19290
Client ID:	Batch ID: R19290	TestNo: E547		Analysis Date: 10/2/2003	SeqNo: 363056

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Glyphosate	40.80	6.0	50	0	81.6	70	130	0	0		

Sample ID F03090665-001HMS	SampType: MSD	TestCode: 547_W	Units: µg/L	Prep Date: 10/2/2003	RunNo: 19290
Client ID:	Batch ID: R19290	TestNo: E547		Analysis Date: 10/2/2003	SeqNo: 363045

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Glyphosate	45.80	6.0	50	0	91.6	70	130	45	1.76	30	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 547_W

Sample ID	F03090767-002LMS	SampType:	MSD	TestCode:	547_W	Units:	µg/L	Prep Date:	10/2/2003	RunNo:	19290
Client ID:		Batch ID:	R19290	TestNo:	E547			Analysis Date:	10/2/2003	SeqNo:	363057

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Glyphosate	42.00	6.0	50	0	84	70	130	40.8	2.90	30	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 548_W

Sample ID MBLK-14267	SampType: MBLK	TestCode: 548_W	Units: µg/L	Prep Date:	RunNo: 19317
Client ID:	Batch ID: 14267	TestNo: E548.1		Analysis Date: 10/3/2003	SeqNo: 363536

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Endothall	ND	9.0									

Sample ID LCS-14267	SampType: LCS	TestCode: 548_W	Units: µg/L	Prep Date: 10/2/2003	RunNo: 19317
Client ID:	Batch ID: 14267	TestNo: E548.1		Analysis Date: 10/3/2003	SeqNo: 363537

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Endothall	43.60	9.0	50	0	87.2	80	120	0	0		

Sample ID F03090820-001HMS	SampType: MS	TestCode: 548_W	Units: µg/L	Prep Date: 10/2/2003	RunNo: 19317
Client ID:	Batch ID: 14267	TestNo: E548.1		Analysis Date: 10/4/2003	SeqNo: 363547

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Endothall	45.80	9.0	50	0	91.6	80	120	0	0		

Sample ID F03090820-001HMS	SampType: MSD	TestCode: 548_W	Units: µg/L	Prep Date: 10/2/2003	RunNo: 19317
Client ID:	Batch ID: 14267	TestNo: E548.1		Analysis Date: 10/4/2003	SeqNo: 363548

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Endothall	53.00	9.0	50	0	106	80	120	45.8	14.6	40	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: 549_W

Sample ID MB-14262	SampType: MBLK	TestCode: 549_W	Units: µg/L	Prep Date: 10/2/2003	RunNo: 19445
Client ID:	Batch ID: 14262	TestNo: E549.2		Analysis Date: 10/8/2003	SeqNo: 365504

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Diquat	ND	0.40									

Sample ID MB2-14262	SampType: MBLK	TestCode: 549_W	Units: µg/L	Prep Date: 10/3/2003	RunNo: 19445
Client ID:	Batch ID: 14262	TestNo: E549.2		Analysis Date: 10/8/2003	SeqNo: 365516

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Diquat	ND	0.40									

Sample ID LCS-14262	SampType: LCS	TestCode: 549_W	Units: µg/L	Prep Date: 10/2/2003	RunNo: 19445
Client ID:	Batch ID: 14262	TestNo: E549.2		Analysis Date: 10/8/2003	SeqNo: 365505

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Diquat	6.810	0.40	7.51	0	90.7	70	130	0	0		

Sample ID F03090809-001JMS	SampType: MS	TestCode: 549_W	Units: µg/L	Prep Date: 10/2/2003	RunNo: 19445
Client ID:	Batch ID: 14262	TestNo: E549.2		Analysis Date: 10/8/2003	SeqNo: 365507

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Diquat	6.460	0.40	7.51	0	86	70	130	0	0		

Sample ID F03090809-001JMS	SampType: MSD	TestCode: 549_W	Units: µg/L	Prep Date: 10/2/2003	RunNo: 19445
Client ID:	Batch ID: 14262	TestNo: E549.2		Analysis Date: 10/8/2003	SeqNo: 365508

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Diquat	6.430	0.40	7.51	0	85.6	70	130	6.46	0.465	40	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: AA-HG245.1_W

Sample ID	MB-14284	SampType:	MBLK	TestCode:	AA-HG245.1_	Units:	µg/L	Prep Date:	10/2/2003	RunNo:	19241
Client ID:		Batch ID:	14284	TestNo:	E245.1			Analysis Date:	10/2/2003	SeqNo:	361989

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Mercury	ND	0.10									

Sample ID	LCS-14284	SampType:	LCS	TestCode:	AA-HG245.1_	Units:	µg/L	Prep Date:	10/2/2003	RunNo:	19241
Client ID:		Batch ID:	14284	TestNo:	E245.1			Analysis Date:	10/2/2003	SeqNo:	361990

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Mercury	1.880	0.10	2	0	94	85	115	0	0		

Sample ID	F03100041-001Jms	SampType:	MS	TestCode:	AA-HG245.1_	Units:	µg/L	Prep Date:	10/2/2003	RunNo:	19241
Client ID:		Batch ID:	14284	TestNo:	E245.1			Analysis Date:	10/2/2003	SeqNo:	361999

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Mercury	2.130	0.10	2	0	106	85	115	0	0		

Sample ID	F03100041-001Jms	SampType:	MSD	TestCode:	AA-HG245.1_	Units:	µg/L	Prep Date:	10/2/2003	RunNo:	19241
Client ID:		Batch ID:	14284	TestNo:	E245.1			Analysis Date:	10/2/2003	SeqNo:	362000

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Mercury	2.120	0.10	2	0	106	85	115	2.13	0.471	20	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: AA-PB3113_DW

Sample ID MBLANK	SampType: ABLK	TestCode: AA-PB3113_	Units: µg/L	Prep Date:	RunNo: 19492
Client ID:	Batch ID: R19492	TestNo: SM3113 B		Analysis Date: 10/10/2003	SeqNo: 366832

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Lead	ND	1.0	0	0	0	0	0	0	0		

Sample ID QCS	SampType: QCS	TestCode: AA-PB3113_	Units: µg/L	Prep Date:	RunNo: 19492
Client ID:	Batch ID: R19492	TestNo: SM3113 B		Analysis Date: 10/10/2003	SeqNo: 366833

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Lead	15.10	1.0	15	0	101	90	110	0	0		

Sample ID F03100215-001AMS	SampType: MS	TestCode: AA-PB3113_	Units: µg/L	Prep Date:	RunNo: 19492
Client ID:	Batch ID: R19492	TestNo: SM3113 B		Analysis Date: 10/10/2003	SeqNo: 366844

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Lead	11.50	1.0	10	2.6	89	85	115	0	0		

Sample ID F03100215-001AMS	SampType: MSD	TestCode: AA-PB3113_	Units: µg/L	Prep Date:	RunNo: 19492
Client ID:	Batch ID: R19492	TestNo: SM3113 B		Analysis Date: 10/10/2003	SeqNo: 366845

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Lead	11.50	1.0	10	2.6	89	85	115	11.5	0	10	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: AA-SB3113_DW

Sample ID **MBLANK**	SampType: **ABLK**	TestCode: **AA-SB3113_**	Units: **µg/L**	Prep Date:	RunNo: **19307**
Client ID:	Batch ID: **R19307**	TestNo: **SM3113 B**		Analysis Date: **10/6/2003**	SeqNo: **363205**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Antimony	0.1000	3.0	0	0	0	0	0	0	0		

Sample ID **QCS**	SampType: **QCS**	TestCode: **AA-SB3113_**	Units: **µg/L**	Prep Date:	RunNo: **19307**
Client ID:	Batch ID: **R19307**	TestNo: **SM3113 B**		Analysis Date: **10/6/2003**	SeqNo: **363206**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Antimony	13.47	3.0	15	0	89.8	90	110	0	0		S

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: AA-SE3113_DW

Sample ID MBLANK	SampType: ABLK	TestCode: AA-SE3113_	Units: µg/L	Prep Date:	RunNo: 19545
Client ID:	Batch ID: R19545	TestNo: SM3113 B		Analysis Date: 10/13/2003	SeqNo: 367900

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Selenium	ND	2.0	0	0	0	0	0	0	0		

Sample ID QCS	SampType: QCS	TestCode: AA-SE3113_	Units: µg/L	Prep Date:	RunNo: 19545
Client ID:	Batch ID: R19545	TestNo: SM3113 B		Analysis Date: 10/13/2003	SeqNo: 367901

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Selenium	16.31	2.0	15	0	109	90	110	0	0		

Sample ID F03100293-001LMS	SampType: MS	TestCode: AA-SE3113_	Units: µg/L	Prep Date:	RunNo: 19545
Client ID:	Batch ID: R19545	TestNo: SM3113 B		Analysis Date: 10/13/2003	SeqNo: 367910

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Selenium	13.33	2.0	10	0	133	85	115	0	0		S

Sample ID F03100293-001LMS	SampType: MSD	TestCode: AA-SE3113_	Units: µg/L	Prep Date:	RunNo: 19545
Client ID:	Batch ID: R19545	TestNo: SM3113 B		Analysis Date: 10/13/2003	SeqNo: 367911

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Selenium	12.41	2.0	10	0	124	85	115	13.33	7.15	10	S

Qualifiers:

- E Value above quantitation range
- H Holding times for preparation or analysis exceeded
- J Analyte detected below quantitation limits
- ND Not Detected at the Reporting Limit
- R RPD outside accepted recovery limits
- S Spike Recovery outside accepted recovery limits
- U Not Detected at the Reporting Limit

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: AA-TL200.9_DW

Sample ID MBLANK	SampType: ABLK	TestCode: AA-TL200.9_	Units: µg/L	Prep Date:	RunNo: 19351
Client ID:	Batch ID: R19351	TestNo: E200.9		Analysis Date: 10/7/2003	SeqNo: 364015

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Thallium	0.2000	1.0	0	0	0	0	0	0	0		

Sample ID QCS	SampType: QCS	TestCode: AA-TL200.9_	Units: µg/L	Prep Date:	RunNo: 19351
Client ID:	Batch ID: R19351	TestNo: E200.9		Analysis Date: 10/7/2003	SeqNo: 364016

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Thallium	15.50	1.0	15	0	103	90	110	0	0		

Sample ID F03100105-001LMS	SampType: MS	TestCode: AA-TL200.9_	Units: µg/L	Prep Date:	RunNo: 19351
Client ID:	Batch ID: R19351	TestNo: E200.9		Analysis Date: 10/7/2003	SeqNo: 364027

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Thallium	12.20	1.0	10	0	122	70	130	0	0		

Sample ID F03100105-001LMS	SampType: MSD	TestCode: AA-TL200.9_	Units: µg/L	Prep Date:	RunNo: 19351
Client ID:	Batch ID: R19351	TestNo: E200.9		Analysis Date: 10/7/2003	SeqNo: 364028

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Thallium	12.10	1.0	10	0	121	70	130	12.2	0.823	20	

Qualifiers:

- E Value above quantitation range
- H Holding times for preparation or analysis exceeded
- J Analyte detected below quantitation limits
- ND Not Detected at the Reporting Limit
- R RPD outside accepted recovery limits
- S Spike Recovery outside accepted recovery limits
- U Not Detected at the Reporting Limit

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: CN335.4_DW

Sample ID MB-14357	SampType: MBLK	TestCode: CN335.4_DW	Units: mg/L	Prep Date: 10/6/2003	RunNo: 19358
Client ID:	Batch ID: 14357	TestNo: E335.4		Analysis Date: 10/7/2003	SeqNo: 364110

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Cyanide	ND	0.010									

Sample ID LCS-14357	SampType: LCS	TestCode: CN335.4_DW	Units: mg/L	Prep Date: 10/6/2003	RunNo: 19358
Client ID:	Batch ID: 14357	TestNo: E335.4		Analysis Date: 10/7/2003	SeqNo: 364111

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Cyanide	0.2062	0.010	0.2	0	103	90	110	0	0		

Sample ID F03090809-001Pms	SampType: MS	TestCode: CN335.4_DW	Units: mg/L	Prep Date: 10/6/2003	RunNo: 19358
Client ID:	Batch ID: 14357	TestNo: E335.4		Analysis Date: 10/7/2003	SeqNo: 364113

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Cyanide	0.2189	0.010	0.2	0.0041	107	90	110	0	0		

Sample ID F03090809-001Pms	SampType: MSD	TestCode: CN335.4_DW	Units: mg/L	Prep Date: 10/6/2003	RunNo: 19358
Client ID:	Batch ID: 14357	TestNo: E335.4		Analysis Date: 10/7/2003	SeqNo: 364114

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Cyanide	0.2042	0.010	0.2	0.0041	100	90	110	0.2189	6.95	20	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: COLOR_DW

Sample ID **qcs**	SampType: **QCS**	TestCode: **COLOR_DW**	Units: **Color Units**	Prep Date:	RunNo: **19208**
Client ID:	Batch ID: **R19208**	TestNo: **SM2120 B**		Analysis Date: **10/1/2003**	SeqNo: **361217**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Color	20.00	5.0	20	0	100	90	110	0	0		

Sample ID **MB-R19208**	SampType: **MBLK**	TestCode: **COLOR_DW**	Units: **Color Units**	Prep Date:	RunNo: **19208**
Client ID:	Batch ID: **R19208**	TestNo: **SM2120 B**		Analysis Date: **10/1/2003**	SeqNo: **361216**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Color	ND	5.0									

Sample ID **F03100025-001Mdu**	SampType: **DUP**	TestCode: **COLOR_DW**	Units: **Color Units**	Prep Date:	RunNo: **19208**
Client ID:	Batch ID: **R19208**	TestNo: **SM2120 B**		Analysis Date: **10/1/2003**	SeqNo: **361220**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Color	ND	5.0	0	0	0	0	0	0	0	20	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: IC300_W

Sample ID QCS-r19214-A	SampType: QCS	TestCode: IC300_W	Units: mg/L	Prep Date:	RunNo: 19214
Client ID:	Batch ID: r19214-A	TestNo: E300.0		Analysis Date: 10/1/2003	SeqNo: 361516

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Bromide	1.034	0.10	1	0	103	90	110	0	0		
Chloride	5.133	0.50	5	0	103	90	110	0	0		
Fluoride	0.4921	0.050	0.5	0	98.4	90	110	0	0		
Nitrogen, Nitrate	0.4958	0.050	0.5	0	99.2	90	110	0	0		
Nitrogen, Nitrite	0.4807	0.050	0.5	0	96.1	90	110	0	0		
Nitrogen, Nitrate-Nitrite	0.9766	0.050	1	0	97.7	80	120	0	0		
Phosphorus, Orthophosphate (As P)	0.9620	0.10	1	0	96.2	90	110	0	0		
Sulfate	5.118	0.50	5	0	102	90	110	0	0		

Sample ID QCS-r19214-B	SampType: QCS	TestCode: IC300_W	Units: mg/L	Prep Date:	RunNo: 19214
Client ID:	Batch ID: r19214-B	TestNo: E300.0		Analysis Date: 10/1/2003	SeqNo: 361517

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Chloride	5.133	0.50	5	0	103	90	110	0	0		
Fluoride	0.4921	0.050	0.5	0	98.4	90	110	0	0		
Nitrogen, Nitrate	0.4958	0.050	0.5	0	99.2	90	110	0	0		
Nitrogen, Nitrite	0.4807	0.050	0.5	0	96.1	90	110	0	0		
Nitrogen, Nitrate-Nitrite	0.9766	0.050	1	0	97.7	80	120	0	0		
Sulfate	5.118	0.50	5	0	102	90	110	0	0		

Sample ID MB-r19214-B	SampType: MBLK	TestCode: IC300_W	Units: mg/L	Prep Date:	RunNo: 19214
Client ID:	Batch ID: r19214-B	TestNo: E300.0		Analysis Date: 10/1/2003	SeqNo: 361519

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Chloride	ND	0.50									
Fluoride	ND	0.050									
Nitrogen, Nitrate	ND	0.050									
Nitrogen, Nitrite	ND	0.050									

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: IC300_W

Sample ID MB-r19214-B	SampType: MBLK	TestCode: IC300_W	Units: mg/L	Prep Date:	RunNo: 19214
Client ID:	Batch ID: r19214-B	TestNo: E300.0		Analysis Date: 10/1/2003	SeqNo: 361519

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Nitrogen, Nitrate-Nitrite	ND	0.050									
Sulfate	ND	0.50									

Sample ID F03100022-001E MS	SampType: MS	TestCode: IC300_W	Units: mg/L	Prep Date:	RunNo: 19214
Client ID:	Batch ID: r19214-B	TestNo: E300.0		Analysis Date: 10/1/2003	SeqNo: 361541

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Chloride	59.39	0.50	10	50.15	92.4	90	110	0	0		
Fluoride	1.130	0.050	1	0.08084	105	90	110	0	0		
Nitrogen, Nitrate	1.001	0.050	1	0.02471	97.6	90	110	0	0		
Nitrogen, Nitrite	0.9516	0.050	1	0	95.2	90	110	0	0		
Nitrogen, Nitrate-Nitrite	1.953	0.050	2	0.02471	96.4	80	120	0	0		
Sulfate	168.9	0.50	10	162.7	62.1	90	110	0	0		S

Sample ID F03100041-001K MS	SampType: MS	TestCode: IC300_W	Units: mg/L	Prep Date:	RunNo: 19214
Client ID:	Batch ID: r19214-B	TestNo: E300.0		Analysis Date: 10/1/2003	SeqNo: 361552

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Chloride	125.8	0.50	10	116.8	90.4	90	110	0	0		
Fluoride	1.174	0.050	1	0.158	102	90	110	0	0		
Nitrogen, Nitrate	1.700	0.050	1	0.0297	167	90	110	0	0		S
Nitrogen, Nitrite	0.2330	0.050	1	0	23.3	90	110	0	0		S
Nitrogen, Nitrate-Nitrite	1.940	0.050	2	0.0297	95.5	80	120	0	0		
Sulfate	11.68	0.50	10	2.29	93.9	90	110	0	0		

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: IC300_W

Sample ID F03100022-001E DU	SampType: DUP	TestCode: IC300_W	Units: mg/L	Prep Date:	RunNo: 19214
Client ID:	Batch ID: r19214-B	TestNo: E300.0		Analysis Date: 10/1/2003	SeqNo: 361540

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Chloride	50.10	0.50	0	0	0	0	0	50.15	0.104	20	
Fluoride	0.07823	0.050	0	0	0	0	0	0.08084	3.28	20	
Nitrogen, Nitrate	ND	0.050	0	0	0	0	0	0.02471	0	20	
Nitrogen, Nitrite	ND	0.050	0	0	0	0	0	0	0	20	
Nitrogen, Nitrate-Nitrite	ND	0.050	0	0	0	0	0	0.02471	0	20	
Sulfate	162.4	0.50	0	0	0	0	0	162.7	0.175	20	

Sample ID F03100041-001K DU	SampType: DUP	TestCode: IC300_W	Units: mg/L	Prep Date:	RunNo: 19214
Client ID:	Batch ID: r19214-B	TestNo: E300.0		Analysis Date: 10/1/2003	SeqNo: 361551

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Chloride	116.9	0.50	0	0	0	0	0	116.8	0.0811	20	
Fluoride	0.1669	0.050	0	0	0	0	0	0.158	5.47	20	
Nitrogen, Nitrate	0.04536	0.050	0	0	0	0	0	0.0297	0	20	J
Nitrogen, Nitrite	ND	0.050	0	0	0	0	0	0	0	20	
Nitrogen, Nitrate-Nitrite	0.04536	0.050	0	0	0	0	0	0.0297	0	20	J
Sulfate	2.315	0.50	0	0	0	0	0	2.29	1.09	20	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: ICP-200.7_DW

Sample ID **MBLANK**	SampType: **ABLK**	TestCode: **ICP-200.7_D**	Units: **µg/L**	Prep Date:	RunNo: **19471**
Client ID:	Batch ID: **R19471**	TestNo: **E200.7**		Analysis Date: **10/8/2003**	SeqNo: **366123**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Aluminum	0.6760	100	0	0	0	0	0	0	0		
Antimony	0.1450	10	0	0	0	0	0	0	0		
Arsenic	-0.7580	10	0	0	0	0	0	0	0		
Barium	-0.04300	10	0	0	0	0	0	0	0		
Beryllium	0.04800	1.0	0	0	0	0	0	0	0		
Boron	1.870	50	0	0	0	0	0	0	0		
Cadmium	-0.01500	1.0	0	0	0	0	0	0	0		
Calcium	68.00	500	0	0	0	0	0	0	0		
Chromium	-0.02600	5.0	0	0	0	0	0	0	0		
Cobalt	-0.1260	10	0	0	0	0	0	0	0		
Copper	0.005000	5.0	0	0	0	0	0	0	0		
Iron	3.160	40	0	0	0	0	0	0	0		
Lead	-0.3780	5.0	0	0	0	0	0	0	0		
Magnesium	5.000	500	0	0	0	0	0	0	0		
Manganese	0.01100	5.0	0	0	0	0	0	0	0		
Molybdenum	-0.1870	10	0	0	0	0	0	0	0		
Nickel	-0.6590	5.0	0	0	0	0	0	0	0		
Potassium	-1.000	500	0	0	0	0	0	0	0		
Selenium	1.940	10	0	0	0	0	0	0	0		
Silver	-0.2760	5.0	0	0	0	0	0	0	0		
Sodium	-46.00	500	0	0	0	0	0	0	0		
Strontium	-0.02300	10	0	0	0	0	0	0	0		
Thallium	3.030	10	0	0	0	0	0	0	0		
Tin	0.7840	50	0	0	0	0	0	0	0		
Vanadium	-0.1990	10	0	0	0	0	0	0	0		
Zinc	0.7070	20	0	0	0	0	0	0	0		
Hardness, Calcium (as CaCO3)	172.0	1200	0	0	0	0	0	0	0		
Hardness, Magnesium (as CaCO3)	21.00	2100	0	0	0	0	0	0	0		

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: ICP-200.7_DW

Sample ID **MBLANK**	SampType: **ABLK**	TestCode: **ICP-200.7_D**	Units: µg/L	Prep Date:			RunNo: **19471**			
Client ID:	Batch ID: **R19471**	TestNo: **E200.7**		Analysis Date: **10/8/2003**			SeqNo: **366123**			
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Hardness, Total (as CaCO3)	195.0	1200	0	0	0	0	0	0	0		

Sample ID **QCS**	SampType: **QCS**	TestCode: **ICP-200.7_D**	Units: µg/L	Prep Date:			RunNo: **19471**			
Client ID:	Batch ID: **R19471**	TestNo: **E200.7**		Analysis Date: **10/8/2003**			SeqNo: **366124**			
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Aluminum	1020	100	1000	0	102	90	110	0	0		
Antimony	1020	10	1000	0	102	90	110	0	0		
Arsenic	990.0	10	1000	0	99	90	110	0	0		
Barium	956.0	10	1000	0	95.6	90	110	0	0		
Beryllium	1000	1.0	1000	0	100	90	110	0	0		
Boron	988.0	50	1000	0	98.8	90	110	0	0		
Cadmium	1010	1.0	1000	0	101	90	110	0	0		
Calcium	49200	500	50000	0	98.4	90	110	0	0		
Chromium	993.0	5.0	1000	0	99.3	90	110	0	0		
Cobalt	993.0	10	1000	0	99.3	90	110	0	0		
Copper	1030	5.0	1000	0	103	90	110	0	0		
Iron	1010	40	1000	0	101	90	110	0	0		
Lead	1020	5.0	1000	0	102	90	110	0	0		
Magnesium	50700	500	50000	0	101	90	110	0	0		
Manganese	992.0	5.0	1000	0	99.2	90	110	0	0		
Molybdenum	1020	10	1000	0	102	90	110	0	0		
Nickel	1010	5.0	1000	0	101	90	110	0	0		
Potassium	52400	500	50000	0	105	90	110	0	0		
Selenium	1020	10	1000	0	102	90	110	0	0		
Silver	1010	5.0	1000	0	101	90	110	0	0		
Sodium	51100	500	50000	0	102	90	110	0	0		
Strontium	1000	10	1000	0	100	90	110	0	0		

Qualifiers:

- E Value above quantitation range
- H Holding times for preparation or analysis exceeded
- J Analyte detected below quantitation limits
- ND Not Detected at the Reporting Limit
- R RPD outside accepted recovery limits
- S Spike Recovery outside accepted recovery limits
- U Not Detected at the Reporting Limit

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: ICP-200.7_DW

Sample ID **QCS**	SampType: **QCS**	TestCode: **ICP-200.7_D**	Units: **µg/L**	Prep Date:	RunNo: **19471**
Client ID:	Batch ID: **R19471**	TestNo: **E200.7**		Analysis Date: **10/8/2003**	SeqNo: **366124**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Thallium	1030	10	1000	0	103	90	110	0	0		
Tin	1020	50	1000	0	102	90	110	0	0		
Vanadium	1020	10	1000	0	102	90	110	0	0		
Zinc	1020	20	1000	0	102	90	110	0	0		
Hardness, Calcium (as CaCO3)	123000	1200	0	0	0	0	0	0	0		
Hardness, Magnesium (as CaCO3)	209000	2100	0	0	0	0	0	0	0		
Hardness, Total (as CaCO3)	332000	1200	0	0	0	0	0	0	0		

Sample ID **MBLANK**	SampType: **ABLK**	TestCode: **ICP-200.7_D**	Units: **µg/L**	Prep Date:	RunNo: **19478**
Client ID:	Batch ID: **R19478**	TestNo: **E200.7**		Analysis Date: **10/10/2003**	SeqNo: **366478**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Aluminum	4.080	100	0	0	0	0	0	0	0		
Antimony	-1.020	10	0	0	0	0	0	0	0		
Arsenic	0.2760	10	0	0	0	0	0	0	0		
Barium	0.03700	10	0	0	0	0	0	0	0		
Beryllium	0.05900	1.0	0	0	0	0	0	0	0		
Boron	3.930	50	0	0	0	0	0	0	0		
Cadmium	0.1360	1.0	0	0	0	0	0	0	0		
Calcium	68.00	500	0	0	0	0	0	0	0		
Chromium	-0.03200	5.0	0	0	0	0	0	0	0		
Cobalt	-0.08000	10	0	0	0	0	0	0	0		
Copper	-0.04600	5.0	0	0	0	0	0	0	0		
Iron	-1.640	40	0	0	0	0	0	0	0		
Lead	0.2550	5.0	0	0	0	0	0	0	0		
Magnesium	6.000	500	0	0	0	0	0	0	0		
Manganese	-0.01700	5.0	0	0	0	0	0	0	0		
Molybdenum	-0.09000	10	0	0	0	0	0	0	0		

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: ICP-200.7_DW

Sample ID **MBLANK**	SampType: **ABLK**	TestCode: **ICP-200.7_D**	Units: **µg/L**	Prep Date:	RunNo: **19478**
Client ID:	Batch ID: **R19478**	TestNo: **E200.7**		Analysis Date: **10/10/2003**	SeqNo: **366478**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Nickel	-0.1890	5.0	0	0	0	0	0	0	0		
Potassium	48.00	500	0	0	0	0	0	0	0		
Selenium	-3.050	10	0	0	0	0	0	0	0		
Silver	-0.6590	5.0	0	0	0	0	0	0	0		
Sodium	106.0	500	0	0	0	0	0	0	0		
Strontium	0.01900	10	0	0	0	0	0	0	0		
Thallium	-0.02600	10	0	0	0	0	0	0	0		
Tin	1.420	50	0	0	0	0	0	0	0		
Vanadium	-0.1290	10	0	0	0	0	0	0	0		
Zinc	-1.980	20	0	0	0	0	0	0	0		
Hardness, Calcium (as CaCO3)	172.0	1200	0	0	0	0	0	0	0		
Hardness, Magnesium (as CaCO3)	25.00	2100	0	0	0	0	0	0	0		
Hardness, Total (as CaCO3)	199.0	1200	0	0	0	0	0	0	0		

Sample ID **qcs**	SampType: **QCS**	TestCode: **ICP-200.7_D**	Units: **µg/L**	Prep Date:	RunNo: **19478**
Client ID:	Batch ID: **R19478**	TestNo: **E200.7**		Analysis Date: **10/10/2003**	SeqNo: **366479**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Aluminum	1020	100	1000	0	102	90	110	0	0		
Antimony	1020	10	1000	0	102	90	110	0	0		
Arsenic	992.0	10	1000	0	99.2	90	110	0	0		
Barium	949.0	10	1000	0	94.9	90	110	0	0		
Beryllium	1010	1.0	1000	0	101	90	110	0	0		
Boron	989.0	50	1000	0	98.9	90	110	0	0		
Cadmium	996.0	1.0	1000	0	99.6	90	110	0	0		
Calcium	49200	500	50000	0	98.4	90	110	0	0		
Chromium	993.0	5.0	1000	0	99.3	90	110	0	0		
Cobalt	1000	10	1000	0	100	90	110	0	0		

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: ICP-200.7_DW

Sample ID **qcs** SampType: **QCS** TestCode: **ICP-200.7_D** Units: **µg/L** Prep Date: RunNo: **19478**
Client ID: Batch ID: **R19478** TestNo: **E200.7** Analysis Date: **10/10/2003** SeqNo: **366479**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Copper	1010	5.0	1000	0	101	90	110	0	0		
Iron	995.0	40	1000	0	99.5	90	110	0	0		
Lead	1030	5.0	1000	0	103	90	110	0	0		
Magnesium	50600	500	50000	0	101	90	110	0	0		
Manganese	995.0	5.0	1000	0	99.5	90	110	0	0		
Molybdenum	1030	10	1000	0	103	90	110	0	0		
Nickel	1010	5.0	1000	0	101	90	110	0	0		
Potassium	52200	500	50000	0	104	90	110	0	0		
Selenium	1050	10	1000	0	105	90	110	0	0		
Silver	1010	5.0	1000	0	101	90	110	0	0		
Sodium	50800	500	50000	0	102	90	110	0	0		
Strontium	1000	10	1000	0	100	90	110	0	0		
Thallium	1030	10	1000	0	103	90	110	0	0		
Tin	1020	50	1000	0	102	90	110	0	0		
Vanadium	1020	10	1000	0	102	90	110	0	0		
Zinc	1030	20	1000	0	103	90	110	0	0		
Hardness, Calcium (as CaCO3)	123000	1200	0	0	0	0	0	0	0		
Hardness, Magnesium (as CaCO3)	208000	2100	0	0	0	0	0	0	0		
Hardness, Total (as CaCO3)	331000	1200	0	0	0	0	0	0	0		

Sample ID **F03090809-001LMS** SampType: **MS** TestCode: **ICP-200.7_D** Units: **µg/L** Prep Date: RunNo: **19471**
Client ID: Batch ID: **R19471-A** TestNo: **E200.7** Analysis Date: **10/8/2003** SeqNo: **366127**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Aluminum	10800	100	10000	49.1	108	70	130	0	0		
Arsenic	1070	10	1000	6.66	106	70	130	0	0		
Barium	1080	10	1000	48.7	103	70	130	0	0		
Beryllium	103.0	1.0	100	0	103	70	130	0	0		

Qualifiers:
E Value above quantitation range
ND Not Detected at the Reporting Limit
U Not Detected at the Reporting Limit
H Holding times for preparation or analysis exceeded
R RPD outside accepted recovery limits
J Analyte detected below quantitation limits
S Spike Recovery outside accepted recovery limits

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: ICP-200.7_DW

Sample ID F03090809-001LMS	SampType: MS	TestCode: ICP-200.7_D	Units: µg/L	Prep Date:	RunNo: 19471
Client ID:	Batch ID: R19471-A	TestNo: E200.7		Analysis Date: 10/8/2003	SeqNo: 366127

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Cadmium	105.0	1.0	100	0	105	70	130	0	0		
Chromium	517.0	5.0	500	0	103	70	130	0	0		
Copper	524.0	5.0	500	1.57	104	70	130	0	0		
Iron	4120	40	4000	0	103	70	130	0	0		
Manganese	516.0	5.0	500	0	103	70	130	0	0		
Nickel	523.0	5.0	500	0	105	70	130	0	0		
Silver	417.0	5.0	500	0	83.4	70	130	0	0		
Zinc	2100	20	2000	0	105	70	130	0	0		

Sample ID F03090809-001LMS	SampType: MS	TestCode: ICP-200.7_D	Units: µg/L	Prep Date:	RunNo: 19478
Client ID:	Batch ID: R19478-A	TestNo: E200.7		Analysis Date: 10/10/2003	SeqNo: 367501

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Sodium	60800	500	50000	7900	106	70	130	0	0		

Sample ID F03090809-001LMS	SampType: MSD	TestCode: ICP-200.7_D	Units: µg/L	Prep Date:	RunNo: 19471
Client ID:	Batch ID: R19471-A	TestNo: E200.7		Analysis Date: 10/8/2003	SeqNo: 366128

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Aluminum	10800	100	10000	49.1	108	70	130	10800	0	20	
Arsenic	1070	10	1000	6.66	106	70	130	1070	0	20	
Barium	1080	10	1000	48.7	103	70	130	1080	0	20	
Beryllium	104.0	1.0	100	0	104	70	130	103	0.966	20	
Cadmium	106.0	1.0	100	0	106	70	130	105	0.948	20	
Chromium	519.0	5.0	500	0	104	70	130	517	0.386	20	
Copper	525.0	5.0	500	1.57	105	70	130	524	0.191	20	
Iron	4140	40	4000	0	104	70	130	4120	0.484	20	
Manganese	517.0	5.0	500	0	103	70	130	516	0.194	20	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: ICP-200.7_DW

Sample ID F03090809-001LMS	SampType: MSD	TestCode: ICP-200.7_D	Units: µg/L	Prep Date:	RunNo: 19471
Client ID:	Batch ID: R19471-A	TestNo: E200.7		Analysis Date: 10/8/2003	SeqNo: 366128

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Nickel	524.0	5.0	500	0	105	70	130	523	0.191	20	
Silver	421.0	5.0	500	0	84.2	70	130	417	0.955	20	
Zinc	2110	20	2000	0	106	70	130	2100	0.475	20	

Sample ID F03090809-001LMS	SampType: MSD	TestCode: ICP-200.7_D	Units: µg/L	Prep Date:	RunNo: 19478
Client ID:	Batch ID: R19478-A	TestNo: E200.7		Analysis Date: 10/10/2003	SeqNo: 367502

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Sodium	61400	500	50000	7900	107	70	130	60800	0.982	20	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: MBAS

Sample ID **MB-14295**	SampType: **MBLK**	TestCode: **MBAS**	Units: **mg/L**	Prep Date: **10/2/2003**	RunNo: **19247**
Client ID:	Batch ID: **14295**	TestNo: **E425.1**		Analysis Date: **10/2/2003**	SeqNo: **362187**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
MBAS	ND	0.10									

Sample ID **LCS-14295**	SampType: **LCS**	TestCode: **MBAS**	Units: **mg/L**	Prep Date: **10/2/2003**	RunNo: **19247**
Client ID:	Batch ID: **14295**	TestNo: **E425.1**		Analysis Date: **10/2/2003**	SeqNo: **362188**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
MBAS	0.3700	0.10	0.4	0	92.5	90	110	0	0		

Sample ID **F03100041-001K ms**	SampType: **MS**	TestCode: **MBAS**	Units: **mg/L**	Prep Date: **10/2/2003**	RunNo: **19247**
Client ID:	Batch ID: **14295**	TestNo: **E425.1**		Analysis Date: **10/2/2003**	SeqNo: **362192**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
MBAS	0.4100	0.10	0.4	0.07	85	80	120	0	0		

Sample ID **F03100041-001K du**	SampType: **DUP**	TestCode: **MBAS**	Units: **mg/L**	Prep Date: **10/2/2003**	RunNo: **19247**
Client ID:	Batch ID: **14295**	TestNo: **E425.1**		Analysis Date: **10/2/2003**	SeqNo: **362191**

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
MBAS	0.05000	0.10	0	0	0	0	0	0.07	0	20	J

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: ODOR_DW

Sample ID MB-R19203	SampType: MBLK	TestCode: ODOR_DW	Units: t.o.n.	Prep Date:	RunNo: 19203
Client ID:	Batch ID: R19203	TestNo: SM2150B		Analysis Date: 10/1/2003	SeqNo: 361181

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Odor	ND	1.0									

Sample ID F03100025-001NDU	SampType: DUP	TestCode: ODOR_DW	Units: t.o.n.	Prep Date:	RunNo: 19203
Client ID:	Batch ID: R19203	TestNo: SM2150B		Analysis Date: 10/1/2003	SeqNo: 361184

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Odor	ND	1.0	0	0	0	0	0	0	0	20	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: PH150_W

Sample ID F03100025-001MDU	SampType: DUP	TestCode: PH150_W	Units: pH units	Prep Date:	RunNo: 19205
Client ID:	Batch ID: R19205	TestNo: E150.1		Analysis Date: 10/1/2003	SeqNo: 361197

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
pH	4.460	0	0	0	0	0	0	4.44	0.449	20	

Sample ID F03100031-001ADU	SampType: DUP	TestCode: PH150_W	Units: pH units	Prep Date:	RunNo: 19205
Client ID:	Batch ID: R19205	TestNo: E150.1		Analysis Date: 10/1/2003	SeqNo: 361199

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
pH	7.420	0	0	0	0	0	0	7.4	0.270	20	

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

CLIENT: Plantation Bay Utility Co., Inc.
Work Order: F03100040
Project: Plantation Bay

ANALYTICAL QC SUMMARY REPORT

TestCode: SOLIDS-TD_DW

Sample ID MB-14296	SampType: MBLK	TestCode: SOLIDS-TD_	Units: mg/L	Prep Date: 10/2/2003	RunNo: 19240
Client ID:	Batch ID: 14296	TestNo: SM2540 C		Analysis Date: 10/2/2003	SeqNo: 361976

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Solids, Total Dissolved	ND	5.0									

Sample ID LCS-14296	SampType: LCS	TestCode: SOLIDS-TD_	Units: mg/L	Prep Date: 10/2/2003	RunNo: 19240
Client ID:	Batch ID: 14296	TestNo: SM2540 C		Analysis Date: 10/2/2003	SeqNo: 361977

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Solids, Total Dissolved	300.0	5.0	300	0	100	90	110	0	0		

Sample ID F03100043-001ADU	SampType: DUP	TestCode: SOLIDS-TD_	Units: mg/L	Prep Date: 10/2/2003	RunNo: 19240
Client ID:	Batch ID: 14296	TestNo: SM2540 C		Analysis Date: 10/2/2003	SeqNo: 361980

Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Solids, Total Dissolved	571.0	5.0	0	0	0	0	0	576	0.872	20	H

Qualifiers:

E	Value above quantitation range	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
ND	Not Detected at the Reporting Limit	R	RPD outside accepted recovery limits	S	Spike Recovery outside accepted recovery limits
U	Not Detected at the Reporting Limit				

INORGANIC ANALYSIS

62-550.310(1)

(PWS030)

LAB Submission Number: F03100040

Sample Identification: 1 Entry to Dist.

Parameter ID	Name	MCL	Sample Number	Analysis Result	Q	Units	Analytical Method	Analysis Date	MDL	LabID
1005	Arsenic	(0.05)	F03100040-001J	0.0020	U	mg/L	E200.7	10/8/03 1:59:00 PM	0.0020	E83079
1010	Barium	(2)	F03100040-001J	0.0038	I	mg/L	E200.7	10/8/03 1:59:00 PM	0.000074	E83079
1015	Cadmium	(0.005)	F03100040-001J	0.00024	U	mg/L	E200.7	10/8/03 1:59:00 PM	0.00024	E83079
1020	Chromium	(0.1)	F03100040-001J	0.00060	U	mg/L	E200.7	10/8/03 1:59:00 PM	0.00060	E83079
1024	Cyanide	(0.2)	F03100040-001M	0.0053	I	mg/L	E335.4	10/7/03 12:53:00 PM	0.0030	E83079
1025	Fluoride	(4)	F03100040-001L	0.091		mg/L	E300.0	10/1/03 9:14:21 PM	0.010	E83079
1030	Lead	(0.015)	F03100040-001J	0.00050	U	mg/L	SM3113 B	10/10/03	0.00050	E83079
1035	Mercury	(0.002)	F03100040-001J	0.000036	U	mg/L	E245.1	10/2/03	0.000036	E83079
1036	Nickel	(0.1)	F03100040-001J	0.0020	U	mg/L	E200.7	10/8/03 1:59:00 PM	0.0020	E83079
1040	Nitrate	(10)	F03100040-001L	0.16		mg/L	E300.0	10/1/03 9:14:21 PM	0.012	E83079
1041	Nitrite	(1)	F03100040-001L	0.0056	U	mg/L	E300.0	10/1/03 9:14:21 PM	0.0056	E83079
1045	Selenium	(0.05)	F03100040-001J	0.00079	U	mg/L	SM3113 B	10/13/03	0.00079	E83079
1052	Sodium	(160)	F03100040-001J	22		mg/L	E200.7	10/10/03 12:10:00 PM	0.23	E83079
1074	Antimony	(0.006)	F03100040-001J	0.00035	U	mg/L	SM3113 B	10/6/03	0.00035	E83079
1075	Beryllium	(0.004)	F03100040-001J	0.00012	U	mg/L	E200.7	10/8/03 1:59:00 PM	0.00012	E83079
1085	Thallium	(0.002)	F03100040-001J	0.00025	U	mg/L	E200.9	10/7/03	0.00025	E83079

Data Qualifier Code Key: I Analyte detected below quantitation limits U Not Detected at the Reporting Limit

Reporting Format 62-550.730(1)(b)
Effective Date: January 1995

PESTICIDE/PCB CHEMICAL ANALYSIS

62-550.310(2)C

(PWS029)

LAB Submission Number: F03100040

Sample Identification: I Entry to Dist.

Parameter ID	Name	MCL	Sample Number	Analysis Result	Q	Units	Analytical Method	Analysis Date	MDL	LabID
2005	Endrin	(2)	F03100040-001C	0.0080	U	µg/L	E508.1	10/7/03	0.0080	E83079
2010	Lindane	(0.2)	F03100040-001C	0.0060	U	µg/L	E508.1	10/7/03	0.0060	E83079
2015	Methoxychlor	(40)	F03100040-001C	0.0090	U	µg/L	E508.1	10/7/03	0.0090	E83079
2020	Toxaphene	(3)	F03100040-001C	0.10	U	µg/L	E508.1	10/7/03	0.10	E83079
2031	Dalapon	(200)	F03100040-001D	0.14	U	µg/L	E515.1	10/10/03	0.14	E83079
2032	Diquat	(20)	F03100040-001I	0.36	U	µg/L	E549.2	10/8/03	0.36	E83079
2033	Endothall	(100)	F03100040-001H	3.3	U	µg/L	E548.1	10/4/03 1:58:00 AM	3.3	E83079
2034	Glyphosate	(700)	F03100040-001G	2.9	U	µg/L	E547	10/2/03	2.9	E83079
2035	Di(2-ethylhexyl)adipate	(400)	F03100040-001E	0.23	U	µg/L	E525.2	10/7/03 10:12:00 AM	0.23	E83079
2036	Oxamyl (Vydate)	(200)	F03100040-001F	0.86	U	µg/L	E531.1	10/9/03	0.86	E83079
2037	Simazine	(4)	F03100040-001C	0.24	U	µg/L	E508.1	10/7/03	0.24	E83079
2039	Di(2-ethylhexyl)phthalate	(6)	F03100040-001E	0.50	I	µg/L	E525.2	10/7/03 10:12:00 AM	0.50	E83079
2040	Picloram	(500)	F03100040-001D	0.090	U	µg/L	E515.1	10/10/03	0.090	E83079
2041	Dinoseb	(7)	F03100040-001D	0.090	U	µg/L	E515.1	10/10/03	0.090	E83079
2042	Hexachlorocyclopentadiene	(50)	F03100040-001C	0.018	U	µg/L	E508.1	10/7/03	0.018	E83079
2046	Carbofuran	(40)	F03100040-001F	2.0	U	µg/L	E531.1	10/9/03	2.0	E83079
2050	Atrazine	(3)	F03100040-001C	0.13	U	µg/L	E508.1	10/7/03	0.13	E83079
2051	Alachlor	(2)	F03100040-001C	0.023	U	µg/L	E508.1	10/7/03	0.023	E83079
2065	Heptachlor	(0.4)	F03100040-001C	0.0080	U	µg/L	E508.1	10/7/03	0.0080	E83079
2067	Heptachlor Epoxide	(0.2)	F03100040-001C	0.0060	U	µg/L	E508.1	10/7/03	0.0060	E83079
2105	2,4-D	(70)	F03100040-001D	0.060	U	µg/L	E515.1	10/10/03	0.060	E83079
2110	2,4,5-TP (Silvex)	(50)	F03100040-001D	0.030	U	µg/L	E515.1	10/10/03	0.030	E83079
2274	Hexachlorobenzene	(1)	F03100040-001C	0.0080	U	µg/L	E508.1	10/7/03	0.0080	E83079
2306	Benzo(a)pyrene	(0.2)	F03100040-001E	0.078	U	µg/L	E525.2	10/7/03 10:12:00 AM	0.078	E83079
2326	Pentachlorophenol	(1)	F03100040-001D	0.030	U	µg/L	E515.1	10/10/03	0.030	E83079
2383	PCB	(0.5)	F03100040-001C	0.10	U	µg/L	E508.1	10/7/03	0.10	E83079
2931	Dibromochloropropane	(0.2)	F03100040-001B	0.0041	U	µg/L	E504.1	10/8/03	0.0041	E83079

Data Qualifier Code Key: I Analyte detected below quantitation limits U Not Detected at the Reporting Limit

Reporting Format 62-550.730(1)(b)
Effective Date: January 1995

PESTICIDE/PCB CHEMICAL ANALYSIS

62-550.310(2)C

(PWS029)

LAB Submission Number: F03100040

Sample Identification: 1 Entry to Dist.

Parameter ID	Name	MCL	Sample Number	Analysis Result	Q	Units	Analytical Method	Analysis Date	MDL	LabID
2946	Ethylene Dibromide	(.02)	F03100040-001B	0.0038	U	µg/L	E504.1	10/8/03	0.0038	E83079
2959	Chlordane	(2)	F03100040-001C	0.080	U	µg/L	E508.1	10/7/03	0.080	E83079

Data Qualifier Code Key:

I Analyte detected below quantitation limits

U Not Detected at the Reporting Limit

Reporting Format 62-550.730(1)(b)
Effective Date: January 1995

RADIOCHEMICAL ANALYSIS
62-550.310(5)

LAB Submission Number: F03100040
Sample Identification: I Entry to Dist.

Parameter ID	Name	MCL	Sample Number	Analysis Result	Q	Units	Analytical Method	Analysis Date	MDL	LabID
4000	Gross alpha		F03100040-001N	<0.50+/-0.4		pci/L	E900.0	10/15/03	0.50	E83033

Data Qualifier Code Key:

I Analyte detected below quantitation limits

U Not Detected at the Reporting Limit

Reporting Format 62-550.730(1)(b)
Effective Date: January 1995

SECONDARY CHEMICAL ANALYSIS

62-550.320

(PWS031)

LAB Submission Number: F03100040

Sample Identification: 1 Entry to Dist.

Parameter ID	Name	MCL	Sample Number	Analysis Result	Q	Units	Analytical Method	Analysis Date	MDL	LabID
1002	Aluminum	(0.2)	F03100040-001J	0.025	I	mg/L	E200.7	10/8/03 1:59:00 PM	0.012	E83079
1017	Chloride	(250)	F03100040-001L	49		mg/L	E300.0	10/1/03 9:14:21 PM	0.061	E83079
1022	Copper	(1)	F03100040-001J	0.0017	I	mg/L	E200.7	10/8/03 1:59:00 PM	0.00058	E83079
1025	Fluoride	(2.0)	F03100040-001L	0.091		mg/L	E300.0	10/1/03 9:14:21 PM	0.010	E83079
1028	Iron	(0.3)	F03100040-001J	0.029	I	mg/L	E200.7	10/8/03 1:59:00 PM	0.013	E83079
1032	Manganese	(0.05)	F03100040-001J	0.00053	I	mg/L	E200.7	10/8/03 1:59:00 PM	0.00038	E83079
1050	Silver	(0.1)	F03100040-001J	0.0014	U	mg/L	E200.7	10/8/03 1:59:00 PM	0.0014	E83079
1055	Sulfate	(250)	F03100040-001L	0.65		mg/L	E300.0	10/1/03 9:14:21 PM	0.058	E83079
1095	Zinc	(5)	F03100040-001J	0.0043	I	mg/L	E200.7	10/8/03 1:59:00 PM	0.0023	E83079
1905	Color	(15 color units)	F03100040-001K	5.0	U	Color Units	SM2120 B	10/1/03 4:45:00 PM	5.0	E83079
1920	Odor	(3 ton)	F03100040-001L	2.0		t.o.n.	SM2150B	10/1/03 4:45:00 PM	1.0	E83079
1925	pH	(6.5 - 8.5)	F03100040-001K	7.72		pH units	E150.1	10/1/03 4:34:00 PM		E83079
1930	Total Dissolved Solids	(500)	F03100040-001K	230		mg/L	SM2540 C	10/7/03	1.2	E83079
2905	Foaming Agents	(0.5)	F03100040-001K	0.050	I	mg/L	E425.1	10/2/03 4:47:00 PM	0.027	E83079

Data Qualifier Code Key: I Analyte detected below quantitation limits U Not Detected at the Reporting Limit

Reporting Format 62-550.730(1)(b)
Effective Date: January 1995

VOLATILE ORGANIC ANALYSIS

62-550.310(2)(b)

LAB Submission Number: F03100040

Sample Identification: 1 Entry to Dist.

Parameter ID	Name	MCL	Sample Number	Analysis Result	Q	Units	Analytical Method	Analysis Date	MDL	LabID
2378	1,2,4-trichlorobenzene	(70)	F03100040-001A	0.10	U	µg/L	E524.2	10/10/03	0.10	E83079
2380	Cis-1,2-dichloroethylene	(70)	F03100040-001A	0.11	U	µg/L	E524.2	10/10/03	0.11	E83079
2955	Xylenes (total)	(10,000)	F03100040-001A	0.13	U	µg/L	E524.2	10/10/03	0.13	E83079
2964	Dichloromethane	(5)	F03100040-001A	0.27	U	µg/L	E524.2	10/10/03	0.27	E83079
2968	o-Dichlorobenzene	(600)	F03100040-001A	0.070	U	µg/L	E524.2	10/10/03	0.070	E83079
2969	p-Dichlorobenzene	(75)	F03100040-001A	0.070	U	µg/L	E524.2	10/10/03	0.070	E83079
2976	Vinyl Chloride	(1)	F03100040-001A	0.17	U	µg/L	E524.2	10/10/03	0.17	E83079
2977	1,1-dichloroethylene	(7)	F03100040-001A	0.22	U	µg/L	E524.2	10/10/03	0.22	E83079
2979	Trans-1,2-dichloroethylene	(100)	F03100040-001A	0.13	U	µg/L	E524.2	10/10/03	0.13	E83079
2980	1,2-dichloroethane	(3)	F03100040-001A	0.13	U	µg/L	E524.2	10/10/03	0.13	E83079
2981	1,1,1-trichloroethane	(200)	F03100040-001A	0.080	U	µg/L	E524.2	10/10/03	0.080	E83079
2982	Carbon tetrachloride	(3)	F03100040-001A	0.12	U	µg/L	E524.2	10/10/03	0.12	E83079
2983	1,2-dichloropropane	(5)	F03100040-001A	0.090	U	µg/L	E524.2	10/10/03	0.090	E83079
2984	Trichloroethylene	(3)	F03100040-001A	0.14	U	µg/L	E524.2	10/10/03	0.14	E83079
2985	1,1,2-trichloroethane	(5)	F03100040-001A	0.080	U	µg/L	E524.2	10/10/03	0.080	E83079
2987	Tetrachloroethylene	(3)	F03100040-001A	0.090	U	µg/L	E524.2	10/10/03	0.090	E83079
2989	Monochlorobenzene	(100)	F03100040-001A	0.080	U	µg/L	E524.2	10/10/03	0.080	E83079
2990	Benzene	(1)	F03100040-001A	0.12	U	µg/L	E524.2	10/10/03	0.12	E83079
2991	Toluene	(1,000)	F03100040-001A	0.060	U	µg/L	E524.2	10/10/03	0.060	E83079
2992	Ethylbenzene	(700)	F03100040-001A	0.30	U	µg/L	E524.2	10/10/03	0.30	E83079
2996	Styrene	(100)	F03100040-001A	0.080	U	µg/L	E524.2	10/10/03	0.080	E83079

Data Qualifier Code Key: I Analyte detected below quantitation limits U Not Detected at the Reporting Limit

Reporting Format 62-550.730(1)(b)
Effective Date: January 1995

Florida Radiochemistry Services, Inc.

Contact: Michael J. Naumann
5456 Hoffner Ave., Suite 201 Orlando, FL 32812
Phone: (407) 382-7733 Fax: (407)382-7744
Certification I. D. # E83033

Work Order #: 0310047
Report Date: 10/16/03

Report to:

Elab, Inc.
8 East Tower Circle
Ormond Beach, FL 32174
Attention: Jamie Rexroat

I do hereby affirm that this record contains no willful misrepresentations and that this information given by me is true to the best of my knowledge and belief. I further certify that the methods and quality control measures used to produce these laboratory results were implemented in accordance with the requirements of this laboratory's certification and NELAC Standards.

Signed Michael J. Naumann Date 10-16-03
Michael J. Naumann - President

Florida Radiochemistry Services, Inc.

Sample Login

Client:	**Elab, Inc.**	**Date / Time Received**	**Work order #**
		10/03/03 12:30	**0310047**
Client Contact:	**Jamie Rexroat**		
Client P.O.	**03-1602**		
Project I.D.	**F03100040**		

Lab Sample I.D.	Client Sample I.D.	Sample Date/Time	Analysis Requested
0310047-01	F03100040-001	10/01/03 10:15	Gross Alpha

Analysis Results

Gross Alpha	**<0.5**
Error +/-	**0.4**
MDL	**0.5**
EPA Method	**900.0**
Prep Date	**10/14/03**
Analysis Date	**10/15/03**
Analyst Initials	**MJN**
Units	**pCi/l**

Florida Radiochemistry Services, Inc.

QA Page

Analyte	Sample #	Date Analyzed	Sample Result	Amount Spiked	Spike Result	Spike /Dup Result	Spike % Rec.	Spike Dup % Rpd
Gross Alpha	0310005-01	10/15/03	0.8	10.2	10.0	10.3	90	3.0

	Quality Control Limits
	% RPD
Gross Alpha	15.8

Quality Control Limits
% Rec.
65-125

ELAB, Inc.
8 East Tower Circle
Ormond Beach, FL 32174
(904)672-5668 ● FAX (904)673-4001
(INSTRUCTIONS ON BACK OF THIS FORM)

FOR LAB USE ONLY
Temp. of Contents: R01 °C (or Received on Ice, ROI)
Condition of Contents: _____
Condition of Seals: _____

FOR LAB USE ONLY
Submission No.

1. Client: (Company or Individual)
Plantation Bay
att: Nancy B.

Address: 150 Plantation Bay Cir.
City Ormond Beach State FL Zip Code 32174
Phone: ( ) 386-673-4161
Fax: ( )

2. Report to: (if different from above)
Address:
City State Zip Code
Phone: ( )
Fax: ( )

3. Client Project Name: Plantation Bay Updeyan
4. Client Project No.:
5. P.O. No.:
6. Custody Seal No.:
7. Sampled By: Nancy Carpenter
8. Shipping Method:

Water Sample Codes (for Item 13)
DW = Drinking Water
GW = Ground Water
SW = Surface Water
PW = Processed Water
WW = Waste Water

Container Codes (for Item 16)
V = VOA vial
G = glass
P = plastic
M = micro bag/cup
O = other

18. Report Type:
X Routine
Standard QC
Datapackage

19. Turnaround Time
X Standard
Rush : __/__/__

Preservative Codes (for Item 15)
C = Cool Only
H = Hydrochloric Acid
M = Monochloroacetic Acid
N = Nitric Acid
OH = Sodium Hydroxide
S = Sulfuric Acid
T = Sodium Thiosulfate

Item	9. Sample ID or No.	10. Sample Description	11. Date	11. Time	12. Comp.	12. Grab	13. Water (Codes)	13. Air	13. Soil	13. Sludge	13. Other	No. of Containers	Analyses Requested	20 REMARK	LAB USE ONLY LAB SAMPLE NO.
14. 15. Preservatives															
16. Containers							P								
17.															
1	1	Entry point to Dist.	10/2/03	12:05		✓	DW					1			
2															
3															
4															
5															
6															
7															
8															
9															
10															

21. RELINQUISHED BY	DATE	TIME	22. RECEIVED BY	DATE	TIME
1 Nancy Carpenter	10/2/03	2:50		10/2/03	1450
2					
3					
4					

FOR LAB USE ONLY
Sampling Fee: _____ Hrs.
Equipment Rental Fee: _____
Profile No.:
Quote No.:

DISTRIBUTION: White with report; Blue, Green, Yellow to labs; Gold to submitter

Revised: 1/99

ELAB, Inc.
8 East Tower Circle
Ormond Beach, FL 32174
(904)672-5668 ● FAX (904)673-4001
(INSTRUCTIONS ON BACK OF THIS FORM)

FOR LAB USE ONLY
Temp. of Contents: 1.0 °C (or Received on Ice, ROI) Condition of Contents: _____ Condition of Seals: _____

FOR LAB USE ONLY
Submission No. F-03100040

1. Client: (Company or Individual)
Plantation Bay
att: Nancy B.

Address: 100 Plantation Bay Drive
City Ormond Beach State FL Zip Code 32174
Phone: ( ) 386-673-4161
Fax: ( )

2. Report to: (if different from above)
Address:
City State Zip Code
Phone: ( )
Fax: ( )

18. Report Type:
[X] Routine
[ ] Standard QC
[ ] Datapackage

19. Turnaround Time
[X] Standard
[ ] Rush : / /

3. Client Project Name: Plantation Bay Utilities
4. Client Project No.:
5. P.O. No.:
6. Custody Seal No.:
7. Sampled By: Steven C Reference
8. Shipping Method:

Water Sample Codes (for Item 13)	Container Codes (for Item 16)
DW = Drinking Water	V = VOA vial
GW = Ground Water	G = glass
SW = Surface Water	P = plastic
PW = Processed Water	M = micro bag/cup
WW = Waste Water	O = other

Preservative Codes (for Item 15)
C = Cool Only
H = Hydrochloric Acid
M = Monochloroacetic Acid
N = Nitric Acid
OH = Sodium Hydroxide
S = Sulfuric Acid
T = Sodium Thiosulfate

Item	9. Sample ID or No.	10. Sample Description	11. Date	11. Time	12. Comp.	12. Grab	13. Water (Codes)	13. Air	13. Soil	13. Sludge	13. Other	14. No. of Containers	17. Analyses Requested: Coliform Water	17. 3 types Trihal	15. Preservatives	16. Containers	20 REMARK	LAB USE ONLY LAB SAMPLE NO.
1	1	Entry to Dist	10/1/03	10:15		✓	DW					6	6			G		
2	1	Entry to Dist	10/1/03	10:15		✓	DW					6		6		P		
3	1	Entry to Dist	10/1/03	10:15		✓	DW					9			9	✓		
4																		
5																		
6																		
7																		
8																		
9																		
10																		

21. RELINQUISHED BY	DATE	TIME	22. RECEIVED BY	DATE	TIME
1 Steven C Reference	10/1/03	2:35		10/1/03	14:35
2					
3					
4					

FOR LAB USE ONLY
Sampling Fee: _____ Hrs.
Equipment Rental Fee: _____
Profile No.: Quote No.:

DISTRIBUTION: White with report; Blue, Green, Yellow to labs; Gold to submitter

Revised: 1/99

TE OI FLORIDA
NVIR ONMENTAL REGULATION

2004 Water

LA IT OPERATION REPORT

E11 _____ NAME OF PLANT: Plantation Bay COUNTY: FLAGLER
D _____ UTILITY COMPANY: Plantation Bay I.D. NO.: _____
_____ MONTH: January YEAR: 2004
_____ TOTAL METERED SERVICES AT END OF MONTH: _____

DOSAGES (P. P. M.)						CHEMICAL AND PHYSICAL RESULTS (P. P. M.)																				
						RAW								SETTLED					FINISHED								
								HARDNESS							AS CaCO3											
CHLORINE PRE	CHLORINE, POST	OTHER: FLUORIDE, AS F				PH	M O. ALK.	TOTAL	CALCIUM	MAGNESIUM	CO2 CALC	IRON, AS FE	COLOR, UNITS	PH	P ALK.	M ALK.	TOTAL HDNS.	CA HDNS.	PH	P ALK.	M ALK.	TOTAL HDNS.	CALCIUM HDNS.	RESIDUAL CHLORINE	COLOR	FLUORIDE, AS F	R. T.
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
	1.5						6.7	393						10.0					7.5			103	80	3/5	5		.9		
	1.5						6.8	380						9.8					7.5			103	80	3/0	4		.8		
	1.5						6.7	386						10.0					7.6			103	80	3/5	4		1.0		
	1.5						6.7	360						10.0					7.4			103	80	3/5	4		1.2		
	1.5						6.7	360						10.0					7.5			103	80	3/5	5		1.0		
	1.5						6.7	380						10.0					7.3			103	80	3/5	6		1.1		
	1.5						6.7	393						10.0					7.4			103	80	3/2	5		.9		
	1.5						6.8	393						10.0					7.2			103	80	3/5	4		.8		
	1.5						6.8	393						10.0					7.4			120	103	3/5	4		.7		
	1.5						6.7	380						9.8					7.6			120	103	3/5	5		.6		
	1.5						6.7	380						10.0					7.4			103	80	3/5	4		.7		
	1.5						6.7	386						10.0					7.2			103	80	3/5	4		.9		
	1.5						6.7	393						10.0					7.5			103	80	3/2	5		1.0		
	1.5						6.8	393						9.8					7.6			120	100	3/0	5		1.2		
	1.5						6.7	386						10.0					7.4			120	100	3/3	4		1.0		
	1.5						6.7	393						10.0					7.0			103	80	3/0	4		.8		
	1.5						6.7	386						10.0					7.2			120	100	3/5	5		.6		
	1.5						6.7	360						10.0					7.4			120	100	3/0	5		.5		
	1.5						6.7	386						9.8					7.5			103	80	3/5	6		.8		
	1.5						6.7	393						10.0					7.6			120	100	3/0	5		.5		
	1.5						6.7	380						10.0					7.8			120	100	2/8	5		.7		
	1.5						6.7	376						10.0					7.5			120	100	3/2	4		.8		
	1.5						6.8	386						10.0					7.3			103	80	3/0	5		.9		
	1.5						6.8	393						10.0					7.2			120	100	3/5	5		.7		
	1.5						6.7	376						10.0					7.4			120	100	3/5	5		.8		
	1.5						6.7	380						9.8					7.5			120	100	3/5	4		1.1		
	1.5						6.7	380						10.0					7.6			137	117	3/2	4		1.0		
	1.5						6.7	393						10.0					7.5			120	100	3/5	4		1.0		
	1.5						6.7	393						10.0					7.7			137	117	3/0	4		.8		
	1.5						6.7	376						10.0					7.5			120	100	3/5	5		.7		
	1.5						6.7	380						10.0					7.2			103	80	3/0	4		.9		
							8&P.3	1185/1						309					30.6	8	8	8	14.2				26.6		
							6.8	393						10.0					7.8			137	117	3.5	6		1.2		
							6.7	360						9.8					7.0			103	80	3.5	4		.5		
							6.7	382						10.0					7.4			113	9.2	3.3	5		.9		

2004

DEPARTMENT

WATER TREATMENT

CHIEF OPERATOR SIGNATURE: G Wethwell
HOW MANY OTHER OPERATORS? C02679
NOTE: GIVE REMARKS ON PLANT OPERATION ON REVERSE SIDE.

LIST OPERATORS' NAMES: Glenn Weth
WETHERELL TREATMENT SYS.
600 Hull Road
ORMOND BEACH, FLORIDA 32174

DATE	HRS. PLANT OPERATION	TOTAL RAW WATER PUMPED (THOU. OF GALS.)	TOTAL WATER TREATED LEAVING PLANT (THOU. OF GALS.)	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS: TOTAL	MAXIMUM	MINIMUM	FILTER DATA: TOTAL WASH WATER (THOU. OF GALS.)	CHEMICALS: POUNDS USED: LIME	CHLORINE. PRE	CHLORINE. POST	FLUORIDE CHEMICAL	OTHER			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1	3	.171	.148					310	84	20					
2	3	.189	.156					322	64	20					
3	1	.186	.150					306	42	32					
4	1	.177	.152					310	22	20					
5	3	.162	.146					298	2	20					
6	3	.145	.151					304	138	20					
7	3	.151	.143					286	118	20					
8	3	.178	.147					294	98	20					
9	3	.171	.156					320	78	20					
10	1	.166	.160					326	56	22					
11	1	.158	.149					302	34	22					
12	3	.175	.170					340	14	20					
13	3	.196	.191					394	138	26					
14	3	.206	.196					404	111	27					
15	3	.171	.152					306	90	21					
16	3	.178	.166					322	76	24					
17	1	.169	.140					280	44	22					
18	1	.181	.152					306	20	24					
19	3	.174	.131					264	148	22					
20	3	.139	.148					288	124	24					
21	3	.151	.164					312	99	25					
22	3	.196	.173					334	73	26					
23	3	.182	.156					314	53	20					
24	1	.173	.148					304	33	20					
25	1	.164	.162					328	11	22					
26	3	.193	.157					314	141	20					
27	3	.197	.154					308	120	21					
28	3	.209	.163					332	98	22					
29	3	.183	.152					304	78	20					
30	3	.157	.148					294	58	20					
31	1	.130	.134					262	37	21					
TOTAL	75	5372	4815					9788	2342	673					
MAX.	3	.209	.196					404	148	27					
MIN.	1	.139	.131					262	2	20					
AVERAGE	2	.173	.155					316	74	22					

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

See page 4 for instructions.

I. General Information for the Month/Year of: February 2004

A. Public Water System (PWS) Information

PWS Name: Plantation Bay Utilities			PWS Identification Number: 2184251
PWS Type: [X] Community [ ] Non-Transient Non-Community [ ] Transient Non-Community [ ] Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: Plantation Bay Utilities			
Contact Person: Glenn Wetherell		Contact Person's Title: Operator	
Contact Person's Mailing Address: 600 Hull Road		City: Ormond Beach	State: Fla. Zip Code: 32174
Contact Person's Telephone Number: 386-673-4161		Contact Person's Fax Number: 386-6737237	
Contact Person's E-Mail Address:			

B. Water Treatment Plant Information

Plant Name: Plantation Bay Utilities			Plant Telephone Number: 386-437-9185
Plant Address: 100 Plantation Bay Drive		City: Ormond Beach	State: Fl. Zip Code: 32174
Type of Water Treated by Plant: [X] Raw Ground Water [ ] Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 756,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): 1 mg		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	Glenn Wetherell	C	2679	7 day
Other Operators				

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 retain these additional operations records at the plant site for at least ten years and to make them available for review upon request.

Glenn Wetherell — Signature and Date

Glenn Wetherell — Printed or Typed Name

CO 2679 — License Number

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

PWS Identification Number: 2184251 | Plant Name: Plantation Bay Utilities

III. Daily Data for the Month/Year of: January 2004

Means of Achieving Four-Log Virus Inactivation/Removal: * ☒ Free Chlorine ☐ Chlorine Dioxide ☐ Ozone ☐ Combined Chlorine (Chloramines)
☐ Ultraviolet Radiation ☐ Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide

Day of the Month	Hours Plant Operated	Net Quantity of Water Produced (gallons)	Peak Hourly Flow Rate (gpm)	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Hourly Flow (mg/L)	Disinfectant Contact Time (T) During Peak Hourly Flow (minutes)	Lowest CT Provided Before or at First Customer During Peak Hourly Flow (mg-min/L)	Temp of Water (°C)	pH of Water Sample	Minimum CT Required for Virus Inactivation (mg-min/L)	Lowest Operating UV Dose (mJ/cm²)	Minimum UV Dose Required for Virus Inactivation (mJ/cm²)	Lowest Residual Disinfectant Concentration in Remote Portion of Distribution System (mg/L)	Emergency or Abnormal Operating Conditions, Repairs or Maintenance Work that Involves Taking Water System Components Out of Operation, etc.
1	24	142,000										.8	
2	24	135,000										.7	
3	24	171,000										.8	
4	24	162,000										.9	
5	24	158,000										.9	
6	24	153,000										1.2	
7	24	167,000										1.1	
8	24	174,000										1.3	
9	24	160,000										1.0	
10	24	184,000										1.2	
11	24	171,000										1.4	
12	24	140,000										1.5	
13	24	137,000										1.4	
14	24	142,000										1.3	
15	24	148,000										1.0	
16	24	139,000										.9	
17	24	146,000										1.2	
18	24	136,000										1.3	
19	24	121,000										1.5	
20	24	153,000										1.2	
21	24	164,000										.8	
22	24	162,000										1.1	
23	24	158,000										1.0	
24	24	146,000										1.3	
25	24	133,000										1.1	
26	24	153,000										.8	
27	24	142,000										.9	
28	24	136,000										.9	
29	24	143,000										1.0	
30													
31													
Total		4384000											
Average		151,000											
Maximum		184000											

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

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

See page 4 for instructions.

I. General Information for the Month/Year of: March 2004

A. Public Water System (PWS) Information

PWS Name: Plantation Bay Utilities	PWS Identification Number: 2184251
PWS Type: [x] Community [ ] Non-Transient Non-Community [ ] Transient Non-Community [ ] Consecutive	
Number of Service Connections at End of Month: 1037	Total Population Served at End of Month: 2074
PWS Owner: Plantation Bay Utilities	
Contact Person: Glenn Wetherell	Contact Person's Title: Operator
Contact Person's Mailing Address: 600 Hull Road	City: Ormond Beach State: Florid Zip Code: 32174
Contact Person's Telephone Number: 386-673-4161	Contact Person's Fax Number: 386-673-7237
Contact Person's E-Mail Address: WTSSALES@AOL.COM	

B. Water Treatment Plant Information

Plant Name: Plantation Bay Utilities		Plant Telephone Number: 386-437-9185
Plant Address: 100 Plantation Bay Drive	City: Ormond Beach	State: Fl. Zip Code: 32174
Type of Water Treated by Plant: [x] Raw Ground Water [ ] Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 756,000 GPD		
Plant Category (per subsection 62-699.310(4), F.A.C.): one		Plant Class (per subsection 62-699.310(4), F.A.C.): C

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Glenn Wetherell	C	2679	7 days
Other Operators:				

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.

Glenn Wetherell
Signature and Date

Glenn Wetherell
Printed or Typed Name

CO 2679
License Number

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

PWS Identification Number: 2184251 | Plant Name: Plantation Bay

III. Daily Data for the Month/Year of: March 2004

Means of Achieving Four-Log Virus Inactivation/Removal: * ☒ Free Chlorine ☐ Chlorine Dioxide ☐ Ozone ☐ Combined Chlorine (Chloramines) ☐ Ultraviolet Radiation ☐ Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide

Day of the Month	[redacted]	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	CT Calculations or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable: Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	CT Calculations: Disinfectant Contact Time (T) in Minutes Measured During Peak Flow, minutes	CT Calculations: Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	CT Calculations: Temp. of Water, °C	CT Calculations: pH of Water, if Applicable	CT Calculations: Minimum CT Required, mg-min/L	UV Dose: Lowest Operating UV Dose, mW-sec/cm²	UV Dose: Minimum UV Dose Required, mW-sec/cm²	Lowest Residual Disinfectant Concentration in Remote Part of Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Component Out of Operation
1	X	24	139000										.8	
2	X	24	164000										.9	
3	X	24	162000										.8	
4	X	24	165000										1.2	
5	X	24	158000										1.0	
6	X	24	164000										.9	
7	X	24	153000										1.1	
8	X	24	144000										1.2	
9	X	24	183000										1.4	
10	X	24	174000										1.2	
11	X	24	186000										1.0	
12	X	24	177000										.9	
13	X	24	182000										.9	
14	X	24	174000										.8	
15	X	24	186000										1.2	
16	X	24	173000										1.1	
17	X	24	159000										1.2	
18	X	24	168000										1.3	
19	X	24	165000										1.1	
20	X	24	172000										.9	
21	X	24	155000										.8	
22	X	24	160000										1.0	
23	X	24	158000										.8	
24	X	24	169000										1.0	
25	X	24	157000										1.4	
26	X	24	140000										1.2	
27	X	24	138000										1.0	
28	X	24	175000										1.1	
29	X	24	245000										1.2	
30	X	24	141000										1.1	
31	X	24	372000										.7	
Total			5358000											
Average			172000											
Maximum			245000											

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

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

See page 4 for instructions.

I. General Information for the Month/Year of: April 2004

A. Public Water System (PWS) Information

PWS Name: Plantation Bay Utilities			PWS Identification Number: 2184251
PWS Type: [X] Community [ ] Non-Transient Non-Community [ ] Transient Non-Community [ ] Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: Plantation Bay Utilities			
Contact Person: Glenn Wetherell		Contact Person's Title: Operator	
Contact Person's Mailing Address: 600 Hull Road	City: Ormond Beach	State: Fla.	Zip Code: 32174
Contact Person's Telephone Number: 386-673-4161	Contact Person's Fax Number: 386-6737237		
Contact Person's E-Mail Address:			

B. Water Treatment Plant Information

Plant Name: Plantation Bay Utilities			Plant Telephone Number: 386-437-9185
Plant Address: 100 Plantation Bay Drive	City: Ormond Beach	State: Fl.	Zip Code: 32174
Type of Water Treated by Plant: [X] Raw Ground Water [ ] Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 756,000 GPD			
Plant Category (per subsection 62-699.310(4), F.A.C.): one		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Glenn Wetherell	C	2679	7 Days
Other Operators:				

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 retain these additional operations records at the plant site for at least ten years and to make them available for review upon request.

Glenn Wetherell — Signature and Date

Glenn Wetherell — Printed or Typed Name

CO 2679 — License Number

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

PWS Identification Number: 2184251 | Plant Name: Plantation Bay Utilities

III. Daily Data for the Month/Year of: April 2004

Means of Achieving Four-Log Virus Inactivation/Removal: * ☐ Free Chlorine ☐ Chlorine Dioxide ☐ Ozone ☐ Combined Chlorine (Chloramines) ☐ Ultraviolet Radiation ☐ Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide

Day of the Month	[redacted]	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										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
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant* Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT* Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm²	Minimum UV Dose* Required, mW-sec/cm²			
1	X	24	189000											1.0	
2	X	24	192000											.8	
3	X	24	188000											.9	
4	X	24	185000											.8	
5	X	24	193000											.7	
6	X	24	187000											.6	
7	X	24	191000											.6	
8	X	24	188000											.8	
9	X	24	179000											.7	
10	X	24	194000											.6	
11	X	24	180000											.8	
12	X	24	173000											.5	
13	X	24	187000											.7	
14	X	24	183000											.7	
15	X	24	197000											.5	
16	X	24	170000											.6	
17	X	24	193000											.9	
18	X	24	179000											.8	
19	X	24	219000											.7	
20	X	24	208000											.6	
21	X	24	203000											.5	
22	X	24	185000											.8	
23	X	24	187000											.7	
24	X	24	181000											.7	
25	X	24	203000											.9	
26	X	24	190000											1.2	
27	X	24	176000											.8	
28	X	24	193000											.6	
29	X	24	210000											.8	
30	X	24	206000											.7	
31	X	EDW													
Total			5,709,000												
Average			190,000												
Maximum			219,000												

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

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

See page 4 for instructions.

I. General Information for the Month/Year of: May 2004

A. Public Water System (PWS) Information

PWS Name: Plantation Bay Utilities	PWS Identification Number: 2184251
PWS Type: [x] Community [ ] Non-Transient Non-Community [ ] Transient Non-Community [ ] Consecutive	
Number of Service Connections at End of Month: 1037	Total Population Served at End of Month: 2074
PWS Owner: Plantation Bay Utilities	
Contact Person: Glenn Wetherell	Contact Person's Title: Operator
Contact Person's Mailing Address: 600 Hull Road	City: Ormond Beach State: Florida Zip Code: 32174
Contact Person's Telephone Number: 386-673-4161	Contact Person's Fax Number: 386-673-7237
Contact Person's E-Mail Address: WTSSALES@AOL.COM	

B. Water Treatment Plant Information

Plant Name: Plantation Bay Utilities			Plant Telephone Number: 386-437-9185
Plant Address: 100 Plantation Bay Drive	City: Ormond Beach	State: Fl.	Zip Code: 32174
Type of Water Treated by Plant: [x] Raw Ground Water [ ] Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 756,000 GPD			
Plant Category (per subsection 62-699.310(4), F.A.C.): one		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Glenn Wetherell	C	2679	7 days
Other Operators:				

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.

Glenn Wetherell — Signature and Date

Glenn Wetherell — Printed or Typed Name

CO 2679 — License Number

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

PWS Identification Number: 2184251 | Plant Name: Plantation Bay Utilities

III. Daily Data for the Month/Year of: May 2004

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

☐ Ultraviolet Radiation ☐ Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide

Day of the Month	[redacted]	Plant in Operation	Net Quantity of Finished Water Produced (gal)	Peak Flow Rate (gpd)	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow (mg/L)	Disinfectant Contact Time (T) During Peak Flow (minutes)	CT Calculations: Measured Power Pump Capacity Peak Flow (mgd/L)	CT Calculations: Pump Capacity Before or at First Customer During Peak Flow (mgd/L)	CT Calculations: Ratio of Water Produced to Pump Capacity	CT Calculations: CT of Water Produced Applicable	CT Calculations: Minimum CT Required (mg/min/L)	UV Dose: Lowest Operating UV Dose mW-sec/cm²	UV Dose: Minimum UV Dose Required mW-sec/cm²	Lowest Residual Disinfectant Concentration in Remotest Part of Distribution System mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	184,000											.8	
2	X	24	152,000											.7	
3	X	24	135,000											.8	
4	X	24	119,000											.9	
5	X	24	102,000											.5	
6	X	24	106,000											.6	
7	X	24	107,000											.8	
8	X	24	112,000											.7	
9	X	24	116,000											.9	
10	X	24	111,000											1.0	
11	X	24	122,000											1.1	
12	X	24	119,000											1.2	
13	X	24	124,000											.8	
14	X	24	184,000											.7	
15	X	24	206,000											.5	
16	X	24	209,000											.6	
17	X	24	207,000											.5	
18	X	24	208,000											.6	
19	X	24	202,000											.7	
20	X	24	194,000											.6	
21	X	24	183,000											.5	
22	X	24	211,000											.8	
23	X	24	231,000											.9	
24	X	24	204,000											.6	
25	X	24	197,000											.6	
26	X	24	186,000											.7	
27	X	24	154,000											.8	
28	X	24	152,000											.7	
29	X	24	177,000											.6	
30	X	24	220,000											.7	
31	X	24	234,000											.7	
Total			5168,000												
Average			167,000												
Maximum			234,000												

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

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

See page 4 for instructions.

I. General Information for the Month/Year of: June / 2004

A. Public Water System (PWS) Information

PWS Name: Plantation Bay Utilities		PWS Identification Number: 2184251
PWS Type: [x] Community [ ] Non-Transient Non-Community [ ] Transient Non-Community [ ] Consecutive		
Number of Service Connections at End of Month: 1037	Total Population Served at End of Month: 2074	
PWS Owner: Plantation Bay Utilities		
Contact Person: Glenn Wetherell	Contact Person's Title: Operator	
Contact Person's Mailing Address: 600 Hull Road	City: Ormond Beach	State: Florida Zip Code: 32174
Contact Person's Telephone Number: 386-673-4161	Contact Person's Fax Number: 386-673-7237	
Contact Person's E-Mail Address: WTSSALES@AOL.COM		

B. Water Treatment Plant Information

Plant Name: Plantation Bay Utilities		Plant Telephone Number: 386-437-9185	
Plant Address: 100 Plantation Bay Drive	City: Ormond Beach	State: Fl.	Zip Code: 32174
Type of Water Treated by Plant: [x] Raw Ground Water [ ] Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 756,000 GPD			
Plant Category (per subsection 62-699.310(4), F.A.C.): one	Plant Class (per subsection 62-699.310(4), F.A.C.): C		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Glenn Wetherell	C	2679	7 days
Other Operators:				

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.

Glenn Wetherell — Signature and Date

Glenn Wetherell — Printed or Typed Name

CO 2679 — License Number

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER ONLY [illegible]

PWS Identification Number: 2184251 | Plant Name: Plantation Bay Utilities

III. Daily Data for the Month/Year of [redacted]

Means of Achieving Four-Log Virus Inactivation/Removal: * ☐ Free Chlorine ☐ Chlorine Dioxide ☐ Ozone ☐ Combined Chlorine (Chloramines)
☐ Ultraviolet Radiation ☐ Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide

Day of the Month	[redacted]	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable*: Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) Used for CT Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	UV Dose: Lowest Operating UV Dose, mW-sec/cm²	UV Dose: Minimum UV Dose Required, mW-sec/cm²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involved Taking Water System Components Out of Operation
1	X	24	227000										.9	
2	X	24	203000										.7	
3	X	24	251000										.8	
4	X	24	186000										.6	
5	X	24	179000										.8	
6	X	24	185000										.6	
7	X	24	103000										.6	
8	X	24	97000										.7	
9	X	24	89000										.7	
10	X	24	101000										.6	
11	X	24	138000										1.0	
12	X	24	148000										.9	
13	X	24	153000										.8	
14	X	24	160000										.8	
15	X	24	155000										.7	
16	X	24	158000										.9	
17	X	24	161000										.8	
18	X	24	159000										.8	
19	X	24	162000										1.0	
20	X	24	157000										.8	
21	X	24	149000										.9	
22	X	24	162000										.7	
23	X	24	161000										.6	
24	X	24	165000										.6	
25	X	24	159000										.7	
26	X	24	171000										.7	
27	X	—	159000										.5	
28	X	24	166000										.7	
29	X	24	151000										.6	
30	X	24	173000										.7	
31														
Total			4788000											
Average			160000											
Maximum			251000											

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

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

See page 4 for instructions.

I. General Information for the Month/Year of: July 2004

A. Public Water System (PWS) Information

PWS Name: Plantation Bay Utilities			PWS Identification Number: 2184251
PWS Type: [x] Community [ ] Non-Transient Non-Community [ ] Transient Non-Community [ ] Consecutive			
Number of Service Connections at End of Month: 1037		Total Population Served at End of Month: 2074	
PWS Owner: Plantation Bay Utilities			
Contact Person: Glenn Wetherell		Contact Person's Title: Operator	
Contact Person's Mailing Address: 600 Hull Road	City: Ormond Beach	State: Florida	Zip Code: 32174
Contact Person's Telephone Number: 386-673-4161		Contact Person's Fax Number: 386-673-7237	
Contact Person's E-Mail Address: WTSSALES@AOL.COM			

B. Water Treatment Plant Information

Plant Name: Plantation Bay Utilities			Plant Telephone Number: 386-437-9185
Plant Address: 100 Plantation Bay Drive	City: Ormond Beach	State: Fl.	Zip Code: 32174
Type of Water Treated by Plant: [x] Raw Ground Water [ ] Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 756,000 GPD			
Plant Category (per subsection 62-699.310(4), F.A.C.): one		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Glenn Wetherell	C	2679	7 days
Other Operators:				

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.

Signature and Date

Glenn Wetherell
Printed or Typed Name

CO 2679
License Number

Identification Number: 2184251 | Plant Name: Plantation Bay Utilities

III. Daily Data for the Month/Year of: July 2004

Means of Achieving Four-Log Virus Inactivation/Removal: * ☐ Free Chlorine ☐ Chlorine Dioxide ☐ Ozone ☐ Combined Chlorine (Chloramines)
☐ Ultraviolet Radiation ☐ Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide

Day of the Month	[redacted]	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable: *									Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work Involved Taking Water System Components Out of Operation
					CT Calculations						UV Dose				
					Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW sec/cm²	Minimum UV Dose Required, mW sec/cm²		
1	X	24	163000										.8	
2	X	24	178000										.7	
3	X	24	162000										.6	
4	X	24	153000										.8	
5	X	24	146000										.7	
6	X	24	138000										.7	
7	X	24	142000										.6	
8	X	24	151000										.6	
9	X	24	153000										.7	
10	X	24	141000										.5	
11	X	24	148000										.6	
12	X	24	139000										.5	
13	X	24	155000										.5	
14	X	24	148000										.6	
15	X	24	156000										.7	
16	X	24	146000										.8	
17	X	24	158000										.5	
18	X	24	143000										.5	
19	X	24	152000										.6	
20	X	24	160000										.7	
21	X	24	148000										.7	
22	X	24	161000										.6	
23	X	24	148000										.6	
24	X	24	153000										.7	
25	X	24	129000										.5	
26	X	24	136000										.6	
27	X	24	140000										.5	
28	X	24	156000										.7	
29	X	24	143000										.6	
30	X	24	189000										.5	
31	X	24	159000										.5	
Total			4694000											
Average			151000											
Maximum			189000											

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

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

See page 4 for instructions.

I. General Information for the Month/Year of: August 2004

A. Public Water System (PWS) Information

PWS Name: Plantation Bay Utilities			PWS Identification Number: 2184251
PWS Type: [X] Community [ ] Non-Transient Non-Community [ ] Transient Non-Community [ ] Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: Plantation Bay Utilities			
Contact Person: Glenn Wetherell		Contact Person's Title: Operator	
Contact Person's Mailing Address: 600 Hull Road		City: Ormond Beach	State: Fla. Zip Code: 32174
Contact Person's Telephone Number: 386-673-4161		Contact Person's Fax Number: 386-6737237	
Contact Person's E-Mail Address:			

B. Water Treatment Plant Information

Plant Name: Plantation Bay Utilities			Plant Telephone Number: 386-437-9185
Plant Address: 100 Plantation Bay Drive		City: Ormond Beach	State: Fl. Zip Code: 32174
Type of Water Treated by Plant: [X] Raw Ground Water [ ] Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 756,000 MPD			
Plant Category (per subsection 62-699.310(4), F.A.C.): one			Plant Class (per subsection 62-699.310(4), F.A.C.): c

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	Glenn Wetherell	C	2679	
Other Operator				

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 retain these additional operations records at the plant site for at least ten years and to make them available for review upon request.

Glenn Wetherell

Signature and Date

Glenn Wetherell

Printed or Typed Name

CO 2679

License Number

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

PWS Identification Number: 2184257 | Plant Name: Plantation Bay

III. Daily Data for the Month/Year of: August 2004

Means of Achieving Four-Log Virus Inactivation/Removal: *) ☐ Free Chlorine ☐ Chlorine Dioxide ☐ Ozone ☐ Combined Chlorine (Chloramines)
☐ Ultraviolet Radiation ☐ Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide

Day of the Month	[redacted]	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*											
				CT Calculations							UV Dose			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 Component Out of Operation
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm²	Minimum UV Dose Required, mW-sec/cm²		
1	X	24	143000										.7	
2	X	24	152000										.6	
3	X	24	141000										.6	
4	X	24	156000										.5	
5	X	24	152000										.7	
6	X	24	153000										.8	
7	X	24	183000										.5	
8	X	24	113000										.6	
9	X	24	119000										.7	
10	X	24	207000										.6	
11	X	24	263000										.5	
12	X	24	136000										.6	
13	X	24	141000										.6	
14	X	24	139000										.5	
15	X	24	133000										.6	
16	X	24	154000										.5	
17	X	24	162000										.5	
18	X	24	137000										.6	
19	X	24	146000										.5	
20	X	24	133000										.5	
21	X	24	138000										.6	
22	X	24	141000										.6	
23	X	24	132000										.6	
24	X	24	138000										.7	
25	X	24	133000										.8	
26	X	24	142000										1.0	
27	X	24	136000										.7	
28	X	24	133000										1.0	
29	X	24	131000										.9	
30	X	24	126000										.9	
31	X	24	134000										.8	
Total			4547000											
Average			147000											
Maximum			263000											

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

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

See page 4 for instructions.

I. General Information for the Month/Year of: September 2004

A. Public Water System (PWS) Information

PWS Name: Plantation Bay Utilities	PWS Identification Number: 2184251
PWS Type: [x] Community [ ] Non-Transient Non-Community [ ] Transient Non-Community [ ] Consecutive	
Number of Service Connections at End of Month: 1037	Total Population Served at End of Month: 2074
PWS Owner: Plantation Bay Utilities	
Contact Person: Glenn Wetherell	Contact Person's Title: Operator
Contact Person's Mailing Address: 600 Hull Road	City: Ormond Beach State: Florida Zip Code: 32174
Contact Person's Telephone Number: 386-673-4161	Contact Person's Fax Number: 386-673-7237
Contact Person's E-Mail Address: WTSSALES@AOL.COM	

B. Water Treatment Plant Information

Plant Name: Plantation Bay Utilities			Plant Telephone Number: 386-437-9185
Plant Address: 100 Plantation Bay Drive	City: Ormond Beach	State: Fl.	Zip Code: 32174
Type of Water Treated by Plant: [x] Raw Ground Water [ ] Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 756,000 GPD			
Plant Category (per subsection 62-699.310(4), F.A.C.): one		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Glenn Wetherell	C	2679	7 days
Other Operators:				

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.

Glenn Wetherell

Signature and Date

Glenn Wetherell

Printed or Typed Name

CO 2679

License Number

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

PWS Identification Number: 2184251 | Plant Name: Plantation Bay

III. Daily Data for the Month/Year of: September 2004

Means of Achieving Four-Log Virus Inactivation/Removal: * ☐ Free Chlorine ☐ Chlorine Dioxide ☐ Ozone ☐ Combined Chlorine (Chloramines)
☐ Ultraviolet Radiation ☐ Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide

Day of the Month	[redacted]	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations or UV Dose to Document 4-Log Virus Inactivation, if Applicable: CT Calculations: Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	UV Dose: Lowest Operating UV Dose, mW-sec/cm²	Minimum UV Dose Required, mW-sec/cm²	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
1	X	24	156000										.8	
2	X	24	138000										.6	
3	X	24	129000										.8	
4	X	24	111000										.6	
5	X	24	115000										.7	
6	X	24	123000										.6	
7	X	24	155000										.8	
8	X	24	128000										.7	
9	X	24	121000										.9	
10	X	24	142000										1.0	
11	X	24	116000										.8	
12	X	24	138000										1.1	
13	X	24	142000										.7	
14	X	24	126000										.6	
15	X	24	112000										.8	
16	X	24	136000										.9	
17	X	24	118000										1.2	
18	X	24	121000										.9	
19	X	24	140000										1.0	
20	X	24	105000										.8	
21	X	24	118000										.7	
22	X	24	116000										.6	
23	X	24	122000										.6	
24	X	24	128000										.8	
25	X	24	131000										.8	
26	X	24	119000										.6	
27	X	24	134000										.8	
28	X	24	143000										.7	
29	X	24	128000										.8	
30	X	24	122000										.8	
31														
Total			3833000											
Average			128000											
Maximum			156000											

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

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

See page 4 for instructions.

I. General Information for the Month and Year of: Octobes 2004

A. Public Water System (PWS) Information

PWS Name: Plantation Bay Utilities			PWS Identification Number: 2184251
PWS Type: [x] Community [ ] Non-Transient Non-Community [ ] Transient Non-Community [ ] Consecutive			
Number of Service Connections at End of Month: 1037		Total Population Served at End of Month: 2074	
PWS Owner: Plantation Bay Utilities			
Contact Person: Glenn Wetherell		Contact Person's Title: Operator	
Contact Person's Mailing Address: 600 Hull Road		City: Ormond Beach	State: Florid Zip Code: 32174
Contact Person's Telephone Number: 386-673-4161		Contact Person's Fax Number: 386-673-7237	
Contact Person's E-Mail Address: WTSSALES@AOL.COM			

B. Water Treatment Plant Information

Plant Name: Plantation Bay Utilities			Plant Telephone Number: 386-437-9185
Plant Address: 100 Plantation Bay Drive		City: Ormond Beach	State: Fl. Zip Code: 32174
Type of Water Treated by Plant: [x] Raw Ground Water [ ] Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 756,000 GPD			
Plant Category (per subsection 62-699.310(4), F.A.C.): one		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Glenn Wetherell	C	2679	7 days
Other Operators:				

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.

Glenn Wetherell — Signature and Date

Glenn Wetherell — Printed or Typed Name

CO 2679 — License Number

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

PWS Identification Number: 2184251 | Plant Name: Plantation Bay Utilities

III. Daily Data for the Month/Year of: October 2004

Means of Achieving Four-Log Virus Inactivation/Removal: * ☐ Free Chlorine ☐ Chlorine Dioxide ☐ Ozone ☐ Combined Chlorine (Chloramines)
☐ Ultraviolet Radiation ☐ Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide

Day of the Month	[redacted]	Hours Plant in Operation	Net Quantity of Finished Water Produced - gal	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable*												
				CT Calculations							UV Dose					
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water °C	pH of Water if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm²	Maximum UV Dose Required, mW-sec/cm²	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
1	X	24	140000										.7			
2	X	24	152000										.6			
3	X	24	146000										.6			
4	X	24	163000										.5			
5	X	24	159000										.7			
6	X	24	144000										.4			
7	X	24	162000										.6			
8	X	24	167000										.8			
9	X	24	155000										.7			
10	X	24	149000										.5			
11	X	24	136000										.4			
12	X	24	143000										.6			
13	X	24	138000										.6			
14	X	24	153000										.7			
15	X	24	142000										.6			
16	X	24	135000										.8			
17	X	24	138000										.8			
18	X	24	96000										.7			
19	X	24	102000										.6			
20	X	24	105000										.5			
21	X	24	101000										.8			
22	X	24	118000										1.0			
23	X	24	126000										1.2			
24	X	24	103000										1.5			
25	X	24	141000										1.1			
26	X	24	123000										.8			
27	X	24	137000										.8			
28	X	24	143000										.9			
29	X	24	129000										.7			
30	X	24	132000										.6			
31	X	24	144000										.6			
Total			4222000													
Average			136,000													
Maximum			167000													

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

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

See page 4 for instructions.

I. General Information for the Month/Year of: November 2004

A. Public Water System (PWS) Information

PWS Name: Plantation Bay Utilities	PWS Identification Number: 2184251
PWS Type: [x] Community [ ] Non-Transient Non-Community [ ] Transient Non-Community [ ] Consecutive	
Number of Service Connections at End of Month: 1037	Total Population Served at End of Month: 2074
PWS Owner: Plantation Bay Utilities	
Contact Person: Glenn Wetherell	Contact Person's Title: Operator
Contact Person's Mailing Address: 600 Hull Road	City: Ormond Beach State: Florida Zip Code: 32174
Contact Person's Telephone Number: 386-673-4161	Contact Person's Fax Number: 386-673-7237
Contact Person's E-Mail Address: WTSSALES@AOL.COM	

B. Water Treatment Plant Information

Plant Name: Plantation Bay Utilities			Plant Telephone Number: 386-437-9185
Plant Address: 100 Plantation Bay Drive	City: Ormond Beach	State: Fl.	Zip Code: 32174
Type of Water Treated by Plant: [x] Raw Ground Water [ ] Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 756,000 GPD			
Plant Category (per subsection 62-699.310(4), F.A.C.): one		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Glenn Wetherell	C	2679	7 days
Other Operators:				

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.

Glenn Wetherell 12/1/04
Signature and Date

Glenn Wetherell
Printed or Typed Name

CO 2679
License Number

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

PWS Identification Number: [redacted] | Plant Name: Radar Bay

III. Daily Data for the Month/Year of: November 2004

Means of Achieving Four-Log Virus Inactivation/Removal: * ☐ Free Chlorine ☐ Chlorine Dioxide ☐ Ozone ☐ Combined Chlorine (Chloramines)
☐ Ultraviolet Radiation ☐ Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide

Day of the Month	[redacted]	Hours Plant is in Operation	Net Quantity of Finished Water Produced, gal	Peak Hour Rate, gpd	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*: CT Calculations: Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	CT Calculations: Disinfectant Contact Time (T) at Peak Flow, minutes	CT Calculations: Log of CT Provided Before or at First Customer During Peak Flow, mg-min/L	CT Calculations: Temp. of Water, °C	CT Calculations: pH of Water, if Applicable	CT Calculations: Minimum CT Required, mg-min/L	UV Dose: Lowest Operating UV Dose, mW-sec/cm²	UV Dose: Minimum UV Dose Required, mW-sec/cm²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Purpose of Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	128000		3.2								.5	
2	X	24	162000		3.5								.6	
3	X	24	153000		3.0								.6	
4	X	24	188000		2.8								.5	
5	X	24	174000		2.8								.6	
6	X	24	162000		2.6								.5	
7	X	24	184000		2.5								.3	
8	X	24	167000		2.8								.7	
9	X	24	155000		2.6								.8	
10	X	24	153000		2.5								.5	
11	X	24	164000		2.4								.4	
12	X	24	155000		3.2								.6	
13	X	24	148000		3.0								.6	
14	X	24	151000		2.8								.7	
15	X	24	196000		2.6								.5	
16	X	24	181000		2.6								.9	
17	X	24	193000		3.0								.6	
18	X	24	187000		2.5								.5	
19	X	24	174000		2.7								.4	
20	X	24	169000		2.8								.6	
21	X	24	177000		3.0								.4	
22	X	24	197000		3.0								.4	
23	X	24	192000		3.2								.5	
24	X	24	196000		3.0								.6	
25	X	24	174000		2.8								.6	
26	X	24	183000		2.6								.8	
27	X	24	176000		2.8								.4	
28	X	24	194000		2.6								.4	
29	X	24	203000		2.5								.4	
30	X	24	190000		2.4								.5	
31														
Total			5226000											
Average			174000											
Maximum			203000											

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

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

See page 4 for instructions.

I. General Information for the Month/Year of: Decembes 2004

A. Public Water System (PWS) Information

PWS Name: Plantation Bay Utilities			PWS Identification Number: 2184251
PWS Type: [x] Community [ ] Non-Transient Non-Community [ ] Transient Non-Community [ ] Consecutive			
Number of Service Connections at End of Month: 1037		Total Population Served at End of Month: 2074	
PWS Owner: Plantation Bay Utilities			
Contact Person: Glenn Wetherell		Contact Person's Title: Operator	
Contact Person's Mailing Address: 600 Hull Road		City: Ormond Beach	State: Florida Zip Code: 32174
Contact Person's Telephone Number: 386-673-4161		Contact Person's Fax Number: 386-673-7237	
Contact Person's E-Mail Address: WTSSALES@AOL.COM			

B. Water Treatment Plant Information

Plant Name: Plantation Bay Utilities			Plant Telephone Number: 386-437-9185
Plant Address: 100 Plantation Bay Drive		City: Ormond Beach	State: Fl. Zip Code: 32174
Type of Water Treated by Plant: [x] Raw Ground Water [ ] Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 756,000 GPD			
Plant Category (per subsection 62-699.310(4), F.A.C.): one		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Glenn Wetherell	C	2679	7 days
Other Operators:				

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.

Glenn Wetherell

Signature and Date

Glenn Wetherell

Printed or Typed Name

CO 2679

License Number

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

Identification Number: 2184251 | Plant Name: Plantation Bay Utilities

III. Daily Data for the Month/Year of: December 2004

Means of Achieving Four-Log Virus Inactivation/Removal: * ☐ Free Chlorine ☐ Chlorine Dioxide ☐ Ozone ☐ Combined Chlorine (Chloramines)
☐ Ultraviolet Radiation ☐ Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide

Day of the Month	[redacted]	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	CT Calculations or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*								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
					Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Product of C and T Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm²	Minimum UV Dose Required, mW-sec/cm²		
1	X	24	171000		2.6								.4	
2	X	24	180000		2.8								.6	
3	X	24	191000		2.6								.6	
4	X	24	163000		2.5								.4	
5	X	24	165000		2.4								.5	
6	X	24	170000		2.5								.5	
7	X	24	168000		2.6								.6	
8	X	24	159000		2.8								.4	
9	X	24	188000		3.0								.4	
10	X	24	173000		2.8								.4	
11	X	24	171000		2.8								.6	
12	X	24	175000		2.6								.6	
13	X	24	149000		3.0								.7	
14	X	24	161000		3.2								.6	
15	X	24	151000		2.8								.6	
16	X	24	160000		2.6								.6	
17	X	24	156000		2.8								.7	
18	X	24	173000		2.5								.7	
19	X	24	146000		2.5								.6	
20	X	24	139000		2.4								.5	
21	X	24	158000		2.6								.5	
22	X	24	173000		2.4								.6	
23	X	24	155000		2.5								.7	
24	X	24	158000		2.8								.4	
25	X	24	162000		2.6								.4	
26	X	24	154000		2.8								.8	
27	X	24	147000		2.4								.6	
28	X	24	152000		2.5								.9	
29	X	24	157000		3.0								.4	
30	X	24	148000		2.8								.4	
31	X	24	161000		3.2								.4	
Total			5034000											
Average			162000											
Maximum			180000											

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

2003

STATE O
DEPARTMENT OF ENVI

WATER TREATMENT PLA

CHIEF OPERATOR SIGNATURE: Glenn Wetherell CO2679 LIST OPERATORS' NAMES: Glenn Wetherell

HOW MANY OTHER OPERATORS? Wetherell Treatment Sys

NOTE: GIVE REMARKS ON PLANT OPERATION ON REVERSE SIDE. 600 Hull Road
Ormond Beach, Florida 32174

DATE	HRS. PLANT OPERATION	TOTAL RAW WATER PUMPED (THOU. OF GALS.)	TOTAL WATER TREATED LEAVING PLANT (THOU. OF GALS.)	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS: TOTAL	MAXIMUM	MINIMUM	FILTER DATA: TOTAL WASH WATER (THOU. OF GALS.)	CHEMICALS: POUNDS USED: LIME	CHLORINE. PRE	CHLORINE. POST	FLUORIDE CHEMICAL	OTHER				D: LIME	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	1
1	3	239	.131					262	70	20						42	
2	3	.100	.143					286	49	21						45	
3	3	.052	.118					236	29	20						45	
4	1	.315	.139					280	9	20						40	
5	1	.150	.126					260	141	20						40	
6	3	.131	.128					256	120	21						40	
7	3	.110	.152					304	98	22						40	
8	3	.121	.132					264	78	20						45	
9	3	.159	.140					280	56	22						42	
10	3	.198	.134					264	36	20						42	
11	1	.214	.131					262	16	20						40	
12	1	.115	.140					280	146	20						40	
13	3	.105	.134					268	125	21						40	
14	3	.157	.132					264	105	20						40	
15	3	.173	.128					260	85	20						45	
16	3	.164	.142					284	63	22						45	
17	3	.157	.156					312	40	23						40	
18	1	.162	.137					278	20	20						40	
19	1	.154	.143					286	149	21						40	
20	3	.178	.133					266	129	20						40	
21	3	.163	.146					304	106	23						45	
22	3	.149	.151					302	82	24						45	
23	3	.154	.136					260	62	20						45	
24	3	.148	.148					294	40	22						40	
25	1	.161	.149					298	17	23						40	
26	1	.274	.171					342	142	25						40	
27	3	.153	.112					229	122	20						40	
28	3	.142	.102					208	102	20						40	
29	3	.138	.101					202	82	20						45	
30	3	.139	.104					208	42	20						45	
31	3	.141	.121					242	22	20						40	
TOTAL	77	4916	4154					8341	2383	650						1296	
MAX.	3	.315	.156					342	149	25						45	
MIN.	1	.052	.101					202	9	20						40	
AVERAGE	2	.159	.134					269	77	21						42	

IRIDA
ENTAL REGULATION

OPERATION REPORT

NAME OF PLANT: PLANTATION Bay
UTILITY COMPANY: PLANtation Bay
MONTH: January
TOTAL METERED SERVICES AT END OF MONTH:

COUNTY: FlagLER
I.D. NO.:
YEAR: 2003

GES (P. P. M.)					CHEMICAL AND PHYSICAL RESULTS (P. P. M.)																						
					RAW									SETTLED					FINISHED									
OTHER							HARDNESS							AS CACO3													
FLUORIDE, AS F					PH	M O. ALK.	TOTAL	CALCIUM	MAGNESIUM	CO2 CALC	IRON, AS FE	COLOR, UNITS		PH	P ALK.	M ALK.	TOTAL HDNS	CA HDNS.	PH	P ALK.	M ALK.	TOTAL HDNS	CALCIUM HDNS.	RESIDUAL CHLORINE	COLOR	FLUORIDE, AS F	R. T.		
19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
					6.7		396	376	20					9.8					7.2	8.5	85	88	68	3/8	7		1.0		
					6.8		394	378	16					10.0					7.4	8.5	85	90	70	3/0	6		1.2		
					6.7		384	366	18					9.8					7.8	8.5	68	92	74	3/4	7		1.4		
					6.7		392	374	18					10.0					7.6	8.5	68	86	68	3/8	7		1.4		
					6.7		402	382	20					10.0					7.5	8.5	68	88	68	3/6	7		1.6		
					6.8		396	380	16					10.0					7.3	8.5	85	94	76	3/5	7		1.3		
					6.8		392	370	22					10.0					7.3	8.5	68	92	78	3/8	7		1.4		
					6.7		384	366	18					10.0					7.2	8.5	68	96	76	3/6	6		1.3		
					6.7		388	370	18					9.8					7.0	8.5	68	102	84	3/8	6		1.2		
					6.7		396	380	16					10.0					7.0	8.5	85	98	86	3/6	6		1.3		
					6.8		398	378	20					9.6					6.9	8.5	85	96	86	3/5	7		1.3		
					6.9		392	372	20					9.8					7.2	8.5	68	94	74	3/2	6		1.2		
					6.8		390	368	22					10.0					7.1	8.5	68	88	70	3/4	7		1.0		
					6.7		386	368	18					10.0					7.2	8.5	68	96	72	3/6	7		1.1		
					6.7		394	374	20					10.0					7.4	8.5	85	96	74	3/8	6		.8		
					6.8		392	372	20					10.0					7.6	8.5	68	92	70	3/2	6		.9		
					6.8		392	374	18					9.6					7.4	8.5	68	94	76	3/2	5		.8		
					6.7		396	380	16					9.8					7.2	8.5	85	102	84	3/4	6		.7		
					6.7		404	384	20					10.0					7.6	8.5	85	106	88	3/2	6		.8		
					6.7		388	366	22					10.0					7.5	8.5	68	98	76	3/4	7		.9		
					6.8		396	378	18					10.0					7.4	8.5	68	94	76	3/6	6		1.0		
					6.7		382	362	20					10.0					7.5	8.5	85	92	74	3/5	6		1.0		
					6.7		380	364	16					9.8					7.3	8.5	85	98	76	3/3	7		1.1		
					6.7		386	366	20					9.4					7.5	8.5	85	96	76	3/5	6		1.2		
					6.7		390	372	18					9.8					7.6	8.5	68	90	72	3/2	7		.9		
					6.7		389	367	22					10.0					7.8	8.5	68	86	68	3/2	7		.8		
					6.7		396	378	18					10.0					8.0	8.5	68	88	68	3/0	7		1.0		
					6.7		394	374	20					10.0					7.6	8.5	68	84	66	3/8	6		.7		
					6.7		388	368	20					10.0					7.8	8.5	68	90	70	3/0	7		.6		
					6.7		378	360	18					9.8					8.0	8.5	85	88	68	3/6	7		.8		
					6.7		384	362	22					10.0					7.6	8.5	68	92	70	3/8	7		.9		
					20887		9119	15519	5728					2998					2395	2635	2312	2886	2304	3117	2442		3246		
					6.9		404	384	22					10.0					8.0	8.5	85	106	88	3.0	7		1.6		
					6.7		378	360	16					9.4					6.9	8.5	68	84	66	2.2	5		.6		
					6.7		390	372	20					9.6					7.4	8.5	75	92	74	2.4	7		1.1		

STATE
DEPARTMENT OF EN

WATER TREATMENT PL

CHIEF OPERATOR SIGNATURE: Glenn Wetherell CO2679
HOW MANY OTHER OPERATORS?
NOTE: GIVE REMARKS ON PLANT OPERATION ON REVERSE SIDE.

LIST OPERATORS' NAMES: Glenn Wetherell
WETHERELL TREATMENT System
600 Hull Road
ORMOND BEACH, FLORIDA 32174

DATE	HRS. PLANT OPERATION	TOTAL RAW WATER PUMPED (THOU. OF GALS.)	TOTAL WATER TREATED LEAVING PLANT (THOU. OF GALS.)	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS: TOTAL	MAXIMUM	MINIMUM	FILTER DATA: TOTAL WASH WATER (THOU. OF GALS.)	CHEMICALS: POUNDS USED: LIME	CHLORINE. PRE	CHLORINE. POST	FLUORIDE CHEMICAL	OTHER				OTHER: LIME
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1	1	.242	.214					410	2	20						45
2	1	.177	.238					476	132	20						45
3	3	.158	.220					438	110	22						45
4	3	.155	.162					324	90	20						40
5	3	.161	.132					272	70	20						45
6	3	.189	.138					276	50	20						45
7	3	.207	.206					410	30	20						40
8	1	.172	.133					270	10	20						40
9	1	.158	.120					240	140	20						40
10	3	.152	.125					230	120	20						40
11	3	.132	.152					300	100	20						45
12	3	.148	.137					282	80	20						45
13	3	.155	.151					304	60	20						40
14	3	.171	.148					242	40	20						40
15	1	.168	.163					326	20	20						45
16	1	.159	.154					308	150	20						45
17	3	.157	.138					280	130	20						40
18	3	.168	.152					304	110	20						40
19	3	.227	.133					266	90	20						40
20	3	.170	.141					282	70	20						40
21	3	.138	.121					242	50	20						40
22	1	.165	.118					236	30	20						45
23	1	.122	.120					240	10	20						42
24	3	.135	.124					248	140	20						41
25	3	.151	.136					272	120	20						42
26	3	.144	.128					258	100	20						40
27	3	.162	.125					250	80	20						45
28	3	.206	.119					240	60	20						40
29																
30																
31																
TOTAL	68	4649	4148					8276	2194	562						1140
MAX.	3	.242	.238					476	150	22						45
MIN.	1	.122	.118					230	2	20						40
AVERAGE																

RIDA
NTAL REGULATION

OPERATION REPORT

NAME OF PLANT: PLANTATION BAY — COUNTY: FLAGLER
UTILITY COMPANY: PLANTATION BAY — I.D. NO.:
MONTH: FEBRUARY — YEAR: 2003
TOTAL METERED SERVICES AT END OF MONTH:

ES (P. P. M.)					CHEMICAL AND PHYSICAL RESULTS (P. P. M.)																							
					RAW								SETTLED					FINISHED											
OTHER							HARDNESS						AS CACO3															
FLUORIDE, AS F					pH	M O. ALK.	TOTAL	CALCIUM	MAGNESIUM	CO2 CALC	IRON, AS FE	COLOR, UNITS	pH	P ALK.	M ALK.	TOTAL HDNS	CA HDNS.	pH	P ALK.	M ALK.	TOTAL HDNS	CALCIUM HDNS.	RESIDUAL CHLORINE	COLOR	FLUORIDE, AS F	R. T.		
19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
					6.8		334	318	16					10.0				7.2	8.5	68	86	68	3.0	6		1.4		
					6.8		342	322	20					10.0				7.6	8.5	68	86	70	2.8	6		1.4		
					6.7		346	326	20					9.8				7.4	8.5	68	86	68	2.8	6		1.2		
					6.8		236	218	18					10.0				7.5	8.5	85	103	80	2.6	7		1.0		
					6.8		236	218	18					10.0				7.6	8.5	68	86	70	2.5	6		.8		
					6.7		234	218	16					10.0				7.4	8.5	68	92	72	2.8	6		.9		
					6.7		236	222	14					10.0				7.5	8.5	68	104	86	3.0	6		.8		
					6.7		234	218	16					9.8				7.6	8.5	85	110	90	3.0	7		1.0		
					6.7		232	216	16					10.0				7.6	8.5	85	108	88	2.8	6		1.1		
					6.7		238	220	18					9.8				7.8	8.5	68	110	90	2.5	6		1.2		
					6.7		234	214	20					9.8				7.4	8.5	68	104	82	2.6	6		1.0		
					6.8		232	212	20					9.6				7.2	8.5	68	102	80	2.8	7		.8		
					6.7		232	216	16					10.0				7.6	8.5	85	106	86	2.5	7		.9		
					6.8		236	218	18					10.0				7.8	8.5	68	108	88	2.4	6		.7		
					6.8		242	224	18					10.0				8.0	8.5	68	96	76	2.6	6		.6		
					6.8		236	218	18					10.0				8.2	8.5	85	92	72	2.8	6		.8		
					6.7		238	220	18					10.0				8.0	8.5	85	96	78	2.5	7		.6		
					6.7		234	212	22					10.0				7.8	8.5	85	94	74	2.2	6		.8		
					6.7		234	218	16					9.8				8.0	8.5	68	94	76	2.5	6		.6		
					6.8		234	214	20					9.6				8.0	8.5	68	90	72	2.6	5		.9		
					6.7		232	216	16					10.0				7.8	8.5	68	86	70	2.5	6		1.0		
					6.7		232	212	20					9.8				7.6	8.5	68	88	72	2.6	5		1.0		
					6.8		236	218	18					9.8				7.8	8.5	68	86	72	2.5	6		.8		
					6.7		232	212	20					9.8				7.6	8.5	85	88	74	2.0	8		.9		
					6.7		232	216	16					10.0				7.6	8.5	85	90	70	2.4	7		.6		
					6.7		236	216	20					10.0				7.8	8.5	85	92	70	2.2	5		.7		
					6.7		234	212	22					10.0				8.0	8.5	68	96	74	2.0	6		.6		
					6.7		240	220	20					9.8				7.5	8.5	68	86	68	2.4	6		.5		
					188.6		6[illegible]	5[illegible]	5[illegible]					97.4				21.5	23.8	20.2	24.6	23.6	24.1	23		24.6		
					6.8		342	322	20					10.0				8.2	8.5	85	110	90	3.0	8		1.4		
					6.7		232	212	20					9.6				7.2	8.5	68	86	68	3.0	5		.5		
					6.7		240	220	18					9.8														

STATE O
DEPARTMENT OF ENVI

WATER TREATMENT PLA

CHIEF OPERATOR SIGNATURE: H. Wetherell C.O. 2679

HOW MANY OTHER OPERATORS? _____

NOTE: GIVE REMARKS ON PLANT OPERATION ON REVERSE SIDE.

LIST OPERATORS' NAMES: Glenn Wetherell

Wetherell Treatment Syste
600 Hull Road
Ormond Beach, Florida 32174

DATE	HRS. PLANT OPERATION	TOTAL RAW WATER PUMPED (THOU. OF GALS.)	TOTAL WATER TREATED LEAVING PLANT (THOU. OF GALS.)	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS: TOTAL	MAXIMUM	MINIMUM	FILTER DATA: TOTAL WASH WATER (THOU. OF GALS.)	CHEMICALS: POUNDS USED: LIME	CHLORINE, PRE	CHLORINE, POST	FLUORIDE CHEMICAL	OTHER				DO: LIME	CHLORINE, PRE
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	1	.143	.133					266	140	20						40	
2	1	.160	.121					242	120	20						40	
3	3	.152	.124					248	100	20						40	
4	3	.146	.111					226	80	20						45	
5	3	.169	.122					245	59	21						42	
6	3	.136	.118					236	39	20						45	
7	3	.144	.132					266	17	22						40	
8	1	.166	.146					292	147	20						42	
9	1	.172	.109					220	127	20						40	
10	3	.152	.112					226	105	22						40	
11	3	.121	.097					204	85	20						45	
12	3	.116	.103					210	65	20						40	
13	3	.143	.126					252	43	22						40	
14	3	.165	.133					266	23	20						40	
15	1	.158	.141					284	3	20						45	
16	1	.147	.126					252	131	22						45	
17	3	.169	.131					264	111	20						40	
18	3	.157	.128					298	90	21						40	
19	3	.171	.158					316	70	20						40	
20	3	.167	.151					208	50	20						42	
21	3	.183	.156					312	30	20						42	
22	1	.194	.162					324	10	20						40	
23	1	.170	.168					330	140	20						40	
24	3	.166	.155					310	130	20						45	
25	3	.159	.153					306	119	20						45	
26	3	.163	.162					304	99	20						40	
27	3	.178	.159					318	79	20						40	
28	3	.184	.173					346	59	20						45	
29	1	.179	.191					382	39	20						45	
30	1	.164	.178					366	17	22						40	
31	3	.143	.213					426	147	20						40	
TOTAL	73	4.937	4.392					8755	2474	632						1233	
MAX.	3	.194	.213					426	147	22						45	
MIN.	1	.116	.097					204	3	20						40	
AVERAGE	2	.159	.142					282	80	20						42	

LORIDA
IMENTAL REGULATION

T OPERATION REPORT

NAME OF PLANT: Plantation Bay
UTILITY COMPANY: Plantation Bay
MONTH: march
COUNTY: Flagler
I.D. NO.:
YEAR: 2003
TOTAL METERED SERVICES AT END OF MONTH:

AGES (P. P. M.)						CHEMICAL AND PHYSICAL RESULTS (P. P. M.)																					
						RAW								SETTLED					FINISHED									
		OTHER						HARDNESS						AS CACO3														
CHLORINE, POST	FLUORIDE, AS F					PH	M O. ALK.	TOTAL	CALCIUM	MAGNESIUM	CO2 CALC	IRON, AS FE	COLOR, UNITS	PH	P ALK.	M ALK.	TOTAL HDNS	CA HDNS.	PH	P ALK.	M ALK.	TOTAL HDNS	CALCIUM HDNS.	RESIDUAL CHLORINE	COLOR	FLUORIDE, AS F	R. T.	
18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
10						6.7		384	366	18					10.0					7.6	8.5	68	82	68	3.0	7		1.2		
10						6.7		396	380	16					9.8					7.4	8.5	68	78	60	3.0	7		.9		
10						6.8		390	368	22					10.0					7.4	8.5	85	80	68	3.0	7		1.0		
10						6.7		396	380	16					9.8					7.5	8.5	68	92	74	2.8	7		1.1		
10						6.7		404	384	20					9.8					7.8	8.5	68	86	66	2.5	7		1.3		
10						6.7		388	368	20					9.6					7.6	8.5	68	84	64	2.6	6		1.0		
10						6.7		392	370	22					10.0					7.8	8.5	68	88	68	2.8	7		.9		
10						6.7		384	366	18					10					8.0	8.5	68	92	74	2.4	7		.8		
10						6.7		398	378	20					9.8					8.0	8.5	85	90	70	2.4	7		.9		
10						6.7		392	374	18					10					8.2	8.5	68	96	78	2.7	6		.8		
10						6.8		386	368	18					10					8.0	8.5	68	94	74	2.8	7		1.0		
10						6.7		382	362	20					10					7.6	8.5	68	94	76	2.6	7		1.1		
10						6.7		380	364	16					10					7.6	8.5	68	92	72	2.8	6		1.4		
10						6.7		390	372	18					10					25	8.5	68	88	68	2.8	6		1.2		
10						6.7		384	362	22					9.8					7.6	8.5	85	90	72	3.0	6		1.2		
10						6.7		396	378	18					9.8					7.8	8.5	85	86	68	3.0	7		1.0		
10						6.7		394	374	20					10					7.6	8.5	68	92	74	2.8	6		.9		
10						6.7		388	368	20					10					7.6	8.5	68	94	74	2.5	7		1.0		
10						6.7		380	360	20					10					7.6	8.5	85	84	66	2.6	7		.8		
10						6.8		378	360	18					10					7.8	8.5	68	92	74	2.2	7		.7		
10						6.7		384	362	22					9.6					7.6	8.5	68	98	78	2.8	6		.9		
10						6.7		392	374	18					9.8					7.4	8.5	85	102	84	3.0	7		1.0		
10						6.7		396	380	16					9.6					7.4	8.5	68	106	86	3.0	7		1.0		
10						6.8		388	370	18					10					7.2	8.5	68	110	92	3.0	7		1.2		
10						6.7		382	362	20					10					7.4	8.5	68	112	94	2.6	6		1.3		
10						6.7		390	372	18					10					7.2	8.5	85	108	88	3.0	7		1.4		
10						6.7		384	366	22					9.8					7.4	8.5	85	98	76	2.8	7		1.5		
10						6.7		394	374	20					10					7.4	8.5	85	94	78	2.5	7		1.6		
10						6.7		378	362	16					10					7.6	8.5	68	98	78	3.0	7		1.2		
10						6.7		394	376	18					10					7.8	8.5	68	90	70	2.6	7		1.4		
10						6.8		388	372	16					10					7.8	8.5	68	88	70	2.8	7		1.1		
310						208		1205	1147	585					307.2					228	263	224	287	234	85.4	209		33.8		
10						6.8		404	384	22					10.0					8.2	8.5	85	112	94	3.0	7		1.6		
10						6.7		378	360	16					9.6					7.2	8.5	68	78	60	2.4	6		.7		
10						6.7		389	370	19					9.9					7.4	8.5	72	92	74	2.8	7		1.1		

STATE OF
DEPARTMENT OF ENVIR

WATER TREATMENT PLA

CHIEF OPERATOR SIGNATURE: [signature] C.O. 2679 LIST OPERATORS' NAMES: Glenn Wetherell
HOW MANY OTHER OPERATORS? _____ Wetherell Treatment Systems
NOTE: GIVE REMARKS ON PLANT OPERATION ON REVERSE SIDE. 600 Hull Road
Ormond Beach, Florida 32174

DATE	HRS. PLANT OPERATION	TOTAL RAW WATER PUMPED (THOU. OF GALS.)	TOTAL WATER TREATED LEAVING PLANT (THOU. OF GALS.)	FILTER DATA				CHEMICALS									
				HOURS FILTER RUNS BETWEEN WASHINGS			TOTAL WASH WATER (THOU. OF GALS.)	POUNDS USED								DO	
				TOTAL	MAXIMUM	MINIMUM		LIME	CHLORINE. PRE	CHLORINE. POST	FLUORIDE CHEMICAL	OTHER				LIME	CHLORINE PRE
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	3	.153	.111					222	120	20						40	
2	3	.136	.108					216	100	20						40	
3	3	.141	.109					218	80	20						40	
4	3	.145	.126					252	60	20						45	
5	1	.160	.141					282	39	21						40	
6	1	.138	.134					268	19	20						40	
7	3	.142	.129					260	148	20						40	
8	3	.152	.143					286	126	22						42	
9	3	.181	.137					274	106	20						42	
10	3	.178	.142					284	96	20						45	
11	3	.198	.129					260	72	22						40	
12	1	.120	.161					310	54	20						40	
13	1	.113	.123					246	32	22						40	
14	3	.095	.176					346	10	22						40	
15	3	.243	.168					336	140	20						42	
16	3	.180	.157					314	120	20						45	
17	3	.177	.161					322	100	20						42	
18	3	.159	.172					344	78	22						45	
19	1	.162	.159					318	58	20						42	
20	1	.190	.164					328	38	20						40	
21	3	.105	.162					330	16	22						40	
22	3	.138	.157					326	146	20						40	
23	3	.167	.141					282	126	20						42	
24	3	.206	.128					262	103	23						45	
25	3	.194	.131					266	80	23						40	
26	1	.221	.142					282	60	20						40	
27	1	.196	.146					290	40	20						40	
28	3	.163	.139					282	20	20						42	
29	3	.154	.171					342	148	22						40	
30	3	.218	.208					418	128	20						40	
31																	
TOTAL	74	4926	4375					8752	2463	621						1237	
MAX.	3	243	.208					410	148	22						45	
MIN.	1	.095	.108					216	10	20						40	
AVERAGE	2	.164	.146					291	82	21						41	

ORIDA
MENTAL REGULATION

OPERATION REPORT

NAME OF PLANT: Plantation Bay — COUNTY: Flagler
UTILITY COMPANY: Plantation Bay — I.D. NO.:
MONTH: April — YEAR: 2003
TOTAL METERED SERVICES AT END OF MONTH:

CHEMICAL AND PHYSICAL RESULTS (P. P. M.)

GES (P. P. M.) OTHER						RAW								SETTLED						FINISHED									
	FLUORIDE, AS F					pH	M O. ALK.	HARDNESS TOTAL	HARDNESS CALCIUM	HARDNESS MAGNESIUM	CO_3 CALC	IRON, AS FE	COLOR, UNITS	pH	P ALK. AS $CACO_3$	M ALK. AS $CACO_3$	TOTAL HDNS AS $CACO_3$	CA HDNS. AS $CACO_3$	pH	P ALK.	M ALK.	TOTAL HDNS	CALCIUM HDNS.	RESIDUAL CHLORINE	COLOR	FLUORIDE, AS F	R. T.			
19	20	21	22	23		24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
						6.7		388	366	22					10.8					7.4	8.5	68	88	68	2/6	7		.6		
						6.8		396	378	18					10.0					7.6	8.5	68	92	74	3/6	6		.5		
						6.7		382	362	20					9.8					7.8	8.5	68	86	70	3/5	7		.7		
						6.7		380	364	16					9.6					7.2	8.5	68	86	68	3/6	7		.8		
						6.7		386	366	20					9.8					7.4	8.5	85	88	68	3/8	7		.8		
						6.7		390	372	18					9.8					7.2	8.5	85	94	76	3/6	6		.7		
						6.8		396	378	18					10.0					7.0	8.5	68	96	74	3/5	7		.8		
						6.8		394	374	20					10.0					7.0	8.5	68	94	76	3/0	6		1.0		
						6.7		388	368	20					10.0					7.4	8.5	68	88	70	3/8	6		1.1		
						6.7		378	360	18					10.0					7.2	8.5	68	90	72	3/6	7		.8		
						6.7		384	362	22					9.8					7.0	8.5	68	86	68	3/8	7		.7		
						6.7		396	376	20					10.0					7.2	8.5	68	88	68	3/0	7		.7		
						6.7		394	378	16					9.6					7.4	8.5	85	84	66	3/5	7		.7		
						6.8		384	364	20					9.4					7.6	8.5	68	90	70	3/0	6		.6		
						6.7		402	382	20					9.6					7.4	8.5	85	88	68	3/0	7		.5		
						6.7		392	370	22					9.8					7.2	8.5	68	92	70	3/8	6		.4		
						6.7		384	366	18					9.8					7.4	8.5	68	88	68	3/6	7		.6		
						6.7		388	370	18					9.6					8.0	8.5	68	90	68	3/5	7		.4		
						6.7		396	380	16					9.4					8.2	8.5	85	92	74	3/2	6		.5		
						6.7		398	378	20					9.6					8.0	8.5	85	88	68	3/6	7		.6		
						6.7		392	372	20					9.8					7.8	8.5	85	88	70	3/8	5		.8		
						6.7		390	368	22					9.8					7.6	8.5	68	92	76	3/0	6		.5		
						6.7		386	368	18					10.0					7.8	8.5	68	92	78	3/6	7		.4		
						6.7		394	374	20					10.0					7.6	8.5	68	96	76	3/8	7		.5		
						6.8		392	372	20					10.0					7.4	8.5	68	100	84	3/6	6		.8		
						6.7		392	374	18					9.8					7.2	8.5	68	96	86	3/2	6		.7		
						6.7		396	380	16					10.0					7.4	8.5	85	94	74	3/8	6		.6		
						6.7		388	366	22					10.0					7.5	8.5	68	88	70	3/6	7		.6		
						6.7		396	378	18					10.0					7.6	8.5	68	90	72	3/5	7		.6		
						6.7		382	362	20					10.0					7.8	8.5	68	96	84	3/4	7		.7		
						251.4		1176	1168	576					235					224.3	235	207	278	217	88.3	197		23.8		
						6.8		402	382	22					10.0					8.2	8.5	85	100	86	3.5	7		1.1		
						6.7		378	362	16					9.4					7.0	8.5	68	84	68	3.2	5		.4		
						6.7		390	371	19					9.8					7.5	8.5	73	91	72	3.7	7		.8		

STATE (
DEPARTMENT OF ENVI

WATER TREATMENT PLA

CHIEF OPERATOR SIGNATURE: Glenn Wetherell
HOW MANY OTHER OPERATORS? _____
NOTE: GIVE REMARKS ON PLANT OPERATION ON REVERSE SIDE.

LIST OPERATORS' NAMES: Glenn Wetherell
Wetherell Treatment Systems
600 Hull Road
Ormond Beach, Florida 32174

DATE	HRS. PLANT OPERATION	TOTAL RAW WATER PUMPED (THOU. OF GALS.)	TOTAL WATER TREATED LEAVING PLANT (THOU OF GALS.)	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS: TOTAL	MAXIMUM	MINIMUM	FILTER DATA: TOTAL WASH WATER (THOU. OF GALS.)	CHEMICALS: POUNDS USED: LIME	CHLORINE. PRE	CHLORINE. POST	FLUORIDE CHEMICAL	OTHER				D: LIME	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	1
1	3	.110	.109					212	140	20						40	
2	3	.120	.115					240	120	20						40	
3	1	.106	.128					208	99	21						40	
4	1	.197	.130					386	79	20						42	
5	3	.122	.126					244	57	22						45	
6	3	.125	.130					260	37	20						42	
7	3	.112	.121					242	17	20						40	
8	3	.105	.118					238	147	20						40	
9	3	.218	.128					250	125	22						40	
10	1	.210	.133					266	105	20						45	
11	1	.171	.122					244	85	20						40	
12	3	.163	.116					238	63	22						40	
13	3	.154	.109					220	40	23						40	
14	3	.136	.134					268	20	20						40	
15	3	.148	.126					254	150	20						40	
16	3	.126	.110					220	128	22						40	
17	1	.126	.104					210	108	20						40	
18	1	.131	.122					248	84	20						40	
19	3	.142	.128					252	62	22						40	
20	3	.139	.130					262	42	20						40	
21	3	.156	.124					252	22	20						40	
22	3	.158	.116					232	2	20						40	
23	3	.143	.113					228	120	22						45	
24	1	.149	.132					264	100	20						40	
25	1	.156	.111					222	80	20						40	
26	3	.133	.125					250	60	20						45	
27	3	.147	.131					262	40	20						45	
28	3	.158	.109					220	20	20						40	
29	3	.161	.114					228	148	22						40	
30	3	.193	.123					246	126	22						40	
31	1	.128	.128					254	106	20						40	
TOTAL	75	4543	3765					7620	2532	640						1269	
MAX.	3	.218	.134					386	148	22						45	
MIN.	1	.105	.104					210	2	20						40	
AVERAGE	2	.147	.121					246	.082	21						41	

FLORIDA
ONMENTAL REGULATION

NT OPERATION REPORT

NAME OF PLANT: Plantation Bay COUNTY: Flagler
UTILITY COMPANY: Plantation Bay Utilities I.D. NO.:
MONTH: May YEAR: 2003
TOTAL METERED SERVICES AT END OF MONTH:

SAGES (P.P.M.)						CHEMICAL AND PHYSICAL RESULTS (P.P.M.)																					
						RAW							SETTLED					FINISHED										
								HARDNESS						AS CACO3														
CHLORINE, POST	FLUORIDE, AS F	OTHER				PH	M.O. ALK.	TOTAL	CALCIUM	Total Magnesium	Calcium Organic	Magnesium Hardness	COLOR. UNITS	PH	P ALK.	M ALK.	TOTAL HDNS.	CA HDNS.	PH	P ALK.	M ALK.	TOTAL HDNS	CALCIUM HDNS.	RESIDUAL CHLORINE	COLOR	FLUORIDE, AS F	R. T.	
18	19	20	21	22	23	24	25	~~26~~	~~27~~	26	27	28	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
10						6.7			348	326		22			9.8					7.6	8.5	68	90	72	2.5	7		.8		
10						6.7			342	324		18			10.0					7.8	8.5	68	92	74	3.0	6		.9		
10						6.7			372	352		20			10.0					8.0	8.5	85	90	74	3.0	7		.7		
10						6.7			382	364		18			10.0					7.6	8.5	85	88	70	3.0	7		.8		
10						6.7			380	360		20			10.0					7.5	8.5	68	86	68	3.0	7		.6		
10						6.7			384	368		16			9.8					7.6	8.5	68	82	64	2.6	7		.8		
10						6.7			381	361		20			10.0					7.4	8.5	68	88	68	3.0	8		.7		
10						6.7			396	380		16			10.0					7.5	8.5	85	85	65	3.2	8		.7		
10						6.8			390	372		18			9.8					7.2	8.5	85	88	70	3.0	7		.6		
10						6.7			386	366		20			10.0					7.0	8.5	68	92	74	2.8	7		.5		
10						6.7			392	370		22			10.0					6.8	8.5	68	90	74	2.5	6		.5		
10						6.7			396	378		18			9.8					7.2	8.5	85	88	72	3.6	8		.7		
10						6.8			396	380		16			10.0					7.2	8.5	68	94	76	2.8	7		.8		
10						6.7			394	374		20			10.0					7.0	8.5	68	92	74	3.0	8		.9		
10						6.7			384	366		18			9.8					7.6	8.5	68	90	72	3.0	7		1.1		
10						6.7			404	384		20			10.0					8.5	8.5	68	92	74	2.8	7		.8		
10						6.8			384	362		22			10.0					7.8	8.5	68	88	70	2.6	6		1.2		
10						6.7			388	368		20			10.0					7.4	8.5	85	85	68	2.2	8		1.4		
10						6.8			380	364		16			10.0					7.6	8.5	68	86	68	2.5	7		.9		
10						6.7			384	362		22			10.0					7.4	8.5	68	88	70	2.6	8		.8		
10						6.7			384	364		20			10.0					7.5	8.5	68	92	74	3.0	6		.6		
10						6.7			392	370		22			10.0					7.6	8.5	85	88	72	3.5	6		.7		
10						6.8			390	368		22			10.0					7.8	8.5	68	92	74	3.2	7		.6		
10						6.7			386	368		18			10.0					8.1	8.5	68	88	70	3.4	8		.5		
10						6.7			396	378		18			9.8					8.0	8.5	68	85	65	3.0	7		.8		
10						6.7			392	370		22			9.8					7.8	8.5	68	82	64	3.6	7		.7		
10						6.7			394	378		16			9.6					7.6	8.5	68	86	68	3.5	7		.5		
10						6.7			388	368		20			9.8					7.4	8.5	68	90	74	2.8	8		.6		
10						6.8			390	372		18			9.6					7.6	8.5	68	92	74	3.6	7		.4		
10						6.7			396	376		20			9.8					7.6	8.5	85	90	72	2.8	7		.8		
10						6.7			392	372		20			9.6					7.5	8.5	85	94	76	3.0	7		.6		
310						208.3			1186.3	1359		598			310					239	263	226	275	224	89.5	220		23		
10						6.8			404	382		22			10.0					8.5	8.5	85	94	76	3.5	8		1.4		
10						6.7			342	326		16			9.6					6.8	8.5	68	82	64	2.2	6		.4		
10						6.7			386	366		19			10.0					7.7	8.5	73	89	71	2.9	7		.7		

DEP

Glenn D. Wetherell

WATER TREATM

CHIEF OPERATOR SIGNATURE: C02679

HOW MANY OTHER OPERATORS? _____

NOTE: GIVE REMARKS ON PLANT OPERATION ON REVERSE SIDE.

LIST OPERATORS' NAMES: Glenn
WETHERELL TREATMEN
600 Hull Road
ORMOND BEACH, FLA. 32

DATE	HRS. PLANT OPERATION	TOTAL RAW WATER PUMPED (THOU. OF GALS.)	TOTAL WATER TREATED LEAVING PLANT (THOU. OF GALS.)	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS: TOTAL	MAXIMUM	MINIMUM	FILTER DATA: TOTAL WASH WATER (THOU. OF GALS.)	CHEMICALS USED: POUNDS USED: LIME	CHLORINE PRE	CHLORINE POST	FLUORIDE CHEMICAL	OTHER		
	1	2	3	4	5	6	7	8	9	10	11	12	13	
1	1	.156	.153						84	20				
2	3	.162	.146						64	20				
3	3	.158	.152						44	20				
4	3	.149	.143						24	20				
5	3	.162	.159						2	22				
6	3	.156	.155						132	20				
7	1	.142	.146						110	22				
8	1	.173	.149						90	20				
9	3	.184	.161						70	20				
10	3	.128	.148						50	20				
11	3	.141	.152						30	20				
12	3	.158	.156						8	22				
13	3	.162	.159						138	20				
14	1	.144	.161						118	20				
15	1	.153	.157						98	20				
16	3	.160	.158						78	20				
17	3	.157	.163						56	22				
18	3	.124	.156						36	20				
19	3	.116	.152						16	20				
20	3	.108	.148						146	20				
21	1	.138	.153						126	20				
22	1	.146	.146						106	20				
23	3	.158	.158						86	20				
24	3	.149	.139						66	20				
25	3	.157	.148						44	22				
26	3	.127	.106						24	20				
27	3	.152	.136						4	20				
28	1	.143	.140						139	20				
29	1	.151	.129						112	22				
30	3	.153	.118						92	20				
31														
TOTAL	72	4467	4447						2193	612				
MAX.	3	.184	.161						146	22				
MIN.	1	.108	.106						4	20				
AVERAGE	2	.149	.148						73	20				

STATE FLORIDA
[illegible] OF ENVIRONMENTAL REGULATION

PLANT OPERATION REPORT

[illegible]EREL
[illegible]stem

NAME OF PLANT: Plantation Bay
UTILITY COMPANY: Plantation Bay
MONTH: June
COUNTY: Flagler
I.D. NO.:
YEAR: 2003
TOTAL METERED SERVICES AT END OF MONTH:

CHEMICAL AND PHYSICAL RESULTS (P. P. M.)

DIAGES (P. P. M.)							RAW								SETTLED					FINISHED									
			OTHER						HARDNESS							AS CACO3													
LIME	CHLORINE, POST	FLUORIDE AS F					PH	M O. ALK.	TOTAL	CALCIUM	MAGNESIUM	CO2 CALC	IRON, AS FE	COLOR, UNITS	PH	P. ALK.	M ALK.	TOTAL HDNS	CA HDNS.	PH	P. ALK.	M ALK.	TOTAL HDNS	CALCIUM HDNS.	RESIDUAL CHLORINE	COLOR	FLUORIDE AS F	R. T.	
16	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
40	10						6.7		348	328	20					9.8					7.6	8.5	68	88	70	2/8	7		1.0	
40	10						6.8		350	332	18					9.8					7.6	8.5	68	82	68	2/6	8		.8	
40	10						6.7		346	330	16					10.0					7.6	8.5	85	78	60	2/5	7		.6	
40	10						6.7		342	326	16					10.0					7.4	8.5	85	92	74	2/8	7		.6	
40	10						6.7		352	334	18					10.0					7.5	8.5	68	85	68	2/6	8		.8	
40	15						6.7		336	316	20					9.8					7.6	8.5	68	84	64	2/5	7		1.1	
40	10						6.7		340	322	18					10.0					7.8	8.5	68	90	70	2/7	6		.9	
40	10						6.7		338	322	16					10.0					8.0	8.5	85	86	78	2/8	7		.8	
40	10						6.8		340	322	18					9.8					8.2	8.5	85	94	74	2/6	7		.6	
45	10						6.7		336	320	16					9.8					8.0	8.5	68	92	72	2/5	7		.7	
45	10						6.7		342	320	20					9.6					7.8	8.5	68	88	68	2/8	8		.8	
45	10						6.7		340	318	22					9.8					7.8	8.5	85	92	74	3/0	7		.4	
45	15						6.7		341	323	18					10.0					7.6	8.5	68	84	66	3/2	7		.6	
40	10						6.7		344	324	20					10.0					8.0	8.5	68	92	74	3/0	6		.4	
40	10						6.7		348	332	16					10.0					7.5	8.5	68	96	78	2/8	6		.4	
40	15						6.7		346	326	20					10.0					7.4	8.5	85	94	74	2/6	8		.6	
40	10						6.8		348	328	20					10.0					7.6	8.5	85	92	72	2/5	7		.8	
40	10						6.7		342	324	18					9.8					7.6	8.5	85	88	68	2/6	8		.6	
40	10						6.7		338	318	20					9.8					8.0	8.5	85	90	72	2/8	8		1.0	
40	10						6.8		340	318	22					9.6					7.5	8.5	68	86	68	3/0	8		.8	
40	10						6.7		348	330	18					10.0					7.6	8.5	68	92	74	3/2	7		.4	
40	10						6.7		346	330	16					10.0					7.6	8.5	85	84	66	3/5	7		.5	
40	10						6.7		342	324	18					10.0					7.5	8.5	68	92	79	3/0	8		.6	
40	10						6.7		340	326	20					9.8					7.4	8.5	68	98	78	2/8	6		.5	
40	15						6.7		348	330	18					10.0					7.2	8.5	68	92	72	3/0	7		.6	
40	15						6.7		342	318	24					10.0					7.0	8.5	68	94	76	3/5	8		.4	
40	15						6.8		346	326	20					10.0					7.4	8.5	85	92	72	3/5	8		.5	
40	15						6.7		350	332	18					10.0					7.4	8.5	68	90	70	3/0	7		.7	
40	15						6.7		342	322	20					10.0					7.6	8.5	68	86	68	3/5	8		.6	
40	15						6.7		338	322	16					10.0					7.2	8.5	85	88	70	3/0	7		.5	
1220	345						205.1		[illegible]	[illegible]	544					297.4					[illegible]	255	[illegible]	[illegible]	[illegible]	88	217		19.6		
45	15						6.8		352	334	24					10.0					8.0	8.5	85	98	79	3.5	8		1.1	
40	10						6.7		336	316	16					9.6					7.0	8.5	68	78	60	2.2	6		.4	
41	12						6.7		343	325	18					9.9					7.6	8.5	74	80	71	2.9	7		.7	

STATE
DEPARTMENT OF ENV

WATER TREATMENT PL

CHIEF OPERATOR SIGNATURE: Glenn A. Wetherell

HOW MANY OTHER OPERATORS? _____

NOTE: GIVE REMARKS ON PLANT OPERATION ON REVERSE SIDE.

LIST OPERATORS' NAMES: GLENN WETHERELL

WETHERELL TREATMENT

600 Hull Road

ORMOND BEACH, FLORIDA 32174

DATE	HRS. PLANT OPERATION	TOTAL RAW WATER PUMPED (THOU. OF GALS.)	TOTAL WATER TREATED LEAVING PLANT (THOU. OF GALS.)	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS — TOTAL	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS — MAXIMUM	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS — MINIMUM	FILTER DATA: TOTAL WASH WATER (THOU. OF GALS.)	CHEMICALS: POUNDS USED — LIME	CHLORINE, PRE	CHLORINE, POST	FLUORIDE CHEMICAL	OTHER	OTHER	OTHER	OTHER	D: LIME
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1	3	.143	.131						72	20						40
2	3	.151	.140						50	22						40
3	3	.132	.118						30	20						40
4	1	.149	.129						10	20						40
5	1	.136	.116						138	22						40
6	1	.144	.126						118	20						40
7	3	.130	.123						98	20						40
8	3	.133	.119						76	22						40
9	3	.107	.122						56	20						40
10	3	.138	.128						36	20						40
11	3	.143	.131						16	20						40
12	1	.131	.118						146	20						40
13	1	.136	.122						126	20						40
14	3	.148	.133						106	22						40
15	3	.126	.114						86	20						40
16	3	.172	.138						64	22						40
17	3	.288	.119						44	20						40
18	3	.136	.110						24	20						40
19	1	.118	.104						4	20						40
20	1	.124	.117						134	20						40
21	3	.142	.136						112	22						40
22	3	.124	.120						92	20						40
23	3	.131	.116						72	20						40
24	3	.127	.122						52	20						40
25	3	.133	.120						30	22						40
26	1	.121	.115						10	20						40
27	1	.135	.119						140	20						40
28	3	.127	.114						118	22						40
29	3	.141	.108						98	20						40
30	3	.133	.110						98	20						40
31	3	.138	.107						56	22						40
TOTAL		4257	.3745						2312	638						1240
MAX.		.172	.138						140	22						40
MIN.		.107	.104						4	20						40
AVERAGE		137	.121						75	21						40

DER Form 62BM-12-20 (May 1976) Page 1 of 1

LORIDA
MENTAL REGULATION

T OPERATION REPORT

NAME OF PLANT: Plantation Bay
UTILITY COMPANY: Plantation Bay
MONTH: July
TOTAL METERED SERVICES AT END OF MONTH:

COUNTY: FLAGLER
I.D. NO.:
YEAR: 2003

GES (P. P. M.) OTHER						CHEMICAL AND PHYSICAL RESULTS (P. P. M.) RAW								SETTLED					FINISHED										
								HARDNESS AS CaCO3							AS CaCO3													
					FLUORIDE, AS F	pH	M.O. ALK.	TOTAL	CALCIUM	MAGNESIUM	CO_2 CALC	IRON, AS Fe	COLOR, UNITS	pH	P ALK.	M ALK.	TOTAL HDNS	CA HDNS.	pH	P ALK.	M ALK.	TOTAL HDNS	CALCIUM HDNS.	RESIDUAL CHLORINE	COLOR	FLUORIDE, AS F	R. T.		
19	20	21	22	23		24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
						6.7		340	320	20				10.0					7.4	8.5	68	94	74	3/6	8		.7		
						6.7		346	328	18				10.0					7.5	8.5	68	92	72	3/5	8		.6		
						6.7		342	326	16				9.8					7.8	8.5	68	88	70	3/5	7		.5		
						6.7		338	322	16				10.0					7.6	8.5	68	90	72	3/6	8		.6		
						6.8		340	320	20				10.0					7.5	8.5	85	92	74	3/6	8		.6		
						6.7		342	324	18				9.8					7.4	8.5	85	98	78	3/8	8		.7		
						6.7		346	324	22				9.6					7.6	8.5	85	102	85	3/6	8		.8		
						6.7		340	322	18				9.8					7.4	8.5	68	106	88	3/8	7		.6		
						6.8		346	330	16				10.0					7.6	8.5	85	98	80	3/6	8		.7		
						6.7		342	322	20				10.0					7.4	8.5	68	94	74	3/8	7		.7		
						6.7		338	318	20				10.0					7.5	8.5	68	90	72	3/6	8		.9		
						6.7		340	322	18				9.8					7.6	8.5	68	92	72	3/6	8		1.1		
						6.7		342	324	18				10.4					7.4	8.5	68	98	78	3/5	7		1.3		
						6.8		344	324	20				9.8					7.5	8.5	68	104	88	3/6	7		.9		
						6.7		342	326	16				9.8					7.6	8.5	68	112	92	3/8	8		.7		
						6.7		342	320	22				10.0					7.4	8.5	85	106	88	3/6	8		.6		
						6.7		338	320	18				10.0					7.5	8.5	68	102	84	3/6	8		.5		
						6.7		332	314	17				10.0					7.5	8.5	68	98	80	3/8	7		.6		
						6.7		338	318	20				10.0					7.6	8.5	85	94	74	3/8	8		.8		
						6.7		342	324	18				10.0					7.8	8.5	85	88	70	3/6	7		.7		
						6.7		340	322	18				10.0					7.6	8.5	68	86	68	3/5	8		.8		
						6.8		346	324	22				10.0					7.5	8.5	68	90	72	3/5	8		.5		
						6.7		342	324	18				10.0					7.5	8.5	68	94	74	3/5	8		.6		
						6.7		340	320	20				9.8					7.4	8.5	68	98	80	3/6	8		.7		
						6.7		342	326	16				10.0					7.2	8.5	85	96	78	3/6	7		.6		
						6.7		342	326	16				10.0					7.6	8.5	85	96	76	3/8	7		.5		
						6.8		342	320	22				10.0					7.4	8.5	68	98	78	3/6	8		.4		
						6.7		342	324	18				9.8					7.5	8.5	68	102	80	3/4	8		.5		
						6.7		338	318	20				10.0					7.6	8.5	68	96	78	3/6	8		.6		
						6.7		344	324	20				10.0					7.4	8.5	68	92	72	3/6	8		.5		
						6.7		342	326	16				10.0					7.5	8.5	68	88	70	3/5	7		.5		
						2082		9[illegible]	[illegible]	572				308					734	8.3	342	2977	39	88.9	238		10.8				
						6.8		342	324	22				10.0					7.8	8.5	85	112	92	3.5	8		1.3		
						6.7		338	318	16				9.6					7.2	8.5	68	86	68	2.4			.6		

STATE (
DEPARTMENT OF ENVI

WATER TREATMENT PLA

CHIEF OPERATOR SIGNATURE: Wetherell CO2679

HOW MANY OTHER OPERATORS?

NOTE: GIVE REMARKS ON PLANT OPERATION ON REVERSE SIDE.

LIST OPERATORS' NAMES:

WETHERELL TREATMENT SYSTEM
600 Hull Road
ORMOND BEACH, FL. 32174

DATE	HRS. PLANT OPERATION	TOTAL RAW WATER PUMPED (THOU. OF GALS.)	TOTAL WATER TREATED LEAVING PLANT (THOU. OF GALS.)	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS TOTAL	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS MAXIMUM	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS MINIMUM	FILTER DATA: TOTAL WASH WATER (THOU. OF GALS.)	CHEMICALS: POUNDS USED: LIME	CHLORINE PRE	CHLORINE POST	FLUORIDE CHEMICAL	OTHER				D: LIME	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	1
1	3	140	.104						36	20						40	
2	1	161	.121						16	20						40	
3	1	165	.118						146	20						40	
4	3	.105	.101						126	20						40	
5	3	.102	.111						104	22						40	
6	3	.099	.097						84	20						40	
7	3	.103	.101						62	22						40	
8	3	.112	.104						42	20						40	
9	1	.168	.111						22	20						40	
10	1	.174	.120						0	22						40	
11	3	.142	.126						130	20						40	
12	3	.161	.113						110	20						40	
13	3	.157	.108						90	20						40	
14	3	.145	.121						70	20						40	
15	3	.128	.118						50	20						40	
16	1	.131	.120						30	20						40	
17	1	.127	.114						10	20						40	
18	3	.113	.106						84	22						40	
19	3	.130	.118						64	20						40	
20	3	.138	.122						44	20						40	
21	3	.141	.128						22	22						40	
22	3	.129	.116						2	20						40	
23	1	.136	.121						132	20						40	
24	1	.158	.136						110	22						40	
25	3	.130	.124						88	22						40	
26	3	.134	.128						68	20						40	
27	3	.123	.103						46	22						40	
28	3	.130	.103						26	20						40	
29	3	.182	.159						4	22						40	
30	1	.186	.142						130	24						40	
31	1	.168	.122						108	22						40	
TOTAL	73	4318	3636						2056	644						1240	
MAX.	3	186	.159						146	24						40	
MIN.	1	.099	.097						0	20						40	
AVERAGE	2	139	.117						66	21						40	

.ORIDA
MENTAL REGULATION

OPERATION REPORT

NAME OF PLANT: Plantation Bay
UTILITY COMPANY: Plantation Bay
MONTH: August
COUNTY: Flagler
I.D. NO.:
YEAR: 2003
TOTAL METERED SERVICES AT END OF MONTH:

CHEMICAL AND PHYSICAL RESULTS (P. P. M.)

GES (P. P. M.) OTHER: FLUORIDE, AS F	RAW: pH	RAW: M O. ALK.	RAW: HARDNESS TOTAL	RAW: HARDNESS CALCIUM	RAW: HARDNESS MAGNESIUM	RAW: CO_2 CALC	RAW: IRON, AS FE	RAW: COLOR, UNITS	SETTLED: pH	SETTLED: AS $CaCO_3$ P ALK.	SETTLED: AS $CaCO_3$ M ALK.	SETTLED: AS $CaCO_3$ TOTAL HDNS	SETTLED: AS $CaCO_3$ CA HDNS.	FINISHED: pH	FINISHED: P ALK.	FINISHED: M ALK.	FINISHED: TOTAL HDNS	FINISHED: CALCIUM HDNS.	FINISHED: RESIDUAL CHLORINE	FINISHED: COLOR	FINISHED: FLUORIDE, AS F	R. T.
19 20 21 22 23	24	25	26	27	28	29	30	31 32	33	34	35	36	37	38	39	40	41	42	43	44	45	46 47 48
	6.7								9.8					8.0	5	55	96	76	3/0	8		.4
	6.8								10.0					7.8	5	60	104	84	3/5	7		.5
	6.7								10.0					7.7	10	60	110	92	3/0	8		.4
	6.7								10.0					7.6	5	60	103	84	3/5	8		.5
	6.7								10.0					7.2	0	25	92	74	3/5	7		.6
	6.8								10.0					7.8	10	55	90	72	3/0	8		.8
	6.7								10.0					7.8	20	55	88	70	3/5	8		.6
	6.7								10.0					7.6	5	50	92	74	3/0	8		.6
	6.7								9.8					7.6	20	50	90	72	3/5	8		.5
	6.7								10.0					7.4	20	40	88	70	3/5	7		.4
	6.7								10.0					7.6	20	45	94	76	3/5	8		.5
	6.7								10.0					7.5	5	30	96	88	3/5	7		.6
	6.7								10.0					7.6	5	35	103	86	3/0	8		.6
	6.8								10.0					7.4	5	40	103	84	3/0	8		.5
	6.7								10.0					7.6	0	40	80	68	3/5	8		.6
	6.7								9.8					7.8	5	50	80	64	3/4	8		.7
	6.7								10.0					8.0	5	55	75	66	3/0	8		.6
	6.8								9.8					8.4	5	70	85	62	3/5	7		.6
	6.7								10.0					8.0	10	50	90	68	3/5	6		.5
	6.7								9.8					7.8	5	45	92	70	3/0	8		.4
	6.7								9.8					7.6	0	40	98	76	3/5	7		.6
	6.7								10.0					7.8	0	35	104	82	3/0	5		.8
	6.7								10.0					8.0	5	40	108	86	3/0	6		.5
	6.7								10.0					7.8	5	35	124	96	3/5	5		.4
	6.7								10.0					7.6	0	45	103	82	3/0	6		.5
	6.7								9.8					7.4	0	60	124	98	3/0	8		.6
	6.7								10.0					7.5	0	45	102	80	3/0	8		.4
	6.8								10.0					7.2	0	50	102	82	3/5	6		.4
	6.7								10.0					7.6	0	50	92	70	3/0	7		.5
	6.8								10.0					7.5	0	60	86	66	3/5	8		.5
	6.7								9.8					7.7	0	45	86	64	3/0	7		.6
	208.3								304.4					337	175	1475	3372	2788	99.8	326		16.7
	6.8								10.0					8.4	20	80	120	96	3.5	8		.8
	6.7								9.8					7.2	0	30	75	62	2.6	5		.4
	6.7								9.9					7.7	6	48	96	77	3.2	7		.5

STATE C
DEPARTMENT OF ENVI

WATER TREATMENT PLA

CHIEF OPERATOR SIGNATURE: Glenn Wetherell ©02679 LIST OPERATORS' NAMES: Glenn WETHERELL
HOW MANY OTHER OPERATORS? WETHERELL TREATMENT SYSTEM
NOTE: GIVE REMARKS ON PLANT OPERATION ON REVERSE SIDE. 600 Hull Road
ORMOND BEACH, FLORIDA 32174

DATE	HRS. PLANT OPERATION	TOTAL RAW WATER PUMPED (THOU. OF GALS.)	TOTAL WATER TREATED LEAVING PLANT (THOU. OF GALS.)	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS: TOTAL	MAXIMUM	MINIMUM	FILTER DATA: TOTAL WASH WATER (THOU. OF GALS.)	CHEMICALS: POUNDS USED: LIME	CHLORINE, PRE	CHLORINE, POST	FLUORIDE CHEMICAL	OTHER				D: LIME
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1	3	.156	.132						84	24						40
2	3	.226	.298						49	35						40
3	3	.235	.282						7	42						40
4	3	.398	.332						118	44						40
5	3	.264	.292						82	36						40
6	1	.278	.238						40	40						40
7	1	.264	.220						5	35						40
8	3	.254	.233						125	30						40
9	3	.222	.209						100	25						40
10	3	.209	.205						70	30						40
11	3	.215	.211						45	30						40
12	3	.197	.186						15	30						40
13	1	.183	.180						135	30						40
14	1	.192	.206						115	20						40
15	3	.172	.152						90	25						40
16	3	.183	.129						70	20						40
17	3	.147	.126						50	20						40
18	3	.152	.132						30	20						40
19	3	.145	.138						8	22						40
20	1	.151	.143						138	20						40
21	1	.154	.136						116	22						40
22	3	.194	.111						96	20						40
23	3	.131	.120						76	20						40
24	3	.128	.096						56	20						40
25	3	.116	.091						36	20						40
26	3	.123	.093						16	20						40
27	1	.118	.090						146	20						40
28	1	.126	.095						125	21						40
29	3	.159	.164						104	21						40
30	3	.146	.096						84	20						
31																
TOTAL		5650	5076						2231	782						1200
MAX.		.398	.332						138	44						40
MIN.		.116	.090						5	20						40
AVERAGE		.188	.169						74	26						40

.ORIDA
MENTAL REGULATION

T OPERATION REPORT

NAME OF PLANT: Plantation Bay
UTILITY COMPANY: Plantation Bay
MONTH: SEPTEMBER
COUNTY: FLAGLER
I.D. NO.:
YEAR: 2003
TOTAL METERED SERVICES AT END OF MONTH:

CHEMICAL AND PHYSICAL RESULTS (P. P. M.)

GES (P. P. M.)						RAW								SETTLED					FINISHED											
OTHER								HARDNESS						AS CACO3																
	FLUORIDE, AS F					pH	M O. ALK.	TOTAL	CALCIUM	MAGNESIUM	CO2 CALC	IRON, AS FE	COLOR, UNITS	pH	P ALK.	M ALK.	TOTAL HDNS	CA HDNS.	pH	P ALK.	M ALK.	TOTAL HDNS	CALCIUM HDNS.	RESIDUAL CHLORINE	COLOR	FLUORIDE, AS F	R. T.			
19	20	21	22	23		24	25	26	27	28	29	30	31	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	
						6.7		360	340	20				10.0					7.4		50	86	66	3.5	8		.6			
						6.8		376	358	18				10.0					7.6		45	103	82	3.0	6		.5			
						6.7		360	344	16				10.0					7.4		65	103	80	3.0	6		.6			
						6.7		360	340	20				10.0					7.5		60	120	100	3.5	7		.8			
						6.7		360	338	22				10.0					7.4		55	103	80	3.0	7		.9			
						6.8		376	360	16				9.8					7.6		60	120	100	3.8	6		.7			
						6.7		360	340	20				10.0					7.5		50	86	66	3.0	7		.6			
						6.7		360	340	20				10.0					7.4		55	103	80	3.5	8		.7			
						6.7		360	344	16				10.0					7.6		60	126	100	3.0	8		.6			
						6.7		360	340	20				10.0					7.8		50	103	80	3.6	8		.8			
						6.7		376	360	16				9.8					7.6		55	120	80	3.8	7		.7			
						6.8		376	358	18				10.0					7.5		60	120	80	3.0	8		.6			
						6.7		360	340	20				10.0					7.5		55	103	80	3.0	7		.6			
						6.7		360	340	20				10.0					7.4		55	120	100	3.2	8		.7			
						6.8		376	358	18				10.0					7.2		50	120	100	3.6	8		.6			
						6.7		376	354	22				10.0					7.6		50	103	80	3.8	8		.6			
						6.7		360	340	20				9.8					7.8		60	103	80	3.0	7		.7			
						6.7		380	360	20				10.0					7.8		50	103	80	3.0	8		.7			
						6.7		380	364	16				10.0					7.6		65	103	80	3.5	8		.5			
						6.7		360	340	20				10.0					7.5		60	120	100	3.0	7		.6			
						6.7		360	340	20				10.0					7.4		65	120	100	3.5	8		.5			
						6.8		376	354	22				9.8					7.6		60	103	80	3.0	7		.6			
						6.8		376	360	16				10.0					7.8		70	103	80	3.8	8		.7			
						6.7		376	354	22				10.0					8.0		60	120	100	3.8	8		.8			
						6.7		360	340	20				10.0					8.2		65	103	80	3.6	8		.5			
						6.7		360	342	18				10.0					7.8		80	120	100	3.0	7		.4			
						6.7		376	356	20				10.0					7.8		75	103	80	3.0	8		.6			
						6.8		360	336	24				10.0					7.6		80	103	80	3.6	6		.4			
						6.7		360	342	18				10.0					7.8		80	103	80	3.8	7		.6			
						6.7		360	344	16				10.0					7.6		70	103	80	3.5	8		.8			
						20.7		1008	1008	576				299.2					238.3		1815	3244	2655	899	222		19.0			
						6.8		380	358	22				10.0					8.2		80	126	100	3.5	8		.9			
						6.7		360	336	16				9.8					7.2		45	86	66	3.6	6		.4			
						6.7		366	348	19				10					7.6		61	108	85	3.0	7		.6			

STATE
DEPARTMENT OF ENV

WATER TREATMENT PL

CHIEF OPERATOR SIGNATURE: H. Wetherell CO2694

HOW MANY OTHER OPERATORS? _____

NOTE: GIVE REMARKS ON PLANT OPERATION ON REVERSE SIDE.

LIST OPERATORS' NAMES: Glenn Wetherell

Wetherell Treatment Sys

600 Hull Road

Ormond Beach, Florida 32174

DATE	HRS. PLANT OPERATION	TOTAL RAW WATER PUMPED (THOU. OF GALS.)	TOTAL WATER TREATED LEAVING PLANT (THOU. OF GALS.)	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS TOTAL	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS MAXIMUM	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS MINIMUM	FILTER DATA: TOTAL WASH WATER (THOU. OF GALS.)	CHEMICALS: POUNDS USED: LIME	CHLORINE, PRE	CHLORINE, POST	FLUORIDE CHEMICAL	OTHER	OTHER	OTHER	OTHER	LIME
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1	3	.131	.114					228	64	20						40
2	3	.144	.124					250	44	20						40
3	3	.139	.135					276	22	22						40
4	1	.148	.132					266	150	22						40
5	1	.155	.119					244	130	20						40
6	3	.158	.138					282	118	22						40
7	3	.163	.142					288	95	23						40
8	3	.148	.127					264	73	22						40
9	3	.160	.133					272	51	23						40
10	3	.153	.142					284	38	23						40
11	1	.147	.116					230	16	22						40
12	1	.156	.134					268	145	23						40
13	3	.143	.127					260	123	22						40
14	3	.134	.139					292	100	23						40
15	3	.154	.141					282	77	23						40
16	3	.161	.126					264	57	20						40
17	3	.149	.118					246	37	20						40
18	1	.157	.130					272	17	20						40
19	1	.153	.124					254	147	20						40
20	3	.158	.133					278	125	22						40
21	3	.143	.121					252	104	21						40
22	3	.169	.137					286	82	22						40
23	3	.172	.146					298	60	22						40
24	3	.203	.153					310	37	23						40
25	1	.184	.145					296	15	22						40
26	1	.176	.136					280	143	22						40
27	3	.169	.151					306	119	24						40
28	3	.182	.157					318	95	24						40
29	3	.177	.149					304	72	23						40
30	3	.166	.138					292	50	22						40
31	3	.184	.162					336	24	26						40
TOTAL	77	4936	4189					8578	2430	682						1240
MAX.	3	.203	.162					336	147	26						40
MIN.	1	.131	.114					228	15	20						40
AVERAGE	2	.159	.135					277	78	22						40

F F FLORIDA
IC ONMENTAL REGULATION

NT OPERATION REPORT

NAME OF PLANT: PLANTation Bay
UTILITY COMPANY: Plantation Bay
MONTH: OctoBER
COUNTY: FIAGIER
I.D. NO.:
YEAR: 2003
TOTAL METERED SERVICES AT END OF MONTH:

SAGES (P. P. M.)						CHEMICAL AND PHYSICAL RESULTS (P. P. M.)																				
		OTHER				RAW								SETTLED					FINISHED								
								HARDNESS						AS CACO3													
CHLORINE, POST	FLUORIDE, AS F					pH	M.O. ALK.	TOTAL	CALCIUM	MAGNESIUM	CO2 CALC	IRON, AS FE	COLOR, UNITS	pH	P ALK.	M ALK.	TOTAL HDNS	CA HDNS.	pH	P ALK.	M ALK.	TOTAL HDNS	CALCIUM HDNS.	RESIDUAL CHLORINE	COLOR	FLUORIDE, AS F	R. T.
18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
10						6.7		420	376	44					10.0					7.6		75	103	80	3/0	7		.8		
10						6.8		420	360	60					9.8					7.6		80	107	80	3/6	7		1.0		
10						6.7		420	360	60					10.0					7.8		65	120	100	3/0	8		.8		
15						6.7		400	360	40					10.0					7.5		60	120	100	2/6	6		1.2		
15						6.7		400	376	24					9.8					7.5		70	120	100	3/2	7		1.5		
10						6.8		420	360	60					9.6					7.4		60	103	80	3/5	7		1.2		
15						6.7		400	360	40					9.8					7.2		70	103	80	3/0	6		1.0		
15						6.7		400	376	24					10.0					7.6		55	103	80	3/5	5		.8		
15						6.7		400	376	24					10.0					7.8		60	103	80	3/0	6		.8		
10						6.9		420	360	60					10.0					7.4		50	120	100	3/0	6		.6		
15						6.8		420	360	60					9.8					7.3		55	137	120	3/5	7		.9		
15						6.7		400	376	24					9.6					7.6		60	137	120	3/8	7		.8		
15						6.8		380	360	20					9.5					7.8		65	120	100	3/6	8		.7		
15						6.7		400	376	24					9.6					8.1		70	120	100	3/5	5		.6		
15						6.7		400	360	20					9.8					8.0		65	103	80	3/6	6		.5		
15						6.7		420	376	44					10.0					7.8		55	103	80	3/8	8		.6		
15						6.7		420	376	44					10.0					7.6		50	103	80	3/0	6		.9		
15						6.7		420	376	44					10.0					7.6		60	103	80	3/0	5		1.1		
15						6.7		400	360	20					10.0					7.4		60	103	80	3/5	4		1.2		
15						6.7		400	360	40					10.0					7.2		65	103	80	3/0	6		1.0		
15						6.8		420	360	60					10.0					7.0		60	120	100	3/8	6		.8		
15						6.7		420	376	44					9.8					7.2		55	103	80	3/0	6		.7		
15						6.7		400	376	24					9.8					7.4		50	103	80	3/0	5		.6		
15						6.7		400	360	20					9.6					7.5		60	120	100	3/2	6		.7		
15						6.7		420	376	44					9.5					7.6		60	120	100	3/6	7		.9		
15						6.7		400	376	24					9.4					7.4		50	103	80	3/5	6		1.0		
15						6.7		420	360	60					9.8					7.5		60	103	80	3/8	8		1.1		
15						6.7		400	360	20					10.0					7.8		55	103	80	3/6	6		.8		
15						6.7		400	376	24					10.0					7.8		65	120	100	3/0	7		.7		
15						6.7		400	376	24					10.0					7.6		70	103	80	3/0	7		.7		
15						6.7		420	360	60					9.8					7.4		60	120	100	3/5	5		.6		
440						228.4		12660	11400	1183					30.5					234		1895	3455	2880	877	196		26.6		
15						6.9		420	376	60					10.0					8.1		80	137	120	3.5	8		1.5		
10						6.7		380	360	20					9.8					7.0		50	103	80	9.0	4		.5		
14						6.7		408	368	38					9.8					7.5		61	111	80	9.8	6		.9		

DEPARTME

WATER TREATMEN

CHIEF OPERATOR SIGNATURE: [signature]

HOW MANY OTHER OPERATORS? 2

NOTE: GIVE REMARKS ON PLANT OPERATION ON REVERSE SIDE.

LIST OPERATORS' NAMES: GLENN WE
WETHERELL TREATMENT
600 Hull Road
ORMOND BEACH FLORIDA

DATE	HRS. PLANT OPERATION	TOTAL RAW WATER PUMPED (THOU. OF GALS.)	TOTAL WATER TREATED LEAVING PLANT (THOU. OF GALS.)	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS — TOTAL	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS — MAXIMUM	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS — MINIMUM	FILTER DATA: TOTAL WASH WATER (THOU. OF GALS.)	CHEMICALS: POUNDS USED — LIME	CHLORINE. PRE	CHLORINE. POST	FLUORIDE CHEMICAL	OTHER	OTHER	OTHER
	1	2	3	4	5	6	7	8	9	10	11	12	13	14
1	1	.167	.148					310	148	20				
2	1	.156	.121					252	128	20				
3	3	.169	.123					248	110	18				
4	3	.164	.124					252	95	15				
5	3	.152	.128					260	75	20				
6	3	.144	.133					266	53	22				
7	3	.149	.107					272	29	24				
8	1	.141	.145					290	14	15				
9	1	.146	.139					280	146	14				
10	3	.138	.128					260	126	20				
11	3	.134	.130					262	103	23				
12	3	.146	.102					204	83	20				
13	3	.132	.145					294	65	18				
14	3	.117	.139					286	43	22				
15	1	.148	.128					278	27	16				
16	1	.171	.180					364	149	25				
17	3	.162	.157					310	132	17				
18	3	.157	.156					306	109	23				
19	3	.152	.149					302	89	20				
20	3	.154	.144					296	69	20				
21	3	.172	.189					386	53	16				
22	1	.169	.146					298	29	24				
23	1	.175	.170					356	9	20				
24	3	.166	.148					302	145	18				
25	3	.168	.153					314	125	20				
26	3	.155	.137					282	106	19				
27	3	.172	.142					294	104	22				
28	3	.169	.138					384	84	20				
29	1	.178	.152					316	66	18				
30	1	.159	.141					282	46	20				
31														
TOTAL	70	4682	4242					8700	2560	589				
MAX.	3	.178	.189					384	149	24				
MIN.	1	.117	.102					204	9	14				
AVERAGE	2	.156	.141					290	85	20				

TATE OF FLORIDA
E ENVIRONMENTAL REGULATION

PLANT OPERATION REPORT

REEL
STE
2174

NAME OF PLANT: Plantation Bay
UTILITY COMPANY: Plantation Bay
MONTH: NOVEMBER
TOTAL METERED SERVICES AT END OF MONTH:

COUNTY: Flagler
I.D. NO.:
YEAR: 2003

DOSAGES (P.P.M.)							CHEMICAL AND PHYSICAL RESULTS (P.P.M.)																					
							RAW									SETTLED					FINISHED									
									HARDNESS							AS CACO3													
LIME		CHLORINE, POST	OTHER				pH	M.O. ALK.	TOTAL	CALCIUM	MAGNESIUM	CO_2 CALC	IRON, AS FE	COLOR, UNITS		pH	P ALK.	M ALK.	TOTAL HDNS	CA HDNS.	pH	P ALK.	M ALK.	TOTAL HDNS.	CALCIUM HDNS.	RESIDUAL CHLORINE	COLOR	FLUORIDE, AS F	R.T.
			FLUORIDE, AS F																									
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
40		15						6.7		360	340	20					10.0					7.5		8.0	103	80	3/8	7		.7		
40		15						6.7		380	362	18					10.0					7.7		6.5	103	80	3/8	8		.8		
40		15						6.7		380	358	22					9.8					7.5		7.5	103	80	3/5	8		.8		
40		15						6.7		360	344	16					10.0					7.6		7.5	126	100	3/6	7		.6		
40		15						6.7		380	362	18					10.0					7.5		6.0	103	80	3/5	8		.5		
40		15						6.7		360	340	20					10.0					7.4		8.0	103	80	3/0	8		.6		
40		15						6.7		380	359	21					10.0					7.2		7.5	126	100	3/8	7		.4		
40		15						6.8		360	344	16					9.8					7.2		6.0	126	100	3/0	6		.5		
40		15						6.7		360	338	22					9.8					7.4		5.5	103	80	3/8	5		.6		
40		15						6.7		380	362	18					10.0					7.2		6.5	126	100	3/6	6		.7		
40		15						6.7		360	340	20					10.0					7.2		6.0	126	100	3/5	5		.5		
40		15						6.7		380	362	18					10.0					7.6		7.0	103	80	3/0	6		.5		
40		15						6.7		360	340	20					10.0					7.2		6.5	103	80	3/5	6		.6		
40		15						6.7		360	340	20					10.0					7.2		5.5	103	80	3/5	7		.5		
40		15						6.7		393	377	16					10.0					7.2		5.0	103	80	3/6	8		.4		
40		15						6.8		376	358	18					9.6					7.4		6.0	126	100	3/2	5		.6		
40		15						6.7		376	356	20					9.8					7.5		6.0	103	100	3/0	5		.7		
40		15						6.7		393	375	18					9.6					7.4		5.5	103	80	3/8	6		.8		
40		15						6.7		360	338	22					9.6					7.8		6.5	103	100	3/4	5		.9		
40		15						6.7		368	342	18					10.0					7.6		7.0	126	100	3/5	5		1.0		
40		15						6.7		376	358	18					10.0					7.4		7.5	126	100	3/6	7		1.1		
40		15						6.7		360	340	20					9.8					7.5		6.5	103	80	3/0	6		1.2		
40		15						6.7		376	366	16					10.0					7.6		6.0	126	100	3/0	5		.8		
40		15						6.7		360	340	20					10.0					7.2		5.5	103	80	3/8	6		.5		
40		15						6.7		360	339	21					10.0					7.6		7.6	103	80	3/0	5		.6		
40		15						6.8		360	336	24					10.0					6.9		8.0	103	80	3/5	5		.7		
40		15						6.7		376	360	16					10.0					7.1		7.5	103	80	3/8	6		.6		
40		15						6.7		360	342	18					10.0					7.3		8.0	126	100	3/0	5		.5		
40		15						6.8		393	372	26					9.8					7.5		6.5	103	80	3/6	7		.8		
40		15						6.8		393	377	16					10.0					7.8		6.0	120	100	3/5	5		.8		
200		4550						201.5		11137	5689	5570					297.6					221.4		198.5	3477	2660	89.1	185		20.3		
40		15						6.8		393	369	24					10.0					7.8		8.0	126	100	3.5	8		1.2		
40		15						6.7		360	344	16					9.6					6.9		5.0	103	80	1.9	5		.4		
40		15						6.7		377	363	19					9.9					7.4		6.6	109	89	2.7	6		.7		

STATE O
DEPARTMENT OF ENVI

WATER TREATMENT PLA

CHIEF OPERATOR SIGNATURE: [signature]
HOW MANY OTHER OPERATORS?
NOTE: GIVE REMARKS ON PLANT OPERATION ON REVERSE SIDE.

LIST OPERATORS' NAMES: Glenn Wetherell
WETHERELL TREATMENT
600 Hull Road
ORMOND BEACH, FLORIDA 32174

DATE	HRS. PLANT OPERATION	TOTAL RAW WATER PUMPED (THOU. OF GALS.)	TOTAL WATER TREATED LEAVING PLANT (THOU. OF GALS.)	FILTER DATA: HOURS FILTER RUNS BETWEEN WASHINGS: TOTAL	MAXIMUM	MINIMUM	TOTAL WASH WATER (THOU. OF GALS.)	CHEMICALS: POUNDS USED: LIME	CHLORINE. PRE	CHLORINE. POST	FLUORIDE CHEMICAL	OTHER				DO: LIME	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	1
1	3	.163	.146					294	140	20						40	
2	3	.170	.129					266	126	20						40	
3	3	.156	.138					282	106	20						40	
4	3	.164	.144					310	78	22						40	
5	3	.148	.126					252	58	20						40	
6	1	.171	.134					268	38	20						40	
7	1	.153	.121					294	18	20						40	
8	3	.169	.147					302	136	22						40	
9	3	.155	.151					312	114	22						40	
10	3	.151	.131					264	94	20						40	
11	3	.174	.146					298	72	22						40	
12	3	.162	.135					276	52	20						40	
13	1	.183	.139					284	32	20						40	
14	1	.136	.143					292	10	22						40	
15	3	.145	.144					306	138	22						40	
16	3	.203	.126					252	118	20						40	
17	3	.105	.104					212	98	20						40	
18	3	.163	.146					292	76	22						40	
19	3	.147	.152					310	59	22						40	
20	1	.102	.123					148	34	20						40	
21	1	.168	.136					176	14	20						40	
22	3	.181	.146					304	142	22						40	
23	3	.142	.136					282	122	20						40	
24	3	.144	.132					280	102	20						40	
25	3	.155	.148					310	80	22						40	
26	3	.151	.163					326	58	22						40	
27	1	.172	.159					304	36	22						40	
28	1	.168	.164					310	12	24						40	
29	3	.159	.148					296	142	20						40	
30	3	.166	.139					282	122	20						40	
31	3	.158	.152					304	102	20						40	
																40	
TOTAL	77	4884	4348					8588	2517	648							
MAX.	3	.203	.163					326	142	24						40	
MIN.	1	.136	.104					148	10	20						40	
AVERAGE	2	.158	.140					277	81	21						40	

FLORIDA
ONMENTAL REGULATION

NT OPERATION REPORT

NAME OF PLANT: Plantation Bay
UTILITY COMPANY: Plantation Bay
MONTH: DECEMBER
COUNTY: FLAGLER
I.D. NO.:
YEAR: 2003
TOTAL METERED SERVICES AT END OF MONTH:

CHEMICAL AND PHYSICAL RESULTS (P. P. M.)

SAGES (P. P. M.)						RAW								SETTLED					FINISHED									
	OTHER							HARDNESS							AS CACO3													
CHLORINE, POST	FLUORIDE, AS F					PH	M O. ALK.	TOTAL	CALCIUM	MAGNESIUM	CO2 CALC	IRON, AS FE	COLOR, UNITS	PH	P ALK.	M ALK.	TOTAL HDNS	CA HDNS.	PH	P ALK.	M ALK.	TOTAL HDNS	CALCIUM HDNS.	RESIDUAL CHLORINE	COLOR	FLUORIDE AS F	R. T.	
18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
1.5						6.7		393						9.8					7.4			103	80	3/8	6		.9		
1.5						6.7		393						10.0					7.4			103	80	3/6	5		.8		
1.5						6.7		376						10.0					7.6			120	100	3/5	6		.9		
1.5						6.8		393						10.0					7.8			126	100	3/5	6		1.1		
1.5						6.7		360						10.0					7.6			120	100	3/0	5		.7		
1.5						6.7		380						9.8					7.5			103	80	3/2	4		.8		
1.5						6.7		360						10.0					7.4			103	80	3/6	6		.6		
1.5						6.7		360						10.0					7.6			120	100	3/0	7		.5		
1.5						6.7		380						10.0					7.2			103	80	3/5	6		.6		
1.5						6.8		393						10.0					7.6			103	80	3/5	5		.8		
1.5						6.7		380						9.8					7.2			120	100	3/0	5		.7		
1.5						6.7		393						9.8					7.4			103	80	3/5	4		.6		
1.5						6.7		380						10.0					7.6			103	80	3/0	5		.5		
1.5						6.7		380						9.8					7.5			126	100	3/0	5		.6		
1.5						6.7		393						9.6					7.4			126	100	3/5	6		.7		
1.5						6.7		380						9.8					7.2			103	80	3/5	5		.6		
1.5						6.7		380						9.8					7.2			103	80	3/5	5		.6		
1.5						6.7		393						10.0					7.4			120	100	3/5	5		.8		
1.5						6.7		380						10.0					7.2			120	100	3/0	5		.7		
1.5						6.7		380						10.0					7.4			120	100	3/5	6		.8		
1.5						6.7		393						9.8					7.6			103	80	3/5	5		.7		
1.5						6.7		380						10.0					7.5			103	80	3/5	5		.8		
1.5						6.7		380						10.0					7.5			103	80	3/5	5		1.1		
1.5						6.7		360						10.0					7.4			103	80	3/0	4		1.2		
1.5						6.7		360						10.0					7.5			103	80	3/5	4		1.0		
1.5						6.7		360						10.0					7.5			103	80	3/5	5		1.0		
1.5						6.7		393						9.8					7.6			120	100	3/0	4		.8		
1.5						6.7		396						10.0					7.6			103	80	3/5	4		1.1		
1.5						6.7		393						10.0					7.8			103	80	3/5	5		.9		
1.5						6.7		380						9.8					7.6			103	80	3/5	4		1.0		
1.5						6.7		360						10.0					7.8			103	80	3/5	4		1.2		
1.65						207.9		1178						307.6					7.32			332	220	10.6	156		5.1		
1.5						6.8		396						10.0					7.8			120	100	3.5	7		1.2		
1.5						6.7		360						9.6					7.2			103	80	7.6	4		.5		
1.5						6.7		384						9.9					7.5			107	87	3.3	5		.8		

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:	Plantation Bay Utility Company	PERMIT NUMBER:	FLA011597-001-DW1R		
MAILING ADDRESS:	2359 Beville Road	LIMIT:	Final	REPORT:	Monthly
	Daytona Beach, FL 32119	CLASS SIZE:	Minor	GROUP:	Domestic
		GMS ID NO.:	3118P00486	GMS TEST SITE NO.:	3118X12506
FACILITY:	Plantation Bay WWTP	DISCHARGE POINT NUMBER:	R001		
LOCATION:	Old Dixie Highway, West of I-95	PLANT SIZE/TREATMENT TYPE:	IC		
	Ormond Beach, FL 32174	NO DISCHARGE FROM SITE:	[ ]		
COUNTY:	Flagler				

MONITORING PERIOD From: 1-1-04 To: 1-31-04

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.120		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.133		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.7		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.6	6.7	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						3.8	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.7		6.8	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	S.U.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	2-10-04

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWTR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml	0	4 days	grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.8			mg/l	0	Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					175		mg/l	0	Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					167		mg/l	0	Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

Number: FLA011597-001-DWIR
th/Year: January 2004

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg L)	TSS (mg/L)			
de	50050	80082	00530	00400	31615	50060	80082	00530			
n. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
	.136			6.7		2.1					
	.143		2.8	6.7	<2	2.2					
3	.128			6.7		2.2					
	.134			6.7		2.0					
	.141		2.4	6.7	<2	1.8					
6	.123			6.7		2.2					
	.135	6.7	3.2	6.7	<2	2.2	187	172			
8	.128			6.7		2.2					
	.143		2.8	6.7	<2	2.2					
	.135			6.7		2.2					
1	.128			6.7		1.9					
	.133		2.4	6.8	<2	2.2					
	.126			6.7		2.2					
4	.141		3.2	6.7	<2	2.2					
	.138			6.7		2.2					
6	.130		3.8	6.8	<2	2.0					
	.146			6.7		2.2					
	.126			6.7		1.8					
9.	.153		3.0	6.7	<2	2.2					
	.137			6.7		2.2					
	.141	4.4	2.6	6.7	<2	2.2	163	162			
2	.132			6.8		2.2					
	.128		2.6	6.7	<2	2.2					
4	.136			6.7		2.0					
	.121			6.7		1.9					
	.132		2.4	6.7	<2	2.2					
	.126			6.7		2.2					
	.122		3.4	6.7	<2	2.2					
	.126			6.7		2.2					
	.134		3.3	6.7	<2	2.2					
	.123			6.7		2.2					

STAFFING:

Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
Shift Operator	Class:	Certificate No:		Name:	
hift Operator	Class:	Certificate No:		Name:	
perator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

Effluent Disposal or Reclaimed Water Reuse: Pond

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

additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-061-DWIR
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 2-1-04 To: 2-29-04

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.116		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon Site No. EFA-1	Permit Requirement	0.475 (An Avg)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.134		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon Site No. EFA-1	Permit Requirement	Report (Mo Avg)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement				5.9			mg/l	0	Two Weeks	FPC
PARM Code 80082 1 Mon Site No. EFA-1	Permit Requirement				20.0 (An Avg)			mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement				5.7	7.9		mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon Site No. EFA-1	Permit Requirement				Report (Mo Avg)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					3.6		mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon Site No. EFB-1	Permit Requirement					5.0 (Max)		mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.7	6.9		s.u.	0	Daily	Grab
PARM Code 00400 1 Mon Site No. EFA-1	Permit Requirement				6.0 (Min)	8.5 (Max)		s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	3-11-04

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWIR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml	0	4 days	grab
PARM Code 74055 I Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.7			mg/l	0	Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					196		mg/l	0	Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (No Avg)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					150		mg/l	0	Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (Mo Avg)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

itNumber: FLA011597-001-DWIR

hYear: February 2004

	Flow (MGD)	CBODS (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBODS (mg L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
n. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.139			6.7		2.2					
2	.144		2.4	6.7	<2	2.2					
3	.133			6.7		1.9					
4	.121	7.9	3.0	6.7	<2	2.1	188	157			
5	.133			6.7		2.2					
6	.134			6.7		2.2					
7	.122		3.2	6.7	<2	2.2					
8	.147			6.7		2.0					
9	.167		2.4	6.7	<2	1.7					
10	.122			6.7		2.1					
11	.103		2.8	6.7	<2	2.2					
12	.101			6.7		2.2					
13	.101		2.4	6.7	<2	2.2					
14	.103			6.8		2.2					
15	.099			6.8		2.2					
16	.174		3.2	6.8	<2	2.2					
17	.152			6.9		2.2					
18	.178	3.5	2.6	6.8	<2	2.2	204	143			
19	.164			6.8		2.2					
20	.182		2.6	6.9	<2	2.2					
21	.135			6.9		2.2					
22	.141			6.9		2.1					
23	.167		3.4	6.8	<2	2.2					
24	.141			6.8		2.2					
25	.104		3.0	6.9	<2	2.2					
26	.112			6.9		2.2					
27	.132		3.6	6.8	<2	2.0					
28	.111			6.8		2.2					
29	.124			6.9		2.2					
30											
31											

NT STAFFING:

Shift Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
ing Shift Operator	Class:	Certificate No:		Name:	
t Shift Operator	Class:	Certificate No:		Name:	
l Operator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

: of Effluent Disposal or Reclaimed Water Reuse: Pond

ted Wet Weather Discharge Activated: Yes: No: Not Applicable: If yes, cumulative days of wet weather discharge:

ch additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-001-DWIR
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 3-1-04 To: 3-31-04

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.116		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-J	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.111		MGD						Daily	Flow Meter
PARM Code 50050 I Mon.Site No. EFA-I	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.6		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-I	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.0	4.6	mg/l	0	two weeks	FPC
PARM Code 80082 I Mon.Site No. EFA-I	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						3.4	mg/l	0	4 day week	Grab
PARM Code 00530 I Mon.Site No. EFB-I	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.8		7.0	S.U.	0	Daily	Grab
PARM Code 00400 I Mon.Site No. EFA-I	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	4-11-04

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011597-001-DWTR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					<2	<2	100ml	0	4 days	grab
PARM Code 74055 I Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.7			mg/l	0	Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					182		mg/l	0	Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					177		mg/l	0	Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

FLA011597-001-DWIR

March 2004

Three-month Average Daily Flow:

(TMADF/Permitted Capacity)x100:

...D)	CBODS (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBODS (mg L)	TSS (mg/L)			
50	80082	00530	00400	31615	50060	80082	00530			
FA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
98		2.6	6.9	<2	2.0					
07			7.0		2.2					
103	4.6	2.4	7.0	<2	2.2	184	194			
15			6.9		2.2					
10		2.6	7.0	<2	2.2					
21			6.9		2.2					
03			6.9		2.2					
111		2.8	7.0	<2	2.2					
06			7.0		1.7					
04		3.4	7.0	<2	2.2					
131			6.9		2.2					
16		2.4	6.8	<2	2.0					
728			6.9		2.2					
106			7.0		2.2					
02		2.0	6.9	<2	2.2					
096			7.0		2.0					
45	3.4	2.6	7.0	<2	2.2	180	159			
730			6.9		1.8					
637		2.4	7.0	<2	2.2					
108			6.9		2.1					
112			7.0		1.9					
102		2.0	6.9	<2	2.2					
094			6.9		2.0					
093		2.2	7.0	<2	2.2					
103			7.0		2.1					
111		2.8	7.0	<2	2.2					
104			7.0		2.2					
112			6.9		2.2					
112		2.0	7.0	<2	2.1					
103			7.0		2.2					
108		2.4	6.9	<2	2.2					

...FFING:

...ator Class: C Certificate No: C.O. 7365 Name: Scott Kelley

...Operator Class: _____ Certificate No: _____ Name: _____

...perator Class: _____ Certificate No: _____ Name: _____

...or Class: C Certificate No: C.O. 1218 Name: Glenn D. Wetherell

...t: Disposal or Reclaimed Water Reuse: Pond

...Weather Discharge Activated: Yes: No: Not Applicable: If yes, cumulative days of wet weather discharge: _____

...al sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

hen Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-001-DW1R
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 4-1-04 To: 4-30-04

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.115		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.101		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.4		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					3.4	3.4	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						3.6	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFD-1	Permit Requirement						5.0 (Max)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.8		7.0	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	5-11-04

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

sion 6/10/98

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWTR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					<2	<2	100ml	0	4 days	grab
PARM Code 74055 1 Mon Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.7			mg/l	0	Daily	Grab
PARM Code 50060 A Mon Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					187		mg/l	0	Two Weeks	FPC
PARM Code 80082 G Mon Site No. INF-1	Permit Requirement					Report (No Avg)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					186		mg/l	0	Two Weeks	FPC
PARM Code 00530 G Mon Site No. INF-1	Permit Requirement					Report (No Avg)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

mitNumber: FLA011597-001-DWIR

nth/Year: April 2004

Three-month Average Daily Flow:

(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
on. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.100			7.0		2.2					
2	.107		2.2	6.9	<2	2.2					
3	.111			6.9		2.1					
4	.105			7.0		2.2					
5	.107		1.8	7.0	<2	2.2					
6	.102			7.0		2.0					
7	.091	3.3	2.6	7.0	<2	2.2	184	193			
8	.101			6.9		2.1					
9	.092		2.6	6.9	<2	2.2					
10	.103			7.0		2.2					
11	.098			7.0		2.2					
12	.106		3.4	6.9	<2	2.2					
13	.107			7.0		2.2					
14	.102		1.8	6.9	<2	2.1					
15	.096			7.0		2.0					
16	.101		2.4	7.0	<2	2.2					
17	.101			6.8		2.2					
18	.112			6.9		2.2					
19	.099		1.8	6.9	<2	2.2					
20	.114			6.9		2.2					
21	.083	3.4	2.2	7.0	<2	2.1	189	178			
22	.099			7.0		2.0					
23	.102		3.6	7.0	<2	1.7					
24	.107			6.9		2.0					
25	.101			7.0		2.2					
26	.097		2.4	7.0	<2	2.2					
27	.106			6.9		2.2					
28	.095		3.2	7.0	<2	2.1					
29	.103			7.0		2.2					
30	.096		2.8	6.9	<2	2.2					

T STAFFING:

ift Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
g Shift Operator	Class:	Certificate No:		Name:	
Shift Operator	Class:	Certificate No:		Name:	
Operator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

Effluent Disposal or Reclaimed Water Reuse: Pond

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

additional sheets if necessary to list all certified operators.

on 6/10/98

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-001-DWIR
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT GROUP: Monthly Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 5-1-04 To: 5-31-04

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.114		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.091		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.4		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					3.1	3.6	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						3.8	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.8		7.0	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	S.U.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	6-12-04

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

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWIR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					<2	<2	100ml	0	4 days	grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.7			mg/l	0	Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					177		mg/l	0	Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					178		mg/l	0	Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

mitNumber: FLA011597-001-DWIR

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

nth/Year: May 2004

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
on. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.102			6.9		2.0					
2	.096			6.8		1.9					
3	.102		1.8	6.9	<2	1.7					
4	.095			7.0		2.2					
5	.096	3.6	1.8	7.0	<2	2.2	181	175			
6	.102			6.9		2.2					
7	.094		2.6	7.0	<2	2.2					
8	.087			7.0		2.2					
9	.093			6.9		2.1					
10	.086		2.8	7.0	<2	2.2					
11	.091			7.0		2.2					
12	.090		2.6	7.0	<2	2.2					
13	.092			6.9		2.1					
14	.087		2.8	7.0	<2	2.2					
15	.085			7.0		2.2					
16	.081			7.0		2.2					
17	.172		3.6	6.9	<2	2.2					
18	.072			7.0		2.2					
19	.073	2.5	2.4	7.0	<2	2.2	172	180			
20	.095			7.0		2.2					
21	.081		2.8	7.0	<2	2.2					
22	.074			6.9		2.0					
23	.077			7.0		1.8					
24	.072		3.8	7.0	<2	2.0					
25	.081			7.0		2.1					
26	.093		2.8	7.0	<2	2.2					
27	.081			7.0		2.2					
28	.096		2.4	6.9	<2	2.2					
29	.080			7.0		1.9					
30	.077			6.9		1.7					
31	.103		2.6	6.9	<2	2.2					

ANT STAFFING:

y Shift Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
ening Shift Operator	Class:	Certificate No:		Name:	
ght Shift Operator	Class:	Certificate No:		Name:	
ad Operator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

pe of Effluent Disposal or Reclaimed Water Reuse: Pond

nited Wet Weather Discharge Activated: Yes: No: Not Applicable: If yes, cumulative days of wet weather discharge:

tach additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-001-DW1R
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT GROUP: Monthly Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 6-1-04 To: 6-30-04

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.114		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meter
Flow	Sample Measurement	.095		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.1		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		=5'L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.1	4.6	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						4.2	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFD-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.8		7.0	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	7-10-04

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWIR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml	0	4 days
PARM Code 74055 I Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.8			mg/l	0	Daily
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily
BOD, Carbonaceous 5 day, 20C	Sample Measurement					189		mg/l	0	Two Weeks
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks
Solids, Total Suspended	Sample Measurement					196		mg/l	0	Two Weeks
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									

DAILY SAMPLE RESULTS - PART B

ermitNumber: FLA011597-001-DWIR

lonth/Year: June 2004

Three-month Average Daily Flow:

(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
Mon. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	092			6.9		2.2					
2	098	4.6	3.0	7.0	<2	2.2	191	188			
3	092			7.0		2.2					
4	081		3.8	6.8	<2	2.2					
5	084			6.9		2.2					
6	083			6.9		1.8					
7	091		2.6	7.0	<2	2.2					
8	085			6.9		2.2					
9	082		3.0	7.0	<2	2.2					
10	093			7.0		2.0					
11	084		2.8	6.9	<2	2.1					
12	.109			6.9		2.2					
13	088			6.9		2.1					
14	.128		2.6	6.9	<2	2.2					
15	.113			7.0		2.2					
16	.123	3.6	3.8	7.0	<2	2.2	186	204			
17	.096			6.9		2.2					
18	.103		2.6	7.0	<2	2.2					
19	.070			6.9		2.2					
20	.074			7.0		2.1					
21	.096		4.2	7.0	<2	2.2					
22	.106			7.0		2.2					
23	.097		2.6	7.0	<2	2.1					
24	.101			7.0		2.0					
25	.105		2.8	6.9	<2	2.2					
26	.090			6.9		2.2					
27	.105			6.8		2.2					
28	.092		3.0	6.9	<2	2.1					
29	.093			6.9		2.2					
30	.084		3.2	7.0	<2	2.2					
31											

PLANT STAFFING:

Day Shift Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
Evening Shift Operator	Class:	Certificate No:		Name:	
Night Shift Operator	Class:	Certificate No:		Name:	
Lead Operator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

Type of Effluent Disposal or Reclaimed Water Reuse: Pond

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

Attach additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-001-DW1R
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 7-1-04 To: 7-31-04

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.113		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.096		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.6		mg/l	0	Two Weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.4	4.6	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						4.4	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.8		7.0	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				5.0 (Min.)		8.5 (Max.)	S.U.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	8-10-04

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWTR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					<2	<2	100ml	0	4 days	grab
PARM Code 74055 I Mon Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.6			mg/l	0	Daily	Grab
PARM Code 50060 A Mon Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					186		mg/l	0	Two Weeks	FPC
PARM Code 80082 G Mon Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					178		mg/l	0	Two Weeks	FPC
PARM Code 00530 G Mon Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

mitNumber: FLA011597-001-DWIR
ndY'ear: July 2004

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
n. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.062			6.8		2.2					
2	.094		2.6	6.9	<2	2.2					
3	.102			7.0		2.0					
4	.089			6.9		2.1					
5	.102			7.0		2.2					
6	.104		2.6	7.0	<2	2.2					
7	.110	4.6	3.8	6.9	<2	2.1	173	188			
8	.101			7.0		2.2					
9	.091		2.8	7.0	<2	2.2					
10	.094			6.9		2.2					
11	.098			7.0		2.2					
12	.096		3.0	6.9	<2	2.2					
13	.094			6.9		2.0					
14	.107		3.4	7.0	<2	2.2					
15	.096			6.9		2.2					
16	.108		4.2	6.9	<2	1.8					
17	.084			7.0		1.6					
18	.092			6.8		1.9					
19	.087		2.4	6.9	<2	2.2					
20	.091			7.0		2.1					
21	.116	4.2	2.8	6.9	<2	2.2	198	167			
22	.081			6.9		1.9					
23	.081		2.6	6.9	<2	2.0					
24	.102			7.0		2.2					
25	.103			6.9		2.2					
26	.110		3.6	7.0	<2	2.1					
27	.095			7.0		1.9					
28	.087		4.4	6.9	<2	2.2					
29	.098			7.0		2.2					
30	.096		3.8	6.9	<2	2.0					
31	.102			7.0		1.9					

NT STAFFING:

Shift Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
ing Shift Operator	Class:	Certificate No:		Name:	
Shift Operator	Class:	Certificate No:		Name:	
Operator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

of Effluent Disposal or Reclaimed Water Reuse: Pond

ed Wet Weather Discharge Activated: Yes: No: Not Applicable: If yes, cumulative days of wet weather discharge:

n additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-061-DWIR
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT GROUP: Monthly Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 8-1-04 To: 8-31-04

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.115		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.115		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement										
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					4.9 20.0 (An.Avg.)		mg/l mg/L	0	Two Weeks Every Two Weeks	FPC 8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement										
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					6.0 Report (Mo.Avg.)	8.2 60.0 (Max.)	mg/l mg/L	0	two weeks Every Two Weeks	FPC 8-hour FPC
Solids, Total Suspended	Sample Measurement										
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						4.2 5.0 (Max.)	mg/l mg/L	0	4 day week 4 Days/Week	Grab Grab
pH	Sample Measurement										
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.8 6.0 (Min.)		7.0 8.5 (Max.)	s.u. s.u.	0	Daily Daily	Grab Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	9-15-04

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP

PERMIT NUMBER: FLA011397-001-DWTR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml		4 days	grab
PARM Code 74055 I Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.5			mg/l		Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					183		mg/l		Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					185		mg/l		Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

mitNumber: FLA011597-001-DWIR

Three-month Average Daily Flow:

(TMADF/Permitted Capacity)x100:

th/Year: August 2004

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
on. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.111			7.0		2.2					
2	.097		2.8	6.9	<2	2.2					
3	.103			6.9		2.0					
4	.084	8.2	4.2	6.9	<2	2.2	168	177			
5	.098			7.0		2.2					
6	.107		2.6	6.9	<2	2.2					
7	.114			6.9		2.1					
8	.202			7.0		1.7					
9	.102		2.0	7.0	<2	1.9					
10	.097			6.9		2.0					
11	.104		2.6	7.0	<2	2.2					
12	.109			6.9		2.2					
13	.117		3.0	7.0	<2	2.2					
14	.097			6.9		2.0					
15	.105			6.9		1.9					
16	.212			6.9		1.5					
17	.127			7.0		1.8					
18	.103	3.8	2.6	6.9	<2	2.0	198	192			
19	.091		3.8	6.9	<2	2.1					
20	.111		2.8	7.0	<2	2.2					
21	.131			6.9		2.2					
22	.139			6.9		1.9					
23	.113		3.6	6.8	<2	1.6					
24	.135			6.9		1.8					
25	.112		2.4	6.9	<2	1.6					
26	.140			6.9		1.9					
27	.104		3.8	7.0	<2	2.1					
28	.109			6.9		2.2					
29	.111			6.9		2.2					
30	.071		2.6	6.9	<2	2.2					
31	.115			7.0		2.1					

LANT STAFFING:

ay Shift Operator	Class: C	Certificate No: C.O. 7365	Name:	Scott Kelley
vening Shift Operator	Class:	Certificate No:	Name:	
ight Shift Operator	Class:	Certificate No:	Name:	
ead Operator	Class: C	Certificate No: C.O. 1218	Name:	Glenn D. Wetherell

ype of Effluent Disposal or Reclaimed Water Reuse: Pond

imited Wet Weather Discharge Activated: Yes: No: Not Applicable: If yes, cumulative days of wet weather discharge:

ttach additional sheets if necessary to list all certified operators.

ersion 6/10/98

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:	Plantation Bay Utility Company	PERMIT NUMBER:	FLA011597-001-DWIR		
MAILING ADDRESS:	2359 Beville Road	LIMIT:	Final	REPORT:	Monthly
	Daytona Beach, FL 32119	CLASS SIZE:	Minor	GROUP:	Domestic
		GMS ID NO.:	3118P00486	GMS TEST SITE NO.:	3118X12506
FACILITY:	Plantation Bay WWTP	DISCHARGE POINT NUMBER:	R001		
LOCATION:	Old Dixie Highway, West of I-95	PLANT SIZE/TREATMENT TYPE:	IC		
	Ormond Beach, FL 32174	NO DISCHARGE FROM SITE:	[ ]		
COUNTY:	Flagler				

MONITORING PERIOD From: 9-1-04 To: 9-30-04

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.115		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon Site No. EFA-1	Permit Requirement	0.475 (An Avg.)		MGD						Daily	Flow Meter
Flow	Sample Measurement	.108		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon Site No. EFA-1	Permit Requirement	Report (Mo Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.2		mg/l	0	Two Weeks	FPC
PARM Code 80082 1 Mon Site No. EFA-1	Permit Requirement					20.0 (An Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.4	5.7	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon Site No. EFA-1	Permit Requirement					Report (Mo Avg)	60.0 (Max)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						4.0	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon Site No. EFD-1	Permit Requirement						5.0 (Max.)	mg/L		4 Day/Week	Grab
pH	Sample Measurement				6.9		7.0	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max)	S.U.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	10-9-04

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011597-001-DWTR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml		4 days	grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	23 (Max)	#/100ml		1 Day/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				13			mg/l		Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					156		mg/l		Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (No Avg)		mg/L		Every Two Weeks	3-hour FPC
Solids, Total Suspended	Sample Measurement					168		mg/l		Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (No Avg)		mg/L		Every Two Weeks	3-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

Number: FLA011597-001-DWIR

Year: September 2004

Three-month Average Daily Flow:

(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBODS (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBODS (mg/L)	TSS (mg/L)			
e	50050	80082	00530	00400	31615	50060	80082	00530			
Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
	.105	3.2	2.4	6.9	<2	2.0	173	179			
	.126			7.0		2.2					
	.087			6.9		2.2					
	.081	Hurricane		7.0	—	1.4	Hurricane →				
	.072	Francs		6.9	—	1.3					
	.076			6.9		2.0		←			
	.079			7.0		2.2					
	.110		3.6	7.0	<2	2.1					
	.107		2.4	6.9	<2	2.0					
	.116		2.8	6.9	<2	2.2					
	.105			6.9		2.2					
	.110			6.9		2.0					
	.204		2.0	7.0	<2	2.1					
	.102			6.9		1.9					
	.149	5.7	3.6	6.9	<2	2.2	138	157			
	.104			6.9		2.2					
	.102		2.6	6.9	<2	2.2					
	.103			6.9		2.1					
	.103			7.0		2.2					
	.085		2.0	6.9	<2	2.2					
	.115			6.9		2.0					
	.103		4.0	7.0	<2	2.2					
	.101			7.0		1.8					
	.102		1.8	6.9	<2	2.2					
	.095			7.0		2.2					
	.116			6.9		2.2					
	.123		2.0	7.0	<2	2.0					
	.140			7.0		2.2					
	.106		3.4	7.0	<2	2.2					
	.102			6.9		1.8					

STAFFING:

Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
Shift Operator	Class:	Certificate No:		Name:	
ift Operator	Class:	Certificate No:		Name:	
erator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

Effluent Disposal or Reclaimed Water Reuse: Pond

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

Additional sheets if necessary to list all certified operators.

[redacted] DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:	Plantation Bay Utility Company	PERMIT NUMBER:	FLA011597-001-DWIR
MAILING ADDRESS:	2359 Beville Road Daytona Beach, FL 32119	LIMIT:	Final
		CLASS SIZE:	Minor
		GMS ID NO.:	3118P00486
FACILITY:	Plantation Bay WWTP	DISCHARGE POINT NUMBER:	R001
LOCATION:	Old Dixie Highway, West of I-95	PLANT SIZE/TREATMENT TYPE:	IC
	Ormond Beach, FL 32174	NO DISCHARGE FROM SITE:	[ ]
COUNTY:	Flagler		

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 10-1-04 To: 10-31-04

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.115		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.102		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					6.4		mg/l	0	Two Weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.7	5.0	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						4.4	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Day/Week	Grab
pH	Sample Measurement				6.8		7.0	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	S.U.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	11-12-04

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWIR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					<2	<2	100ml	0	4 days	grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.6			mg/l	0	Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					188		mg/l	0	Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					168		mg/l	0	Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

Number: FLA011597-001-DWIR
Year: October 2004

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
50050	80082	00530	00400	31615	50060	80082	00530			
Site EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
.120		3.4	7.0	<2	2.0					
.105			6.9		2.2					
.111			7.0		2.2					
.145		2.4	7.0	<2	1.8					
.131			7.0		2.2					
.109	4.3	2.8	6.9	<2	2.2	178	173			
.121			7.0		2.2					
.095		3.6	6.9	<2	1.9					
.097			6.9		2.0					
.104			7.0		2.2					
.091		3.6	7.0	<2	2.2					
.090			6.9		2.2					
.102		2.4	7.0	<2	2.2					
.106			6.8		2.2					
.085		4.4	6.9	<2	2.0					
.088			6.8		1.9					
.085			6.9		2.1					
.091		2.6	6.9	<2	2.2					
.121			6.9		2.2					
.103	5.0	3.0	7.0	<2	2.2	197	163			
.091			6.9		2.2					
.101		2.4	7.0	<2	1.8					
.090			6.8		1.6					
.089			6.8		1.8					
.113		3.2	6.8	<2	2.0					
.106			6.9		2.2					
.109		3.8	7.0	<2	2.2					
.090			7.0		2.2					
.104		1.8	6.9	<2	2.2					
.096			6.9		2.2					
.102			6.8		2.2					

STAFFING:

Operator	Class: C	Certificate No: C.O. 7365	Name: Scott Kelley		
Shift Operator	Class:	Certificate No:	Name:		
Shift Operator	Class:	Certificate No:	Name:		
rator	Class: C	Certificate No: C.O. 1218	Name: Glenn D. Wetherell		

Effluent Disposal or Reclaimed Water Reuse: Pond

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

Additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:	Plantation Bay Utility Company	PERMIT NUMBER:	FLA011597-001-DWIR		
MAILING ADDRESS	2359 Beville Road	LIMIT:	Final	REPORT:	Monthly
	Daytona Beach, FL 32119	CLASS SIZE:	Minor	GROUP:	Domestic
		GMS ID NO.:	3118P00486	GMS TEST SITE NO.:	3118X12506
FACILITY:	Plantation Bay WWTP	DISCHARGE POINT NUMBER:	R001		
LOCATION:	Old Dixie Highway, West of I-95	PLANT SIZE/TREATMENT TYPE:	IC		
	Ormond Beach, FL 32174	NO DISCHARGE FROM SITE:	[ ]		
COUNTY:	Flagler				

MONITORING PERIOD From: 11-1-04 To: 11-30-04

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement			MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.100		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.6		mg/l	0	Two Weeks	FPC
PARM Code 80082 5 Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					3.3	3.8	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						4.6	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.8		7.0	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	12-12-04

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011327-001-DWTR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml	0	4 days	grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.9			mg/l	0	Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					196		mg/l	0	Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					198		mg/l	0	Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

mitNumber FLA011597-001-DWIR

nth/Year: November 2004

Three-month Average Daily Flow:

(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
ion. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.099		2.2	7.0	<2	1.9					
2	.092			7.0		2.2					
3	.105	2.7	3.8	6.9	<2	2.2	186	212			
4	.092			6.8		2.1					
5	.107		2.8	6.9	<2	2.0					
6	.082			6.8		2.2					
7	.093			6.9		2.2					
8	.075		2.0	6.9	<2	2.2					
9	.116			7.0		2.0					
10	.103		4.2	6.9	<2	2.2					
11	.106			6.9		2.1					
12	.091		3.6	6.8	<2	2.2					
13	.103			6.9		2.2					
14	.111			6.9		2.2					
15	.073		2.8	6.9	<2	2.2					
16	.110			6.9		2.2					
17	.106	3.8	3.2	7.0	<2	2.2	206	184			
18	.091			6.9		2.2					
19	.081		3.0	6.9	<2	2.2					
20	.073			6.9		2.1					
21	.089			7.0		2.0					
22	.075		2.8	6.9	<2	2.2					
23	.086			6.9		2.1					
24	.146		2.4	7.0	<2	2.2					
25	.133			6.9		2.2					
26	.118		4.6	6.9	<2	2.2					
27	.111			6.9		2.2					
28	.093			7.0		2.2					
29	.104		2.4	6.9	<2	2.2					
30	.121			7.0		2.2					
31											

ANT STAFFING:

Shift Operator	Class: C	Certificate No: C.O. 7365	Name:	Scott Kelley	
ing Shift Operator	Class:	Certificate No:	Name:		
ht Shift Operator	Class:	Certificate No:	Name:		
d Operator	Class: C	Certificate No: C.O. 1218	Name:	Glenn D. Wetherell	

of Effluent Disposal or Reclaimed Water Reuse: Pond

ed Wet Weather Discharge Activated: Yes: No: Not Applicable: If yes, cumulative days of wet weather discharge:

ach additional sheets if necessary to list all certified operators.

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:	Plantation Bay Utility Company	PERMIT NUMBER:	FLA011597-001-DWIR		
MAILING ADDRESS:	2359 Beville Road Daytona Beach, FL 32119	LIMIT:	Final	REPORT:	Monthly
		CLASS SIZE:	Minor	GROUP:	Domestic
		GMS ID NO.:	3118P00486	GMS TEST SITE NO.:	3118X12506
FACILITY:	Plantation Bay WWTP	DISCHARGE POINT NUMBER:	R001		
LOCATION:	Old Dixie Highway, West of I-95	PLANT SIZE/TREATMENT TYPE:	IC		
	Ormond Beach, FL 32174	NO DISCHARGE FROM SITE:	[ ]		
COUNTY:	Flagler				

MONITORING PERIOD From: 12-1-04 To: 12-31-04

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.110		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.128		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.4		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.8	5.1	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						4.6	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.8		7.0	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	1-11-05

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011597-001-DWIR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml	0	4 days	grab
PARM Code 74055 I Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.1			mg/l	0	Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					175		mg/l	0	Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					150		mg/l	0	Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

mitNumber: FLA011597-001-DWIR
onth/Year: December 2004

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
ion. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.089	4.5	3.0	7.0	<2	2.2	161	147			
2	.110			6.9		2.2					
3	.093		3.8	6.9	<2	2.0					
4	.090			7.0		1.9					
5	.085			6.9		2.2					
6	.102		3.2	7.0	<2	2.2					
7	.106			6.9		2.2					
8	.103		4.6	6.9	<2	2.2					
9	.111			7.0		2.2					
10	.098		2.8	6.9	<2	2.1					
11	.112			7.0		2.2					
12	.126			7.0		2.2					
13	.147		4.2	6.9	<2	2.2					
14	.127			7.0		2.2					
15	.123	5.1	3.2	7.0	<2	2.2	189	153			
16	.152			6.9		1.8					
17	.193		2.8	6.9	<2	2.2					
18	.113			7.0		2.2					
19	.111			6.9		2.0					
20	.131		3.8	6.9	<2	2.2					
21	.122			6.9		2.1					
22	.116		2.4	6.9	<2	1.8					
23	.125			6.9		2.2					
24	.161		3.2	7.0	<2	2.2					
25	.156			6.9		2.2					
26	.164			7.0		2.2					
27	.148		3.4	6.9	<2	2.2					
28	.181			6.8		2.2					
29	.230		2.6	6.8	<2	1.5					
30	.126			6.9		1.1					
31	.113		2.8	7.0	<2	1.9					

NT STAFFING:

hift Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
ng Shift Operator	Class:	Certificate No:		Name:	
t Shift Operator	Class:	Certificate No:		Name:	
Operator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

of Effluent Disposal or Reclaimed Water Reuse: Pond

d Wet Weather Discharge Activated: Yes: No: Not Applicable: If yes, cumulative days of wet weather discharge:

ch additional sheets if necessary to list all certified operators.

sion 6/10/98

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road, Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95, Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-061-DWIR
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 1-1-03 To: 1-31-03

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.095		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.208		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.6		mg/l		Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.1	5.2	mg/l		two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						4.6	mg/l		4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.7		6.8	S.U.		Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	2-11-03

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

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml		4 days	grab
PARM Code 74055 I	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Mon.Site No. EFA-1											
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.7			mg/l		Daily	Grab
PARM Code 50060 A	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
Mon.Site No. EFA-1											
BOD, Carbonaceous 5 day, 20C	Sample Measurement					177		mg/l		Two Weeks	FPC
PARM Code 80082 G	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Mon.Site No. INF-1											
Solids, Total Suspended	Sample Measurement					182		mg/l		Two Weeks	FPC
PARM Code 00530 G	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Mon.Site No. INF-1											
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

ermitNumber FLA011597-001-DWIR

lonth/Year: January 2003

Three-month Average Daily Flow:

(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
Mon. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.177			6.7		1.8					
2	.114	5.2	2.6	6.7	<2	2.2	180	194			
3	.189		3.2	6.7	<2	2.2					
4	.202			6.7		2.2					
5	.290			6.7		2.2					
6	.276		4.6	6.7	<2	2.2					
7	.198			6.7		2.2					
8	.251		3.4	6.7	<2	2.2					
9	.230			6.7		2.2					
10	.095		2.6	6.7	<2	2.2					
11	.235			6.7		2.2					
12	.254			6.7		2.2					
13	.098		2.4	6.7	<2	2.2					
14	.245			6.7		2.2					
15	.249		2.6	6.7	<2	1.7					
16	.236			6.8		1.9					
17	.195		3.4	6.7	<2	2.2					
18	.295			6.7		2.2					
19	.275			6.7		2.2					
20	.240		2.8	6.7	<2	2.2					
21	.173			6.7		2.2					
22	.187	4.9	2.4	6.7	<2	2.2	173	169			
23	.120			6.7		2.2					
24	.185		3.4	6.7	<2	2.2					
25	.218			6.7		2.2					
26	.176			6.7		2.2					
27	.183		1.8	6.7	<2	2.2					
28	.206			6.7		2.2					
29	.291		2.2	6.7	<2	2.2					
30	.225			6.7		2.2					
31	.153		3.2	6.7	<2	2.2					

PLANT STAFFING:

Day Shift Operator	Class: C	Certificate No: C.O. 7365	Name: Scott Kelley		
Evening Shift Operator	Class:	Certificate No:	Name:		
Night Shift Operator	Class:	Certificate No:	Name:		
Lead Operator	Class: C	Certificate No: C.O. 1218	Name: Glenn D. Wetherell		

Type of Effluent Disposal or Reclaimed Water Reuse: Pond

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

Attach additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT (DMR)

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road, Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95, Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-001-DWIR
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 2-1-03 To: 2-28-03

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.103		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meter
Flow	Sample Measurement	.182		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meter
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.7		mg/l		Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.9	6.0	mg/l		two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						4.0	mg/l		4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.7		6.8	S.U.		Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min)		8.5 (Max)	S.U.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	3-12-03

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

Version 6/10/98

PLANTATION BAY SALES WETHERELL TREATMENT
Received Time Jul. 21. 12:25PM

DISCHARGE MONITORING REPORT - PART A (Continued)

PERMIT NUMBER: FLA013397-001-DWIR DISCHARGE/OUTFALL NUMBER: R001

...ion Bay WWTP

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml		4 days	grab
PARM Code 74055 1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Mon.Site No: EFA-1											
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.8			mg/l		Daily	Grab
PARM Code 50060 A	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
Mon.Site No: EFA-1											
BOD, Carbonaceous 5 day, 20C	Sample Measurement					180		mg/l		Two Weeks	FPC
PARM Code 80082 G	Permit Requirement					Report (No.Avg)		mg/L		Every Two Weeks	8-hour FPC
Mon.Site No. INF-1											
Solids, Total Suspended	Sample Measurement					174		mg/l		Two Weeks	FPC
PARM Code 00530 G	Permit Requirement					Report (Mo.Avg)		mg/L		Every Two Weeks	8-hour FPC
Mon.Site No: INF-1											
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

Version 6/10/98

Received Time Jul.21. 12:25PM

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA011597-001-DWIR
Month/Year: February 2003
Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
Mon. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.139			6.7		2.2					
2	.275			6.7		2.2					
3	.198		1.8	6.7	<2	2.0					
4	.169			6.7		2.2					
5	.201	3.7	3.8	6.8	<2	2.2	169	193			
6	.287			6.7		1.9					
7	.107		3.2	6.8	<2	2.2					
8	.231			6.7		2.2					
9	.202			6.7		2.2					
10	.201		1.6	6.7	<2	2.2					
11	.267			6.7		2.2					
12	.291		2.2	6.7	<2	1.8					
13	.313			6.7		21					
14	.290		2.8	6.7	<2	2.2					
15	.109			6.7		2.2					
16	.138			6.7		2.2					
17	.130		1.8	6.7	<2	2.2					
18	.248			6.7		2.2					
19	.219	6.0	2.4	6.7	<2	2.2	191	155			
20	.106			6.7		2.2					
21	.101		3.8	6.7	<2	2.2					
22	.146			6.7		1.9					
23	.173			6.7		2.2					
24	.141		3.0	6.7	<2	2.2					
25	.120			6.7		2.2					
26	.092		4.0	6.7	<2	2.2					
27	.091			6.7		2.2					
28	.118		2.2	6.7	<2	2.2					
29											
30											
31											

PLANT STAFFING:

Day Shift Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
Evening Shift Operator	Class:	Certificate No:		Name:	
Night Shift Operator	Class:	Certificate No:		Name:	
Lead Operator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

Type of Effluent Disposal or Reclaimed Water Reuse: Pond

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

Attach additional sheets if necessary to list all certified operators.

Version 6/10/98

Received Time Jul.21. 12:25PM

DEPARTMENT OF ENVIRONMENTAL PROTECTION [illegible]

hen Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-001-DW1R
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 3-1-03 To: 3-31-03

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.106		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.114		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.8		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					6.0	7.2	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						4.4	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.7		6.8	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	4-12-03

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

Version 6/10/98

DISCHARGE MONITORING REPORT (DMR) Application

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWTR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml	0	4 days	grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.6			mg/l	0	Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					175		mg/l	0	Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					192		mg/l	0	Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

ermitNumber FLA011597-001-DWIR

Three-month Average Daily Flow:

lonth/Year: March 2003

(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
Mon. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.106			6.7		2.2					
2	.114			6.8		2.2					
3	.103		2.4	6.7	<2	2.0					
4	.110			6.7		2.2					
5	.136	7.2	2.6	6.7	<2	1.8	191	211			
6	.102			6.7		2.2					
7	.106		2.6	6.7	<2	2.2					
8	.119			6.7		2.0					
9	.123			6.7		1.6					
10	.110		3.6	6.7	<2	2.0					
11	.114			6.7		2.2					
12	.101		1.8	6.7	<2	2.2					
13	.084			6.7		2.2					
14	.102		3.1	6.7	<2	2.2					
15	.107			6.8		1.9					
16	.104			6.7		2.2					
17	.119		2.2	6.7	<2	2.2					
18	.105	4.7		6.7		2.2					
19	.089	~~5.8~~	2.4	6.7	<2	2.2	158	173			
20	.078			6.7		2.2					
21	.140		2.6	6.7	<2	2.2					
22	.090			6.7		2.1					
23	.120			6.7		2.2					
24	.078		2.8	6.7	<2	2.2					
25	.104			6.7		2.2					
26	.100		1.8	6.7	<2	2.0					
27	.103			6.7		2.2					
28	.131		4.4	6.7	<2	2.1					
29	.123			6.7		1.8					
30	.188			6.7		2.2					
31	.223		2.6	6.7	<2	2.2					

LANT STAFFING:

)ay Shift Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
vening Shift Operator	Class:	Certificate No:		Name:	
ight Shift Operator	Class:	Certificate No:		Name:	
ead Operator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

ype of Effluent Disposal or Reclaimed Water Reuse: Pond

imited Wet Weather Discharge Activated: Yes: No: Not Applicable: If yes, cumulative days of wet weather discharge:

ttach additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME:	Plantation Bay Utility Company	PERMIT NUMBER:	FLA011597-001-DWIR
MAILING ADDRESS:	2359 Beville Road Daytona Beach, FL 32119	LIMIT:	Final
		CLASS SIZE:	Minor
		GMS ID NO.:	3118P00486
FACILITY:	Plantation Bay WWTP	DISCHARGE POINT NUMBER:	R001
LOCATION:	Old Dixie Highway, West of I-95	PLANT SIZE/TREATMENT TYPE:	IC
	Ormond Beach, FL 32174	NO DISCHARGE FROM SITE:	[ ]
COUNTY:	Flagler		

REPORT GROUP: Monthly Domestic

GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 4-1-03 To: 4-30-03

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.110		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.113		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.9		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.5	7.1	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						4.6	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.7		6.8	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	S.U.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	5-12-03

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

NAME Plantation Bay WWTP PERMIT NUMBER TPDES TX0113277-001-DWTR DISCHARGE POINT NUMBER 001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml	0	4 days	grab
PARM Code 74055 J Mon. Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.8			mg/l	0	Daily	Grab
PARM Code 50060 A Mon. Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					210		mg/l	0	Two Weeks	FPC
PARM Code 80082 G Mon. Site No. INF-1	Permit Requirement					Report (No. Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					161		mg/l	0	Two Weeks	FPC
PARM Code 00530 O Mon. Site No. INF-1	Permit Requirement					Report (Mo. Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

ermitNumber FLA011597-001-DWIR

Three-month Average Daily Flow:

(TMADF/Permitted Capacity)x100:

lonth/Year: April 2003

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
Mon. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.233			6.8		2.2					
2	.251	3.9	2.8	6.7	<2	2.2	185	177			
3	.101			6.7		2.2					
4	.102		3.6	6.7	<2	2.2					
5	.111			6.7		2.2					
6	.104			6.7		2.2					
7	.071		2.4	6.7	<2	2.2					
8	.096			6.7		2.2					
9	.115		3.6	6.7	<2	2.2					
10	.090			6.7		2.2					
11	.206		4.6	6.7	<2	2.2					
12	.106			6.7		2.1					
13	.126			6.7		2.2					
14	.091		1.6	6.8	<2	2.2					
15	.086			6.7		2.0					
16	.113	7.1	3.6	6.7	<2	2.2	235	144			
17	.092			6.7		2.2					
18	.108		3.7	6.7	<2	2.2					
19	.110			6.7		1.9					
20	.120			6.7		2.1					
21	.087		2.8	6.7	<2	2.2					
22	.091			6.7		2.2					
23	.111		2.8	6.7	<2	1.8					
24	.092			6.7		2.0					
25	.099		1.8	6.7	<2	2.2					
26	.103			6.7		2.1					
27	.103			6.7		2.2					
28	.082		2.6	6.7	<2	2.2					
29	.091			6.7		2.2					
30	.100		2.8	6.7	<2	2.2					
31											

LANT STAFFING:

ay Shift Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
vening Shift Operator	Class:	Certificate No:		Name:	
ight Shift Operator	Class:	Certificate No:		Name:	
ead Operator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

ype of Effluent Disposal or Reclaimed Water Reuse: Pond

imited Wet Weather Discharge Activated: Yes: No: Not Applicable: If yes, cumulative days of wet weather discharge:

ttach additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-001-DW1R
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 5-1-03 To: 5-31-03

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.113		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.099		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.8		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.0	4.7	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						4.6	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.7		6.8	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	6-11-03

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

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWIR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml		4 days	grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.8			mg/l		Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					180		mg/l		Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					210		mg/l		Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

mitNumber FLA011597-001-DWIR

Month/Year: May 2003

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
Mon. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.125			6.7		1.8					
2	.094		3.4	6.7	<2	2.2					
3	.110			6.7		2.2					
4	.106			6.7		2.2					
5	.063		2.6	6.7	<2	2.2					
6	.095			6.7		2.2					
7	.085	3.3	2.4	6.7	<2	2.1	208	172			
8	.087			6.7		2.2					
9	.086		3.0	6.7	<2	2.2					
10	.084			6.7		2.2					
11	.091			6.7		2.2					
12	.105		4.6	6.7	<2	2.2					
13	.097			6.7		2.2					
14	.090		2.4	6.7	<2	2.0					
15	.120			6.8		2.2					
16	.089		2.6	6.7	<2	2.2					
17	.096			6.7		2.0					
18	.103			6.7		2.2					
19	.097		2.4	6.7	<2	2.2					
20	.115			6.7		2.1					
21	.096			6.7		2.2					
22	.127	4.7	3.4	6.7	<2	2.2	151	248			
23	.101		2.2	6.7	<2	2.2					
24	.098		.	6.7		2.2					
25	.104			6.8		1.9					
26	.093			6.7		2.1					
27	.115		2.8	6.7	<2	2.2					
28	.102		1.8	6.8	<2	2.2					
29	.097		2.6	6.7	<2	2.2					
30	.102		2.3	6.7	<2	2.2					
31	.098			6.7		2.2					

PLANT STAFFING:

Day Shift Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
Evening Shift Operator	Class:	Certificate No:		Name:	
Night Shift Operator	Class:	Certificate No:		Name:	
Lead Operator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

Type of Effluent Disposal or Reclaimed Water Reuse: pond

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

Attach additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-001-DW1R
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 6-1-03 To: 6-30-03

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.115		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-I	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.103		MGD						Daily	Flow Meter
PARM Code 50050 I Mon.Site No. EFA-I	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.2		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-I	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					6.9	8.3	mg/l	0	two weeks	FPC
PARM Code 80082 I Mon.Site No. EFA-I	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						3.8	mg/l	0	4 day week	Grab
PARM Code 00530 I Mon.Site No. EFD-I	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.6		6.8	s.u.	0	Daily	Grab
PARM Code 00400 I Mon.Site No. EFA-I	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	7-11-03

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

Version 6/10/98

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWTR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml		4 days	grab
PARM Code 74055 I Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				2.0			mg/l		Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					170		mg/l		Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					170		mg/l		Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

ermitNumber FLA011597-001-DWIR

Three-month Average Daily Flow:

(TMADF/Permitted Capacity)x100:

lonth/Year: June 2003

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
Mon. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.095			6.8		2.2					
2	.102		2.4	6.8	<2	2.2					
3	.096			6.7		2.2					
4	.094	5.4	3.8	6.7	<2	2.0	182	198			
5	.103			6.7		2.2					
6	.098		3.8	6.7	<2	2.2					
7	.104			6.7		2.2					
8	.101			6.7		2.2					
9	.106		2.6	6.7	<2	2.2					
10	.109			6.7		2.2					
11	.106		2.4	6.7	<2	2.2					
12	.104			6.6		2.0					
13	.107		2.8	6.7	<2	2.2					
14	.094			6.7		2.2					
15	.098			6.7		2.2					
16	.081		2.4	6.7	<2	2.2					
17	.106			6.7		2.2					
18	.097	8.3	2.2	6.7	<2	2.2	158	141			
19	.101			6.7		2.1					
20	.102		3.8	6.7	<2	2.2					
21	.104			6.7		2.2					
22	.097			6.7		2.2					
23	.112		2.6	6.7	<2	2.2					
24	.119			6.7		2.2					
25	.094		3.8	6.7	<2	2.2					
26	.117			6.7		2.2					
27	.124		3.2	6.7	<2	2.2					
28	.102			6.7		2.2					
29	.107			6.8		2.2					
30	.106		1.8	6.7	<2	2.2					
31											

PLANT STAFFING:

Day Shift Operator — Class: C — Certificate No: C.O. 7365 — Name: Scott Kelley

Evening Shift Operator — Class: — Certificate No: — Name:

Night Shift Operator — Class: — Certificate No: — Name:

Lead Operator — Class: C — Certificate No: C.O. 1218 — Name: Glenn D. Wetherell

Type of Effluent Disposal or Reclaimed Water Reuse: Pond

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

Attach additional sheets if necessary to list all certified operators.

Version 6/10/98

DEPARTMENT OF ENVIRONMENTAL PROTECTION — CHA[illegible] MO[illegible]

When completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-001-DWIR
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: 1 Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 7-1-03 To: 7-31-03

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.116		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.098		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.3		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					6.6	7.4	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						3.8	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.7		6.8	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	8-10-03

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

Version 6/10/98

DISCHARGE MONITORING REPORT (DMR) [illegible]

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWTR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml		4 days	grab
PARM Code 74055 I Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.7			mg/l		Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					168		mg/l		Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					188		mg/l		Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

ermit Number: FLA011597-001-DWIR

Month/Year: July 2003

Three-month Average Daily Flow:

(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
Mon. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.073			6.7		2.2					
2	.090	5.7	2.8	6.7	<2	2.0	188	217			
3	.090		2.6	6.7	<2	1.8					
4	.094			6.7		2.2					
5	.102			6.7		2.2					
6	.087			6.7		2.2					
7	.101		3.4	6.7	<2	2.2					
8	.098			6.7		2.0					
9	.165		3.4	6.7	<2	1.7					
10	.071			6.7		2.2					
11	.093		2.6	6.7	<2	1.6					
12	.102			6.7		1.8					
13	.106			6.7		2.2					
14	.095		1.8	6.7	<2	2.2					
15	.104			6.7		2.0					
16	.109		2.2	6.7	<2	2.2					
17	.122			6.7		2.2					
18	.103		3.0	6.7	<2	2.2					
19	.086			6.7		2.2					
20	.081			6.7		2.2					
21	.115		2.4	6.7	<2	2.2					
22	.118			6.7		2.2					
23	.109	7.4	3.0	6.8	<2	1.5	147	158			
24	.111			6.7		2.0					
25	.080		2.9	6.7	<2	2.2					
26	.076			6.7		2.2					
27	.081			6.7		2.2					
28	.082		3.8	6.7	<2	2.2					
29	.101			6.7		2.2					
30	.093		2.6	6.7	<2	1.9					
31	.103			6.7		2.1					

PLANT STAFFING:

Day Shift Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
Evening Shift Operator	Class:	Certificate No:		Name:	
Night Shift Operator	Class:	Certificate No:		Name:	
Lead Operator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

Type of Effluent Disposal or Reclaimed Water Reuse: Pond

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

Attach additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-061-DW1R
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 8-1-03 To: 8-31-03

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.118		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.096		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.2		mg/l		Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					6.4	8.2	mg/l		two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						3.4	mg/l		4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.7		6.8	S.U.		Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	9-14-03

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

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml		4 days	grab
PARM Code 74055 I Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.7			mg/l		Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					170		mg/l		Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					181		mg/l		Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

ermitNumber FLA011597-001-DWIR

Three-month Average Daily Flow:

lonth/Year:

(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
Mon. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.102		2.6	6.7	<2	2.0					
2	.091			6.7		2.2					
3	.096			6.7		2.2					
4	.138		1.8	6.8	<2	2.2					
5	.152			6.7		2.2					
6	.137	8.2	2.4	6.7	<2	2.2	155	190			
7	.081			6.7		1.8					
8	.072		2.8	6.8	<2	2.1					
9	.078			6.7		2.2					
10	.076			6.7		2.2					
11	.081		2.6	6.7	<2	2.2					
12	.085			6.7		2.0					
13	.121		3.0	6.7	<2	2.2					
14	.101			6.7		2.2					
15	.091		2.8	6.7	<2	2.2					
16	.102			6.7		2.2					
17	.094			6.8		2.2					
18	.094		1.8	6.7	<2	1.7					
19	.090			6.7		2.2					
20	.090	4.6	3.2	6.7	<2	2.2	184	171			
21	.098			6.7		2.2					
22	.099		3.4	6.7	<2	2.2					
23	.101			6.7		2.2					
24	.090			6.7		2.2					
25	.086		2.4	6.7	<2	2.0					
26	.097			6.7		2.2					
27	.088		2.6	6.7	<2	2.2					
28	.083			6.7		2.1					
29	.091		1.8	6.7	<2	2.2					
30	.082			6.7		2.0					
31	.101			6.7		2.2					

PLANT STAFFING:

Day Shift Operator	Class: C	Certificate No: C.O. 7365	Name: Scott Kelley		
Evening Shift Operator	Class:	Certificate No:	Name:		
Night Shift Operator	Class:	Certificate No:	Name:		
Lead Operator	Class: C	Certificate No: C.O. 1218	Name: Glenn D. Wetherell		

Type of Effluent Disposal or Reclaimed Water Reuse: Pond

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

Attach additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

Then Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-001-DW1R
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 9-1-03 To: 9-30-03

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.121		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.102		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.4		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					6.6	7.4	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						3.8	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.7		6.8	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	10-12-03

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

DISCHARGE MONITORING REPORT (DMR)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWIR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml		4 days	grab
PARM Code 74055 I Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.9			mg/l		Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					160		mg/l		Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					154		mg/l		Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

ermit Number: FLA011597-001-DWIR

Three-month Average Daily Flow:

(TMADF/Permitted Capacity)x100:

Month/Year: September 2003

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
Mon. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.106			6.8		2.2					
2	.094		2.6	6.7	<2	2.0					
3	.092	7.4	3.6	6.7	<2	2.2	181	160			
4	.102			6.7		2.1					
5	.109		2.6	6.7	<2	2.2					
6	.098			6.7		2.2					
7	.103			6.7		2.2					
8	.138		2.6	6.7	<2	1.9					
9	.146			6.7		2.2					
10	.113		3.2	6.7	<2	2.2					
11	.108			6.7		2.2					
12	.105		3.8	6.7	<2	2.2					
13	.088			6.7		2.0					
14	.092			6.7		2.2					
15	.095		3.2	6.7	<2	2.1					
16	.089			6.7		2.0					
17	.104	5.8	2.6	6.7	<2	2.1	138	148			
18	.096			6.7		2.2					
19	.093		1.8	6.7	<2	2.2					
20	.091			6.8		2.0					
21	.101			6.7		2.2					
22	.102		3.0	6.7	<2	2.0					
23	.083			6.7		1.8					
24	.081		3.8	6.7	<2	2.2					
25	.105			6.7		2.0					
26	.131		2.5	6.7	<2	2.2					
27	.096			6.7		2.2					
28	.093			6.7		2.2					
29	.104		3.8	6.7	<2	2.2					
30	.097			6.7		2.2					
31											

PLANT STAFFING:

Day Shift Operator	Class: C	Certificate No: C.O. 7365	Name: Scott Kelley		
Evening Shift Operator	Class:	Certificate No:	Name:		
Night Shift Operator	Class:	Certificate No:	Name:		
Lead Operator	Class: C	Certificate No: C.O. 1218	Name: Glenn D. Wetherell		

Type of Effluent Disposal or Reclaimed Water Reuse: Pond

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

Attach additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

hen Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-001-DW1R
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 10-1-03 To: 10-31-03

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.123		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.108		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.5		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					4.5	5.2	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						4.4	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.7		6.8	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	11-10-03

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011597-001-DWIR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml		4 days	grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.6			mg/l		Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Mn.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					168		mg/l		Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (No.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					178		mg/l		Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

ermitNumber FLA011597-001-DWIR
lonth/Year: October 2003

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
Mon. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.102	5.2	3.2	6.8	<2	2.2	176	208			
2	.093			6.7		2.2					
3	.095		2.2	6.7	<2	2.2					
4	.097			6.7		1.9					
5	.093			6.7		1.8					
6	.097		2.6	6.7	<2	1.6					
7	.101			6.7		2.0					
8	.111		3.6	6.8	<2	2.2					
9	.107			6.7		2.2					
10	.106		1.8	6.7	<2	2.2					
11	.098			6.7		2.2					
12	.101			6.7		2.2					
13	.172		2.8	6.7	<2	2.2					
14	.146			6.7		2.2					
15	.139	3.8	2.6	6.7	<2	2.2	159	147			
16	.108			6.7		2.0					
17	.102		3.6	6.7	<2	2.2					
18	.111			6.7		2.2					
19	.121			6.7		2.2					
20	.105		2.6	6.7	<2	2.2					
21	.098			6.7		1.9					
22	.103		2.8	6.7	<2	2.2					
23	.096			6.7		2.0					
24	.106		4.4	6.7	<2	2.0					
25	.095			6.7		2.2					
26	.104			6.7		2.1					
27	.113		3.2	6.8	<2	2.2					
28	.107			6.7		2.2					
29	.110		2.8	6.7	<2	2.2					
30	.102			6.7		2.2					
31	.105		3.0	6.7	<2	2.2					

LANT STAFFING:

ay Shift Operator	Class: C	Certificate No:	C.O. 7365	Name:	Scott Kelley
vening Shift Operator	Class:	Certificate No:		Name:	
ight Shift Operator	Class:	Certificate No:		Name:	
ead Operator	Class: C	Certificate No:	C.O. 1218	Name:	Glenn D. Wetherell

ype of Effluent Disposal or Reclaimed Water Reuse: Pond

imited Wet Weather Discharge Activated: Yes: No: Not Applicable: If yes, cumulative days of wet weather discharge:

ttach additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-001-DW1R
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 11-1-03 To: 11-30-03

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.125		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.128		MGD						Daily	Flow Meter
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.6		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.8	7.4	mg/l	0	two weeks	FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						3.8	mg/l	0	4 day week	Grab
PARM Code 00530 1 Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.7		6.8	S.U.	0	Daily	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	12-12-03

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWTR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml		4 days	grab
PARM Code 74055 I Mon.Site No. EFA-L	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.7			mg/l		Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					187		mg/l		Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					162		mg/l		Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

ermitNumber: FLA011597-001-DWIR
lonth/Year: November 2003

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
Mon. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.097			6.7		2.2					
2	.105			6.7		2.2					
3	.128		2.6	6.7	<2	2.2					
4	.107			6.7		2.1					
5	.098	7.4	3.6	6.7	<2	2.2	210	184			
6	.107			6.7		2.0					
7	.104		3.1	6.7	<2	2.2					
8	.106			6.7		2.2					
9	.111			6.7		2.2					
10	.110		3.2	6.7	<2	2.2					
11	.146			6.7		1.8					
12	.163		2.6	6.7	<2	2.0					
13	.111			6.7		2.2					
14	.184		3.8	6.7	<2	2.2					
15	.156			6.7		2.2					
16	.161			6.7		2.2					
17	.122		2.6	6.7	<2	2.2					
18	.107			6.7		2.2					
19	.102	4.1	2.8	6.8	<2	1.7	164	140			
20	.136			6.7		2.2					
21	.141		3.2	6.7	<2	2.2					
22	.170			6.7		2.2					
23	.174			6.7		2.2					
24	.169		2.2	6.7	<2	2.2					
25	.086			6.7		2.1					
26	.110		2.8	6.7	<2	2.2					
27	.111			6.7		2.0					
28	.119		2.4	6.7	<2	2.2					
29	.146			6.7		2.2					
30	.179			6.7		2.2					
31											

LANT STAFFING:

ay Shift Operator	Class: C	Certificate No: C.O. 7365	Name: Scott Kelley		
vening Shift Operator	Class:	Certificate No:	Name:		
ight Shift Operator	Class:	Certificate No:	Name:		
ead Operator	Class: C	Certificate No: C.O. 1218	Name: Glenn D. Wetherell		

ype of Effluent Disposal or Reclaimed Water Reuse: Pond

imited Wet Weather Discharge Activated: Yes: No: Not Applicable: If yes, cumulative days of wet weather discharge:

ttach additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION

When Completed mail this report to: Department of Environmental Protection, Northeast District, 7825 Baymeadows Way, Suite B200, Jacksonville, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

FACILITY: Plantation Bay WWTP
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

COUNTY: Flagler

PERMIT NUMBER: FLA011597-061-DWIR
LIMIT: Final
CLASS SIZE: Minor
GMS ID NO.: 3118P00486
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IC
NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly
GROUP: 1 Domestic
GMS TEST SITE NO.: 3118X12506

MONITORING PERIOD From: 12-1-03 To: 12-31-03

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.126		MGD						Daily	Flow Meter
PARM Code 50050 Y Mon.Site No. EFA-I	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow Meters
Flow	Sample Measurement	.165		MGD						Daily	Flow Meter
PARM Code 50050 I Mon.Site No. EFA-I	Permit Requirement	Report (Mo.Avg.)		MGD						Daily	Flow Meters
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					5.7		mg/l	0	Two Weeks	FPC
PARM Code 80082 Y Mon.Site No. EFA-I	Permit Requirement					20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
CBOD, Carbonaceous 5 day, 20C	Sample Measurement					6.1	7.3	mg/l	0	two weeks	FPC
PARM Code 80082 I Mon.Site No. EFA-I	Permit Requirement					Report (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement						4.6	mg/l	0	4 day week	Grab
PARM Code 00530 I Mon.Site No. EFD-I	Permit Requirement						5.0 (Max.)	mg/L		4 Days/Week	Grab
pH	Sample Measurement				6.7		6.8	S.U.	0	Daily	Grab
PARM Code 00400 I Mon.Site No. EFA-I	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		Daily	Grab

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Operator (Glenn Wetherell)	Glenn Wetherell	386-673-4161	1-12-04

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Plantation Bay WWTP PERMIT NUMBER: FLA011397-001-DWTR DISCHARGE POINT NUMBER: R001

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					< 2	< 2	100ml	0	4 days	grab
PARM Code 74055 I Mon.Site No. EFA-1	Permit Requirement					Non Detectable (75 Percentile)	25 (Max.)	#/100ml		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.8			mg/l	0	Daily	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			mg/L		Daily	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement					166		mg/l	0	Two Weeks	FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement					17.2		mg/l	0	Two Weeks	FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

rmitNumber FLA011597-001-DWIR
onth/Year: December 2003

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	pH (s.u.)	Fecal Coliform	Total Residual Chlorine (mg/l)	CBOD5 (mg L)	TSS (mg/L)			
Code	50050	80082	00530	00400	31615	50060	80082	00530			
ion. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1			
1	.184		2.4	6.7	<2	2.2					
2	.188			6.7		2.2					
3	.121	7.3	3.6	6.7	<2	2.2	181	186			
4	.120			6.7		2.2					
5	.112		3.1	6.7	<2	2.2					
6	.271			6.7		2.2					
7	.202			6.7		2.2					
8	.282		2.8	6.7	<2	2.2					
9	.193			6.8		2.2					
10	.181		2.6	6.7	<2	2.2					
11	.207			6.7		2.0					
12	.163		3.4	6.7	<2	1.8					
13	.204			6.7		1.9					
14	.201			6.7		2.2					
15	.163		2.6	6.8	<2	2.2					
16	.155			6.7		2.2					
17	.168	4.9	2.8	6.7	<2	2.2	150	157			
18	.173			6.7		2.0					
19	.156		2.6	6.7	<2	2.2					
20	.138			6.7		2.2					
21	.141			6.7		2.2					
22	.134		2.4	6.7	<2	2.2					
23	.122			6.7		2.2					
24	.131		3.6	6.7	<2	2.0					
25	.163			6.7		1.8					
26	.159		3.0	6.7	<2	2.1					
27	.133			6.7		2.2					
28	.128			6.7		2.2					
29	.142		2.4	6.7	<2	2.2					
30	.136			6.7		2.2					
31	.141		4.6	6.7	<2	2.2					

ANT STAFFING:

y Shift Operator	Class: C	Certificate No: C.O. 7365	Name: Scott Kelley		
ning Shift Operator	Class:	Certificate No:	Name:		
ght Shift Operator	Class:	Certificate No:	Name:		
d Operator	Class: C	Certificate No: C.O. 1218	Name: Glenn D. Wetherell		

e of Effluent Disposal or Reclaimed Water Reuse: Pond

ited Wet Weather Discharge Activated: Yes: No: Not Applicable: If yes, cumulative days of wet weather discharge:

ach additional sheets if necessary to list all certified operators.

CLASS B
WATER AND/OR WASTEWATER UTILITIES

FINANCIAL, RATE AND ENGINEERING MINIMUM FILING REQUIREMENTS

OF

Plantation Bay Utility Company

Exact Legal Name of Utility

VOLUME IIIb

FOR THE

Test Year Ended: 12/31/2004

2 of 2
DOCUMENT NUMBER-DATE
07654 AUG-8 05
FPSC-COMMISSION CLERK

PLANTATION BAY UTILITY COMPANY, INC.

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IIIb

4. a). Water Sanitary Survey

b). Sewer Inspection Report

5. a). Water Permits

b). Wastewater Permits

6. DEP Warning Letters – Consent Orders

7. List of Field Employees

8. List of Vehicles Owned or Leased by the Utility

9. Complaints

Department of Environmental Protection

Jeb Bush
Governor

Northeast District
7825 Baymeadows Way, Suite B200
Jacksonville, Florida 32256-7590

Colleen M. Castille
Secretary

January 4, 2005

Mr. Douglas Ross, Vice President
Plantation Bay Utilities
100 Plantation Bay Drive
Ormond Beach, Florida 32174

Flagler County - Potable Water
Plantation Bay WTP
PWS ID: 2184251

Dear Mr. Ross:

On November 19, 2004, I conducted a sanitary survey (i.e. a detailed inspection) of the above-referenced Community Public Water System. The following are deficiencies with the Florida Administrative Code (FAC) that were observed and each is followed with the recommended corrective action:

1. Only two of the four attached chlorine cylinders were equipped with "fitted wrenches". Please ensure that all attached cylinders are equipped with fitted wrenches at all times. FAC Rule 62-555.320(13).
2. The perimeter of the top edge of the transfer tank is not sealed against entry by bugs, etc. While the softening unit and filters are also subject to entry by bugs, etc., they are located upstream of the filtering action while the transfer tank is located downstream. Therefore, please ensure that the transfer tank is adequately sealed against entry. FAC Rule 62-550.330.
3. The transfer tank's access hatch is not locked against entry. While the softening unit and filters are also open basins, the transfer tank is an enclosed unit into which something can be placed and not readily seen. Therefore, please ensure that the transfer tank's hatch lid is locked at all times. FAC Rule 62-555.320(5).
4. A large number of ants have made a bed inside the house and around the base of Well No. 2. This shows that the concrete well pad is not sealed against the entry of contaminants near the well. Therefore, please remove the ants (without using pesticides) and seal the concrete pad around the base of the well. FAC Rule 62-532.500(3)(c).
5. The Department has no record of having ever received a requested Cross Connection Control Plan. Please provide a copy of such a Plan. FAC Rule 62-555.360.
6. The system does not have a backup rotameter or a backup chlorine injector. Please note that such spare equipment should be kept onsite and available for immediate replacement so the system is not at risk of operating in violation of Department Rules due to equipment failure. Please provide backup units for these and all other essential pieces of equipment (e.g. pumps, etc.). FAC Rule 62-555.350.

ent copy to D.R.

7. The system does not appear to have enough backwash water storage capacity to adequately backwash the filters. As a result, the water never clears up as much as it should during the backwashing of the filters. Please indicate how and over what time frame this problem will be addressed. FAC Rule 62-555.350.

A copy of the sanitary survey is enclosed for your records. Please provide a written response, **within 14 days** of receipt of this letter, detailing how the system will be brought into compliance within the next 30 days.

If you have any questions, please contact me by telephone at (904) 807-3304 or by e-mail at Emerson.Raulerson@DEP.STATE.FL.US. Thank you for your cooperation with Florida's Safe Drinking Water Act.

Sincerely,

Emerson C. Raulerson, P.E.
Drinking Water Section

BRR:ECR:er

Correspondence File

Enclosure

cc: Wetherell Treatment Systems

State of Florida
Department of Environmental Protection
Northeast District

SANITARY SURVEY REPORT

Plant Name **Plantation Bay WTP** County Flagler PWS ID # **2184251**
Plant Location Old Dixie Highway (~0.5-1.5 miles W of I-95) Phone
Owner Name Plantation Bay Utilities Phone (386) 437-9185
Owner Address 100 Plantation Bay Drive, Ormond Beach, Florida 32174
Designated Rep. Mr. Douglas Ross Title Vice President Phone (386) 437-9185
Facility Contact Glenn Weatherell Title Operator Phone (386) 673-4161
This Survey Date 11/19/04 Last Survey Date 11/9/01 Last C.I. Date

PWS TYPE & CLASS: Community - (1C)

SERVICE AREA CHARACTERISTICS
Residential Subdivision

Food Service: ☒ Yes ☐ No ☒ N/A

GENERAL INFORMATION
Number of Service Connections ~1,000
Population Served ~2,250 Basis 1,000 x 2.25
Plant Design Capacity 756,000 gpd
Basis PWS Database
Average Day (from MORs) 153,000 gpd
Max. Day (from MORs) 332,000 gpd
Total Storage Capacity 463,500 gallons
Comments AvgDay=11/03-10/04; MaxDay=9/03. Total Storage = GST + Clearwell/Transfer Tank + 1/2 HydroTank.

LOCATION
Latitude 29° 24' 10.1" North
Longitude 81° 10' 17.3" West
GPS: Yes Date: By DPHO
Directions I-95 S to Old Dixie Highway in southern Flagler Co. Go ~0.7-1.0 mile W. Turn left (S) on dirt road (b/t trees). Plant is on the right. OR from I-95: Go ~0.1 miles west to Plantation Bay entrance. Get directions at security shack.

OPERATION & MAINTENANCE
Certified Operator: ☒ Yes ☐ No ☐ Not required
Operator(s) & Certification Class-Number
Glenn Wetherell: C:0002679

O & M Log: ☒ Yes ☐ No ☐ Not required
Operator Visitation Frequency
Hrs/day: *Required* 3 & visit *Actual* 3 & visit
Days/wk: *Required* 5 & 2 *Actual* 5 & 2
Non-consecutive Days? ☐ Yes ☐ No ☒ N/A
MORs submitted regularly? ☒ Yes ☐ No ☐ N/A
Data missing from MORs? ☒ No ☐ Yes ☐ N/A

RAW WATER SOURCE
☒ GROUND; Number of Wells 4
☐ SURFACE/UDI; Source
☐ PURCHASED from PWS ID #
☐ Emergency Water Source
Emergency Water Capacity

AUXILIARY POWER SOURCE
☒ Yes ☐ None ☐ Not Required
Source Diesel Generator
Capacity of Standby (kW) 230
Switchover: ☒ Automatic ☐ Manual
Standby Plan: ☐ Yes ☐ No
Hrs Operated Under Load 1 hr/wk.
What equipment does it operate?
☒ Well pumps Different gen. (Also 1 hr/wk).
☒ High Service Pumps
☒ Treatment Equipment
Satisfy 1/2 max-day demand? ☒Yes ☐No ☐Unk
Comments

TREATMENT PROCESSES IN USE
Aeration, lime softening, filtration, corrosion control (polyphosphate) and chlorination.
What additional treatment is needed?
Coagulant addition? Chloramination? Membrane?
For control of what deficiencies?
Control of Disinfection Byproducts.

DISTRIBUTION SYSTEM
Flow Measuring Device Flow Meter
Meter Size & Type ~8" Kent turbine.
Backflow Prevention Devices: ☐ Yes ☐ No
Cross-connections None noted.
Written Cross-connection Control Program: No
Coliform Sampling Plan: ☒ Yes ☐ No ☐ N/A
Comments

Plantation Bay WTP

PWS ID # 2184251
Survey Date 11/19/04

GROUND WATER SOURCE

Well Number (PWS Identification)		1	2	3	4
Well Name (System Identification)		1	2	3	4
Year Drilled		1985	1985	1985	~2002
Depth Drilled		160'	160'	160'	
Latitude		29 / 24' / 07.15"	29 / 23' / 57.91"	29 / 23' / 48.06"	
Longitude		81 / 11' / 21.13"	81 / 11' / 18.97"	81 / 11' / 18.37"	
GPS (Y or N) / Date (if applicable)		Yes – 2/4/97	Yes – 2/4/97	Yes – 2/4/97	
Florida Well ID				AAF 0426	AAF 0425
Static Water Level		17'	17'	~18'	~15'
Actual Yield (if different than rated capacity)					
Strainer		Yes	Yes	Yes	
Length (outside casing)		90'	99'	103'	
Diameter (outside casing)		8"	8"	8"	8"
Material (outside casing)		Steel	Steel	Steel	Steel
Well Contamination History		No	No	No	No
Is inundation of well possible?		No	No	No	No
6' X 6' X 4" Concrete Pad		Ok	**See Comments**	Ok	Ok
SET BACKS	Septic Tank	None in Area	None in Area	None in Area	None in Area
	Reuse Water	None in Area	None in Area	None in Area	None in Area
	WW Plumbing	None in Area	None in Area	None in Area	None in Area
	Other Sanitary Hazard	None Noted	None Noted	None Noted	None Noted
PUMP	Type	Vertical Turbine	Vertical Turbine	Vertical Turbine	Vertical Turbine
	Manufacturer Name	Goulds	Goulds	Goulds	Goulds
	Model Number	5-TLC-4	5-TLC-4	5-TLC-4	5-TLC-4
	Rated Capacity (gpm)	~200 (estimate)	~200 (estimate)	~200 (estimate)	~200 (estimate)
	Motor Horsepower	7.5	7.5	7.5	7.5
Well casing 12" above grade?		Ok	Ok	Ok	Ok
Well Casing Sanitary Seal		Ok	Ok	Ok	Ok
Raw Water Sampling Tap		Ok	Ok	Ok	Ok
Above Ground Check Valve		Ok	Ok	Ok	Ok
Fence/Housing		Housed	Housed	Housed	Housed
Well Vent Protection		Ok	Ok	Ok	ok

COMMENTS There are a lot of ants inside the house and around the base of Well No. 2 (which means the concrete pad is not sealed).

Plantation Bay WTP

PWS ID # 2184251
Survey Date 11/19/04

CHLORINATION (Disinfection)

Type: 4 - Gas Chlorination
Make Regals Capacity 125 ppd
Chlorine Feed Rate 45 ppd
Avg. Amount of Cl_2 gas used N/A
Chlorine Residuals: Plant 2.0 Remote 0.4
Remote tap location Sudbury & Hampstead Lane
DPD Test Kit: ☒ On-site ☐ With operator ☐ None ☐ Not Used Daily
Injection Points GST & transfer tank.
Booster Pump Info N/A
Comments The system needs a backup rotameter and a backup chlorine injector.

Chlorine Gas Use Requirements	YES	NO	Comments
Dual System	☒	☐	
Auto-switchover	☒	☐	
Alarms:			Leak detector is ~3' above floor, but is ok because that is what the mfr specifies.
Loss of Cl_2 capability	☒	☐	
Loss of Cl_2 residual	☐	☒	
Cl_2 leak detection	☒	☐	
Scale	☒	☐	
Chained Cylinders	☒	☐	
Reserve Supply	☒	☐	
Adequate Air-pak	☒	☐	
Sign of Leaks	☐	☒	
Fresh Ammonia	☒	☐	
Ventilation	☒	☐	
Room Lighting	☒	☐	
Warning Signs	☒	☐	
Repair Kits	☒	☐	For small items
Fitted Wrench	☒	☒	2of4 cylinders
Housing/Protection	☒	☐	

AERATION (Gases, Fe, & Mn Removal)

Type Tray Capacity
Aerator Condition Good
Bloodworm Presence No
Visible Algae Growth No
Protective Screen Condition N/A
Comments Aerator appears to be operating fine. It is not enclosed/screened-in, but is not required to be since the water goes to a lime softening basin.

STORAGE FACILITIES

(B) Bladder (CW) Clearwell (C) Contact (E) Elevated
(G) Ground (H) Hydropneumatic (S.C.) See Comments

Tank Type/Number	S.C.	G	H
Capacity (gal)	6,000	450K	15K
Material	Steel	Conc.	Steel
Gravity Drain	No	Yes	Yes
By-pass Piping	No	Yes	Yes
Pressure Gauge	N/A	N/A	Yes
Sight Glass or Level Indicator	No	L.I.	S.G.
Fittings for Sight Glass	No	No	Yes
Protected Openings	No	Yes	N/A
PRV/ARV	N/A	N/A	S.C.
On/Off Pressure	N/A	N/A	50/60
Access Padlocked	No	Yes	N/A
Height to Bottom of Elevated Tank	N/A	N/A	N/A
Height to Max. Water Level	N/A	N/A	N/A

Comments The 6,000 gallon tank is essentially a clearwell (that is not under the filters) and is referred to as the transfer tank (because it is between the filters & the pumps). It is unsealed around the perimeter of the top edge and the top is a little corroded. The entry port cover for the ground storage tank's level indicator is not bolted on tightly (& is therefore not properly sealed). A check valve is being used a pressure relieve valve on the hydrotank.

HIGH SERVICE PUMPS

Pump Number	1 (N)	2 (Middle)	(S)
Type	Centrifugal	Centrifugal	Centrifugal
Make	Aurora	Aurora	Aurora
Model	411-BF	411-BF	411-BF
Capacity (gpm)	500	300	300
Motor HP	50	25	25
Date Installed	1985	~2002	1985
Maintenance	200	None	~1998

Comments Pump #1 (the North pump) is the "fire pump" and the one the runs the most.

Plantation Bay WTP

PWS ID # 2184251
Survey Date 11/19/04

OTHER TASTE/ODOR CONTROL PROCESSES
Explain: N/A

AMMONIATION
Make N/A Capacity N/A
Injection Points
Comments

COAGULATION (Turbidity Removal)
Chemicals Used N/A
Condition of Floc
Is settling OK?
Comments

SOFTENING (Ca/Mg Hardness Removal)

Chemical Precipitation Process:
Chemicals Used Lime
Nature of Floc Ok
Sludge Blanket Appearance Not visible
Is settling OK? Not great, but ok.
Excessive carry-over? No
Secondary Precipitation No
Effluent Stability
Recarbonation Type None
Sludge Recirculation Used No
Comments

Ion Exchange Process:
Make N/a Model N/A
Capacity
Grade of Salt for Regeneration
Backwash Effluent Destination
Comments

STABILIZATION
Effluent S.I. Is pH control done? No
Chemical Used
Injection Point
pH Range of Effluent

FILTRATION (Suspended Solids Removal)
Type Infilco Rapid Sand Filter
Size 8' x 10' No. of Units 3
Length of Filter Runs ~48 hours
Type of Filter Media Sand & 6 layers of gravel
Is media visible? Yes Clean after BW? No
Filter Rate ~350 gpm BW Rate See below.
Filter Capacity
Cracks/Cementation/Channeling No
Effluent Stability Algae Growth No
Turbidity in clearwell? No
Head Loss Gauge No
Comments The media was last changed about 7 years ago.
The Backwash Rate is 1,600-1,700 gpm.
The system does not have enough storage volume to allow the filters to be properly backwashed.

MEMBRANE FILTRATION (R.O., etc.)
Make N/A Pressure N/A
No. of Modules Permeate Cap.
Blend Rate (GPM)
Chemicals Used
Waste-to-product Ratio
Pre-treatment
Effluent Quality: TDS (mg/L)
Waste Disposal Site
IW Permit # & Expir. Date
Comments

FLUORIDATION
Chemical Used N/A Strength N/A
Corrosion Noted Plugging Noted
Feeder Make/Model
High Level Ventilation (acid)
Acid carboys/day tank vented outside
Designated Electrical Outlet (acid)
Analytical Testing Equipment
Anti-siphon Valves
Residual Range
Point of Application
Emergency Eyewash
Comments

ADDITIVES
Meets NSF 60 & 61 Yes

Plantation Bay WTP

PWS ID # 2184251
Survey Date 11/19/04

STORAGE FACILITIES

(B) Bladder (CW) Clearwell (C) Contact (E) Elevated (G) Ground (H) Hydropneumatic **(SC) See Comments**

Tank Type/Number									
Capacity (gal)									
Material									
Gravity Drain									
By-pass Piping									
Pressure Gauge									
Sight Glass or Level Indicator									
Fittings for Sight Glass									
Protected Openings									
PRV/ARV									
On/Off Pressure									
Access Padlocked									
Height to Bottom of Elevated Tank									
Height to Max. Water Level									

Comments

HIGH SERVICE (HSP), BACKWASH (BWP), TRANSFER (TP) and OTHER (OP) PUMPS

Pump Purpose	TP	TP	TP		BW	BW		OP	OP
Pump Number	1 (N)	2 (M)	3 (S)		1 (N)	2 (S)		1 (N)	2 (S)
Type	Cent.	Cent.	Cent.		Cent.	Cent.		VT	VT
Make	Aurora	Aurora	Aurora		Aurora	Aurora		Aurora	Aurora
Model	344A-BF	344A-BF	344A-BF		?	?		7RH	7RH
Capacity (gpm)	350	350	175		1,600	1,600		350	350
Motor HP	3	3	2		15	15		5	5
Date Installed	1985	1985	1985		1985	1985		1985	1985
Maintenance	2001	2001	2001		None	None		2001	2001

Comments The two Other Pumps (OP) are Backwash Return pumps.

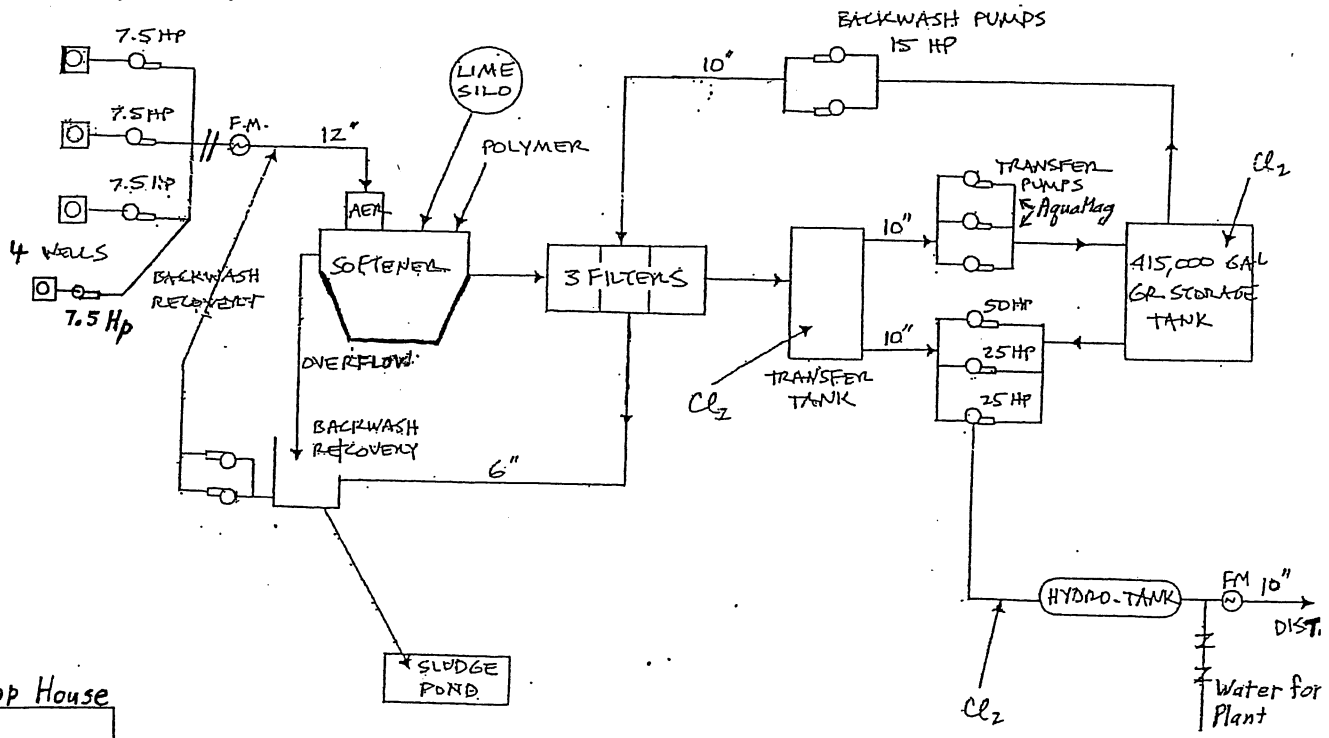
Plantation Bay WTP

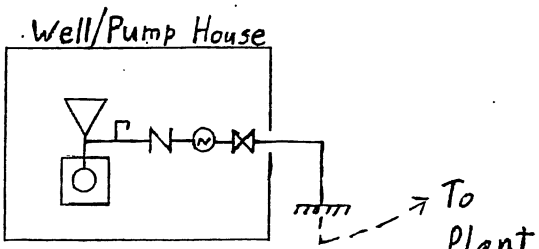
PWS ID # 2184251
Survey Date 11/19/04

COMPLIANCE MONITORING COMMUNITY PUBLIC WATER SYSTEMS			
CONTAMINANT	**Last Sampled**	**Due Date**	**COMMENTS**
Microbiological (Bacteria)	xxxxxxxx	Monthly	2 distribution samples + 1 from each raw source (distribution number based upon the population served)
Disinfectant Levels	xxxxxxxx	Monthly	2 field readings (i.e. one taken with each microbiological sample that is taken from the distribution system). **Only report the quarterly averages of the monthly readings.**
Disinfection Byproducts (DBPs)	12/2004	Quarterly	Total Trihalomethanes (TTHMs) & Haloacetic Acids (HAA5s) taken in accordance with your D/DBPR Monitoring Plan.
Nitrate & Nitrite (as N)	2004	2005	Taken from each Point of Entry to the distribution system (i.e. from each plant's effluent)
Inorganic Contaminants	2003	2006	Taken from each Point of Entry to the distribution system (i.e. from each plant's effluent)
Volatile Organic Contaminants	2003	2006	Taken from each Point of Entry to the distribution system (i.e. from each plant's effluent)
Synthetic Organic Contaminants	2003	2006	Taken from each Point of Entry to the distribution system (i.e. from each plant's effluent). **2 quarterly samples required if >3,300 people served.**
Radionuclides	2003	2009	Taken from each Point of Entry to the distribution system (i.e. from each plant's effluent)
Secondary Standards	2003	2006	Taken from each Point of Entry to the distribution system (i.e. from each plant's effluent)
Lead and Copper	2004	2005	**Samples taken from pre-approved sample plan sites.**
Asbestos	Waived	2012	**Samples taken from distribution.** Waiver available if there is no asbestos pipe in the distribution system.

Unless otherwise noted, all samples shall be representative of each source after treatment.

SCHEMATIC:





Layout of each well

Plantation Bay WTP

PWS ID # 2184251
Survey Date 11/19/04

MONITORING VIOLATIONS	MCL VIOLATIONS
None	No

DEFICIENCIES:

Only 2 of the 4 connected chlorine cylinders are equipped with fitted wrenches.

The perimeter of the top edge of the transfer tank is not sealed against entry.

The transfer tank is not locked against entry.

There are a lot of ants inside the housing and around the base of Well No. 2.

The system does not have a Cross Connection Control Program.

The system does not have a backup rotameter or a backup chlorine injector.

The system does not have enough backwash water storage to allow the adequate backwashing of the filters.

Inspector Emerson C. Rauferson
Emerson C. Rauferson
Title Professional Engineer I
Date 1/4/05

Approved by B. Rodriguez
Blanca R. Rodriguez
Title Engineer IV
Date 1/5/05

PLANTATION BAY UTILITY COMPANY

100 Plantation Bay Drive
Ormond Beach, FL 32174

Phone: (386) 437-9185
Fax: (386) 437-2237

March 8, 2005

Emerson C. Raaulerson, P.E.
FDEP-Drinking Water Section
7825 Baymeadows Way, Suite B200
Jacksonville, FL 32256-7590

Re: ***Sanitary Survey, Plantation Bay Utility Company***
Plantation Bay, Flagler County, Florida

Dear Mr. Raulerson:

With respect to the comments dated January 4, 2005 generated as a result of your November 19, 2005 sanitary inspection of our potable water system, PBUC is providing the following responses:

Comment #1
All attached chlorine cylinders now have fitted wrenches.

Comment #2
Wetherell Treatment Systems has cleaned, sealed the top edge of the transfer tank.

Comment #3
The transfer tank's hatch lid is now locked.

Comment #4
The ants have been removed in and around the base of Well #2. Annular spaces between the well casing and the pump house pad has been sealed.

Comment #5
PBUC is working with Finley Engineering Group to develop a Cross Connection Control Plan. The plan will be forwarded to you by March 30th, 2005.

Comment #6
Backup rotameters and chlorine injectors have been ordered.

Comment #7
PBUC is currently contracting to have the lime settling pond cleaned out. The lime settling pond is designed to collect backwash effluent pumped from the backwash settling basin. As the filter backwash settling basin was originally designed to handle the water plant at full capacity, its performance is expected to be returned to its designed parameters once the lime settling pond has been cleaned out.

Should there be any additional questions regarding this summary or any other PBUC matter, please do not hesitate to contact the undersigned at (386) 788-0820.

Respectfully Submitted,

Douglas R. Ross, Jr.
Utility Manager

CC: Jerry Finley, FEG
Glenn Wetherell, Wetherell Treatment Systems.

(726) PBUC - DEP Compliance Evaluation Inspection 6/1/01

Copy to Jerry F & Kevin's file

Department of Environmental Protection

Jeb Bush
Governor

Northeast District
7825 Baymeadows Way, Suite B200
Jacksonville, Florida 32256-7590

David B. Struhs
Secretary

July 6, 2001

Mr. Morteza Hosseini-Kargar, President
Plantation Bay Utility Corporation
2359 Beville Road
Daytona Beach, Florida 32119

JUL 11 2001

Dear Mr. Hosseini-Kargar:

Flagler County – Domestic Wastewater
Plantation Bay WWTP - FLA011597
Compliance Evaluation Inspection

Personnel from the Department of Environmental Protection (DEP) conducted a Compliance Evaluation Inspection (CEI) of the Plantation Bay Wastewater Treatment Facility on June 1, 2001. The inspection report is attached for your records. The following are comments for areas of special interests evaluated during the inspection and a file review:

1. Permit

   The facility permit FLA011597 was issued on June 10, 1998 and expires on June 9, 2003.

2. Records and Reports

   The records were not available at the time of the inspection. ***Please indicate where the records are maintained and how access to these records can be obtained during an inspection.***

3. Facility Site Review

   Overall, the wastewater treatment facility appeared to operating satisfactorily. The necessary equipment was located on site and appeared to be operational. The following observations were noted:

   a. The lift station contained two pumps, alarms, and was locked.
   b. The influent screening contained a trash can with a lid for proper disposal.
   c. The aeration was light brown in color and had adequate mixing.
   d. Three blowers were on site and operational.

e. The clarifier weirs were level. Some floatable solids were noted on the surface of the clarifier.
f. The chlorine contact chamber had a tint of green with notable solids and grease.
g. The digester had adequate freeboard.

4. Flow Measurement

The flow-measuring device in operation was a Level Tech SCM sonic level in-line transmitter flow meter and v-notch weir. According to Rule 62-601.200(17), the flow meter shall be calibrated on an annual basis. ***Please indicate the last date of calibration for this meter.***

5. Operation and Maintenance

The wastewater treatment facility appears to be in good working order and well maintained. The following items were noted:

a. A reduced pressure zone (RPZ) backflow prevention device is located on site. In accordance with Rule 62-555.360, FAC, the RPZ must be inspected annually. ***Please indicate the last inspection date for this device.***
b. Could not verify adequate operator coverage due to lack of records. ***Please indicate what days and times the operator is on-site and supply a copy of the logbook.***

6. Effluent

The effluent is discharged from the facility to a pond. The pond was clean and well maintained. It was noted that the effluent was clear.

A file review of the Discharge Monitoring Reports was conducted for the months of January 2000 through March 2001. No deficiencies were noted.

Overall the facility is rated out of compliance due to un-availability of records. Please respond within 30 days of receipt of this letter to the deficiencies noted in ***bold Italics***. Please find a copy of the inspection report enclosed for your convenience. If you have any questions regarding this letter please contact me at 904-807-3343. Thanks for your continued cooperation with the Department staff.

Sincerely,

Jessica Lippincott

Jessica Lippincott
Compliance Engineer
Domestic Wastewater Section

JAL: jl

Enclosures

cc: Mr. Glenn D. Wetherell – Wetherell Treatment Systems

COMET ENTRY DATE
__/__/__

Attachment 2

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

WASTEWATER COMPLIANCE INSPECTION REPORT

FACILITY AND INSPECTION INFORMATION

@ = Optional

Name and Physical Location of Facility	WAFR ID:	County	Entry Date/Time
Plantation Bay WWTP	FLA011597	Flagler	6/1/01
Old Dixie Hwy, West of I-95		Phone	@ Exit Date/Time
Ormond Beach, Florida			

Name(s) of Field Representatives(s)	Title	Phone
Mr. Glenn D. Wetherall	Operator	
Route 3, 600 Hull Road	Wetherall Treatment systems	
Ormond Beach, Florida 32174		

Name and Address of Permittee or Designated Representative	Title	Phone	@ Operator Certification #
Mr. Morteza Hosseini-Kargar	President		
Plantation Bay Utilities			
2359 Beville Road			
Daytona Beach, Florida 32119			

Inspection Type	C	E	I	Samples Taken(Y/N): n	@ Sample ID#:	Samples Split (Y/N):
☒ Domestic ☐ Industrial				Were Photos Taken(Y/N): Y	@ Log book Volume :	@ Page

FACILITY COMPLIANCE AREAS EVALUATED

S=Satisfactory; M=Minor; U=Unsatisfactory; Blank=Not Evaluated

Significant Non-Compliance Criteria Should be Reviewed when Unsatisfactory Ratings Are Given in Areas Marked by a "♦"

PERMIT/ORDERS		SELF MONITORING PROGRAM		FACILITY OPERATIONS		EFFLUENT/DISPOSAL	
S	1.♦Permit		3. Laboratory	S	6. Facility Site Review	S	9. ♦Effluent Quality
	2.♦Compliance Schedules		4. Sampling	S	7. Flow Measurement		10.♦Effluent Disposal
		M	5.♦Records & Reports	S	8.♦Operation & Maintenance		11. Residuals/Sludge
	13. Other:						12. Groundwater

Facility and/or Order Compliance Status: ☐ In-Compliance ☒ Out-Of-Compliance ☐ Significant-Out-Of-Compliance

Recommended Actions: See attached letter

Name(s) and Signature(s) of Inspector(s)	District Office/Phone Number	Date
Jessica Lippincott, E.I. Jessica L Lippincott	NED 904-807-3343	6/06/01
@ Signature of Reviewer Richard Dasher, P.E. Richard Dasher	District Office/Phone Number	Date 7-6-01

Fill Out This Section For All Surface Water Discharger Inspections (CEI, CSI, CBI, PAI, XSI, RI)

Transaction Code		NPDES Number	YR/MO/DA	Insp Type	Inspector	Fac Type
N	S			1	2	3

ADDITIONAL NPDES COMMENTS

Inspection Type (Field 1) A=PAI, B=CBI, C=CEI, S=CSI, X=XSI, R=RI

Inspection Code (Field 2): S=State, J=Joint EPA/State-EPA Lead, T=Joint State/EPA-State Lead, L=Local Program

Facility Type (Field 3): 1=Municipal (Publicly Owned), 2=Industrial and Privately Owned Domestic, 3= Agricultural, 4=Federal

Every other field is self explanatory

Revised: August 7, 2000

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

WASTEWATER COMPLIANCE INSPECTION REPORT

FACILITY AND INSPECTION INFORMATION

PLANT CONDITION DURING INSPECTION

Facility Name: Plantation Bay Insp. Date: 6/1/01 Time In: 10:44 AM

Facility ID#: Time Out: 11:15 AM

Lift Stations: Total #___ # Pumps___ Alarms (A/V):___ Comments: locked

Influent: Screening Y Grit Removal (Y/N): N Comments: has trash can w/ lid

Aeration: Color light brown Mixing adequate # of Aeration basins 3

Comments: Stirling Basin - good

Blowers: # 3 On Timers?(Y/N): ? Condition: good

Clarifiers: # 1 Blanket depth: ___ ft. Weirs level ?(Y/N): Y Filters? (Y/N) N (not in operation)

Appearance: Some floatable solids w pin floc Skimmer not working? Yes (OK)

Chlorine Contact Chamber: Baffled? (Y/N): Y Condition: green in color, (minor) some solids & grease

Disinfection/Dechlor Methods: Liquid Cl TRC sample results ___ / ___

If Gas, (Y/N): Chained?___ Auto. Switchover/scales?___ Alarms?___ Exhaust fan?___ Respiratory/Emergency___

Digester: Freeboard: 1 1/2 ft. Land Appl. Site/To RMF?:

Sludge Beds #: Appearance: N/A

Effluent Pump #: 1/3? Alarms? (A/V): Comments: good

Outfall Appearance:

Land Application (circle one) (Ponds) / Drainfield / Sprayfield If Ponds: # 1 Freeboard 5 ft

Appearance/Comments: good - no vegetation clean + well maintained

(X) Records Reviewed (Check): DMR___ Permit___ Lab Sheet___ COC's___ Calibration logs___

On Site Log Includes (Y/N): Bound?___ In/Out Times?___ Flow/TRC/pH results?___

Maintenance Actions?___ Are Readings Taken on Days Operator is Not Present? ___

Lead Operator: Unfurnished #Staff___ # Certified Staff___ Hours Staffed ___

(not available at time of inspection - put in letter (A))

Process Control: Target MLSS ___ mg/l, Last MLSS ___ mg/l Sludge Wasting Freq. ___

Flow Measurement: Type ultra sonic + weir notch Date Calibrated (A) Current Flow ___ Condition - ___

Access: gated Locked?: Y - manned guard last RPZ insp. Date (B)

Observations: Minor odors

Level Tech SCM sonic level transmitter

Effluent clear

Letter will include (1) need to know about calibration of flow meter and RPZ device (2) need to know about records and operator coverage

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT

Henry Dean, Executive Director
John R. Wehle, Assistant Executive Director

POST OFFICE BOX 1429 PALATKA, FLORIDA 32178-1429
TELEPHONE 904-329-4500 SUNCOM 904-860-4500
TDD 904-329-4450 TDD SUNCOM 860-4450
FAX (Executive) 329-4125 (Legal) 329-4485 (Permitting) 329-4315 (Administration/Finance) 329-4508

SERVICE CENTERS

618 E. South Street
Orlando, Florida 32801
407-897-4300
TDD 407-897-5960

7775 Baymeadows Way
Suite 102
Jacksonville, Florida 32256
904-730-6270
TDD 904-448-7900

PERMITTING:
305 East Drive
Melbourne, Florida 32904
407-984-4940
TDD 407-722-5368

OPERATIONS:
2133 N. Wickham Road
Melbourne, Florida 32935-8109
407-752-3100
TDD 407-752-3102

March 13, 2001

PLANTATION BAY UTILITY CO
100 PLANTATION BAY DR
Ormond Beach, FL 32174

SUBJECT: Consumptive Use Permit Number 1960
Plantation Bay Development

Dear Sir/Madam:

Enclosed is your permit and the forms necessary for submitting information to comply with conditions of the permit as authorized by the St. Johns River Water Management District on March 13, 2001.

Permit issuance does not relieve you from the responsibility of obtaining permits from any federal, state and/or local agencies asserting concurrent jurisdiction over this work.

The enclosed permit is a legal document and should be kept with your other important records. Please read the permit and conditions carefully since the referenced conditions may require submittal of additional information. All information submitted as compliance with permit conditions must be submitted to the nearest District Service Center and should include the above referenced permit number.

Please be advised that the period of time within which a third party may request an administrative hearing on this permit may not have expired by the date of issuance. A potential petitioner has twenty-six (26) days from the date on which the actual notice is deposited in the mail, or twenty-one (21) days from publication of this notice when actual notice is not provided, within which to file a petition for an administrative hearing pursuant to Sections 120.569 and 120.57, Florida Statutes. Receipt of such a petition by the District may result in this permit becoming null and void.

Sincerely,

Gloria Lewis, Director
Permit Data Services Division

Enclosures: Permit, Conditions for Issuance, Compliance Forms, Map,Well Tags

cc: District Permit File

Agent: ✓ Finley Engineering Group
PO Box 290381
Port Orange, FL 32129-0381

William Kerr, CHAIRMAN MELBOURNE BEACH
Ometrias D. Long, VICE CHAIRMAN APOPKA
Jeff K. Jennings, SECRETARY MAITLAND
Duane Ottenstroer, TREASURER SWITZERLAND
Dan Roach FERNANDINA BEACH
William M. Segal MAITLAND
Otis Mason ST. AUGUSTINE
Clay Albright EAST LAKE WEIR
Reid Hughes DAYTONA BEACH

PERMIT NO. 1960
PROJECT NAME: Plantation Bay Development

DATE ISSUED: March 13, 2001

A PERMIT AUTHORIZING:

The District authorizes, as limited by the attached permit conditions, the use of 160.6 million gallons per year of ground water from the Floridan aquifer for the household use of 4400 people and 0.6 million gallons per day for essential fire protection.

LOCATION:

Site: Plantation Bay
Flagler County
Section(s): 4 Township(s): 13S Range(s): 31E

ISSUED TO:
PLANTATION BAY UTILITY CO
100 PLANTATION BAY DR
Ormond Beach, FL 32174

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 March 13, 2001

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

By: _____
Hal Wilkening
Director

By: _____
Henry Dean
Assitant Secretary

"EXHIBIT A"
CONDITIONS FOR ISSUANCE OF PERMIT NUMBER 1960
PLANTATION BAY UTILITY CO
DATED MARCH 13, 2001

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. All submittals made to demonstrate compliance with this permit must include the permit number 1960 plainly labeled on the submittals.

10. This permit will expire 20 years from the date of issuance.

11. Maximum annual withdrawal from the Floridan Aquifer for household type uses must not exceed:
56.6 million gallons from January 1, 2001 to December 31, 2001
62.0 million gallons from January 1, 2002 to December 31, 2002
67.5 million gallons from January 1, 2003 to December 31, 2003
73.0 million gallons from January 1, 2004 to December 31, 2004
78.5 million gallons from January 1, 2005 to December 31, 2005
84.0 million gallons from January 1, 2006 to December 31, 2006
89.4 million gallons from January 1, 2007 to December 31, 2007
94.9 million gallons from January 1, 2008 to December 31, 2008
100.4 million gallons from January 1, 2009 to December 31, 2009
105.9 million gallons from January 1, 2010 to December 31, 2010
111.3 million gallons from January 1, 2011 to December 31, 2011
116.8 million gallons from January 1, 2012 to December 31, 2012
122.3 million gallons from January 1, 2013 to December 31, 2013
127.8 million gallons from January 1, 2014 to December 31, 2014
133.2 million gallons from January 1, 2015 to December 31, 2015
138.7 million gallons from January 1, 2016 to December 31, 2016
144.2 million gallons from January 1, 2017 to December 31, 2017
155.1 million gallons from January 1, 2018 to December 31, 2018
160.6 million gallons from January 1, 2019 to December 9, 2020
160.6 million gallons from January 1, 2020 to March 13, 2021.

12. Maximum daily withdrawal from the Floridan Aquifer for essential fire

protection must not exceed a total of 0.6 million gallons.

13. Wells A (GRS ID 6747), B (GRS ID 6748) and C (GRS ID 6749) (as listed on the application) are equipped with totalizing flow meters. These meters must maintain 95% accuracy, be verifiable and be installed according to the manufacturer's specifications.

14. Prior to beginning water use, well D (GRS ID 31977) (as listed on the application) must be equipped with a totalizing flow meter and a water level monitor which will automatically. The flow meter must maintain 95% accuracy, be verifiable and installed according to the manufacturer's specifications. Documentation (i.e. manufacturers specifications and photo) of proper installation of this meter must be submitted within 30 days of meter placement.

15. Total withdrawals from wells A (GRS ID 6747), B (GRS ID 6748), C (GRS ID 6749) and D (GRS ID 31977) (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 31
July - December	January 31

16. Permittee must have all flow meters 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.

17. 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.

18. The permittee must implement the Water Conservation Plan submitted to the District, and maintain these practices for the duration of the permit.

19. 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.

20. The permittee must continue to furnish the total daily flow of reclaimed wastewater to the Plantation Bay Golf Course for use as irrigation water.

21. Drawdowns within the production wells must not exceed +4 feet NGVD. The permittee must install a water level monitor on well A (GRS ID 6747) by June 16, 2001 as stated in the RAI response dated January 10, 2001 and maintain the water level monitors on wells A (GRS ID 6747), B (GRS ID 6748), C (GRS ID 6749) and D (GRS ID 31977) (as listed on the application) which will automatically shut off the well or wells when +4 feet NGVD drawdown occurs.

22. Water samples must be collected from wells A (GRS ID 6747), B (GRS ID 6748), C (GRS ID 6749) and D (GRS ID 31977) (as listed on the application) in accordance with a District approved QA/QC program in May and October of each year for the duration of the permit. A QA/QC program must be submitted to the District 2 months prior to sampling. The water samples must be analyzed for the following:

Calcium	Total Alkalinity
Sodium	Magnesium
Potassium	Sulfate
Chlorides	Total Hardness
Ph	Carbonate

All major ion analyses must be performed on filtered samples, and must be checked for a cation-anion balance of less than 5%. If this 5% error margin is exceeded in any sample, an additional sample must be collected immediately and reanalyzed. Results of these tests must be submitted to the District on a semi-annual basis.

23. The permittee shall submit, to the District, a compliance report pursuant to subsection 373.236(3), F.S., 5, 10, and 15 years from the date of issuance of this permit. Specifically, the permittee shall submit the report by April of 2006, 2011, and 2016. The report shall contain sufficient information to demonstrate that the permittee's use of water will continue, for the remaining duration of the permit, to meet the conditions for permit issuance set forth in the District rules that existed at the time the permit was issued for 20 years by the District. At a minimum, the compliance report must:
(a) meet the submittal requirements of section 4.2 of the Applicant's Handbook: Consumptive Uses of Water, February 8, 1999; and
(b) demonstrate that the use of water authorized by this permit can be supplied by the source.

STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL REGULATION
NOTICE OF PERMIT

Jerry S. Johnson, President
Falcon Development of Flagler County, Inc.
533 North Nova Road, Suite 106
Ormond Beach, Florida 32074

Flagler County - PW
Plantation Bay Water Treatment Plant

Enclosed is Permit Number WC18-102080 to construct a water treatment facility issued pursuant to Section(s) 120.57, Florida Statutes.

Any party to this Order (permit) has the right to seek judicial review of the permit pursuant to Section 120.68, Florida Statutes, by the filing of a Notice of Appeal pursuant to Rule 9.110, Florida Rules of Appellate Procedure, with the Clerk of the Department in the Office of General Counsel, 2600 Blair Stone Road, Tallahassee, Florida 32301; and by filing a copy of the Notice of Appeal accompanied by the applicable filing fees with the appropriate District Court of Appeal. The Notice of Appeal must be filed within 30 days from the date this Notice is filed with the Clerk of the Department.

Executed this 6 day of JAN., 1986 in Jacksonville, Florida.

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL REGULATION

Ernest E. Frey
District Manager

3426 Bills Road
Jacksonville, Florida 32207
(904)396-6959

Copies furnished to: Richard W. Fernandez, P.E.
Glenn Dykes
Flagler County Health Department

CERTIFICATE OF SERVICE

This is to certify that this NOTICE OF PERMIT and all copies were mailed before the close of business on this 7th day of January, 1986 to the listed persons.

FILING AND ACKNOWLEDGEMENT
FILED, on this date, pursuant to §120.52 (9), Florida Statutes, with the designated Department Clerk, receipt of which is hereby acknowledged.

Clerk 01/09/86
Date

STATE OF FLORIDA

DEPARTME[illegible] OF ENVIRONMENTAL RE[illegible]JLATION

NORTHEAST DISTRICT

3426 BILLS ROAD
JACKSONVILLE, FLORIDA 32207
(904) 396-6959

BOB GRAHAM
GOVERNOR

VICTORIA J. TSCHINKEL
SECRETARY

ERNEST E. FREY
DISTRICT MANAGER

PERMITTEE:

Jerry S. Johnson, President
Falcon Development of Flagler
County, Inc.
533 North Nova Road, Suite 106
Ormond Beach, Florida 32074

I.D. Number:
Permit/Certification Number: WC18-102080
Date of Issue: January 2, 1986
Expiration Date: January 2, 1987
County: Flagler
Latitude/Longitude:
Section/Township/Range:
Project: Plantation Bay Water Treatment Plant

This permit is issued under the provisions of Chapter(s) 403, Florida Statutes, and Florida Administrative Code Rule(s) 17-22. The above named permittee is hereby authorized to perform the work or operate the facility shown on the application and approved drawing(s), plans, and other documents attached hereto or on file with the department and made a part hereof and specifically described as follows:

To construct a 0.75 MGD water treatment plant to serve the Plantation Bay area. The plant will consist of three wells at 175 gpm each, 1.5 MGD aeration, 0.75 MGD lime softening unit, 0.75 MGD gravity sand filters, two-525 gpm, and one-350 gpm high service pumps, one-415,000 gallon ground storage tank, a 400,000 clear well, a 27,000 gallon wash tank, two-1,600 gpm backwash pumps, auxiliary power, and chlorinator.

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

PERMITTEE:
Jerry S. Johnson, President
Falcon Development of Flagler
County, Inc.

I.D. Number:
Permit/Certification Number: WC18-102080
Date of Issue: January 2, 1986
Expiration Date: January 2, 1987

GENERAL CONDITIONS:

1. The terms, conditions, requirements, limitations, and restrictions set forth herein are "Permit Conditions" and as such are binding upon the permittee and enforceable pursuant to the authority of Sections 403.161, 403.727, or 403.859 through 403.861, Florida Statutes. The permittee is hereby placed on notice that the department will review this permit periodically and may initiate enforcement action for any violation of the "Permit Conditions" by the permittee, its agents, employees, servants or representatives.

2. This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviation from the approved drawings, exhibits, specifications, or conditions of this permit may constitute grounds for revocation and enforcement action by the department.

3. As provided in Subsections 403.087(6) and 403.722(5), Florida Statutes, the issuance of this permit does not convey any vested rights or any exclusive privileges. Nor does it authorize any injury to public or private property or any invasion of personal rights, nor any infringement of federal, state or local laws or regulations. This permit does not constitute a waiver of or approval of any other department permit that may be required for other aspects of the total project which are not addressed in the permit.

4. This permit conveys no title to land or water, does not constitute state recognition or acknowledgement of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the state. Only the Trustees of the Internal Improvement Trust Fund may express state opinion as to title.

5. This permit does not relieve the permittee from liability for harm or injury to human health or welfare, animal, plant or aquatic life or property and penalties therefore caused by the construction or operation of this permitted source, nor does it allow the permittee to cause pollution in contravention of Florida Statutes and department rules, unless specifically authorized by an order from the department.

6. The permittee shall at all times properly operate and maintain the facility and systems of treatment and control (and related appurtenances) that are installed or used by the permittee to achieve compliance with the conditions of this permit, as required by department rules. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to achieve compliance with the conditions of the permit and when required by department rules.

7. The permittee, by accepting this permit, specifically agrees to allow authorized department personnel, upon presentation of credentials or other documents as may be required by law, access to the premises, at reasonable times, where the permitted activity is located or conducted for the purpose of:

   a. Having access to and copying any records that must be kept under the conditions of the permit;

   b. Inspecting the facility, equipment, practices, or operations regulated or required under this permit; and

   c. Sampling or monitoring any substances or parameters at any location reasonably necessary to assure compliance with this permit or department rules.

   Reasonable time may depend on the nature of the concern being investigated.

8. If, for any reason, the permittee does not comply with or will be unable to comply with any condition or limitation specified in this permit, the permittee shall immediately notify and provide the department with the following information:

   a. a description of and cause of non-compliance; and

   b. the period of noncompliance, including exact dates and times; or, if not corrected, the anticipated time the noncompliance is expected to continue, and steps being taken to reduce, eliminate, and prevent recurrence of the noncompliance.

   The permittee shall be responsible for any and all damages which may result and may be subject to enforcement action by the department for penalties or revocation of this permit.

9. In accepting this permit, the permittee understands and agrees that all records, notes, monitoring data and other information relating to the construction or operation of this permitted source, which are submitted to the department, may be used by the department as evidence in any enforcement case arising under the Florida Statutes or department rules, except where such use is proscribed by Sections 403.73 and 403.111, Florida Statutes.

10. The permittee agrees to comply with changes in department rules and Florida Statutes after a reasonable time for compliance, provided, however, the permittee does not waive any other rights granted by Florida Statutes or department rules.

11. This permit is transferable only upon department approval in accordance with Florida Administrative code Rules 17-4.12 and 17-30.30, as applicable. The permittee shall be liable for any noncompliance of the permitted activity until the transfer is approved by the department.

12. This permit is required to be kept at the work site of the permitted activity during the entire period of construction or operation.

13. This permit also constitutes:

    () Determination of Best Available Control Technology (BACT)
    () Determination of Prevention of Significant Deterioration (PSD)
    () Certification of Compliance with State Water Quality Standards (Section 401, PL 92-500)
    () Compliance with New Source Performance Standards

14. The permittee shall comply with the following monitoring and record keeping requirements:

    a. Upon request, the permittee shall furnish all records and plans required under department rules. The retention period for all records will be extended automatically, unless otherwise stipulated by the department, during the course of any unresolved enforcement action.

    b. The permittee shall retain at the facility or other location designated by this permit records of all monitoring information (including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation), copies of all reports required by this permit, and records of all data used to complete the application for this permit. The time period of retention shall be at least three years from the date of the sample, measurement, report or application unless otherwise specified by department rule.

    c. Records of monitoring information shall include:

        - the date, exact place, and time of sampling or measurements;
        - the person responsible for performing the sampling or measurements;
        - the date(s) analyses were performed;
        - the person responsible for performing the analyses;
        - the analytical techniques or methods used; and
        - the results of such analyses.

15. When requested by the department, the permittee shall, within a reasonable period of time furnish any information required by law which is needed to determine compliance with the permit. If the permittee becomes aware that relevant facts were not submitted or were incorrect in the permit application or in any report to the department, such facts or information shall be submitted or corrected promptly.

16. In the case of a hazardous waste facility permit, the following permit conditions shall also apply.

a. The permittee will submit the following reports to the department:

(1) Manifest discrepancy report: If a significant discrepancy in a manifest is discovered, the permittee must attempt to reconcile the discrepancy. If not resolved within 15 days after receiving the waste, the permittee shall immediately submit a letter report including a copy of the manifest to the department.

(2) Unmanifested waste report: Permittee shall submit an unmanifested waste report to the department within 15 days of receipt of unmanifested waste.

(3) Annual report: An annual report covering facility activities during the previous calendar year must be submitted in accordance with Florida Administrative Code Rule 17-30.

b. Notification of any non-compliance which may endanger health or the environment, including the release of any hazardous waste that may endanger public drinking water supplies, or the occurrence of a fire or explosion from the facility which could threaten the environment or human health outside the facility, shall be verbally submitted to the department within 24 hours and a written submission provided within 5 days. The verbal submission within 24 hours shall contain the name, address, I.D. number and telephone number of the facility and owner or operator, the name and quantity of materials involved, the extent of injuries (if any), an assessment of actual or potential hazards, and the estimated quantity and disposition of recovered material. The written submission shall contain the following:

(1) a description of and cause of non-compliance; and

(2) if not corrected, the anticipated time the non-compliance is expected to continue and steps being taken to reduce, eliminate, and prevent recurrence of the non-compliance.

c. Reports of compliance or noncompliance with, or any progress reports on, requirements contained in any compliance schedule of this permit shall be submitted no later than 14 days following each schedule date.

d. All reports or information required to be submitted to the department by a hazardous waste permittee shall be signed by a person authorized to sign a permit application.

PECIFIC CONDITIONS:

1. This approval is given with the understanding that upon the installation of such works its operations shall be placed under the care of a competent person, whose qualifications are approved by the Department and the operation shall be carried out according to best accepted practice and in accordance with the requirements of the rules and regulations of the Department. This includes not only the provision of continuing essential funds for operation and maintenance of chemical supplies for plant operation; but also the funds for maintenance of equipment and supplying the needs of a suitable water plant laboratory which is required for proper operation of this water treatment facility.

2. Water supply facilities including mains shall be installed, cleaned, disinfected and bacteriologically cleared for service; in accordance with the latest applicable AWWA Standards and Department rules and regulations.

PERMITTEE:
Jerry S. Johnson, President
Falcon Development of Flagler
County, Inc.

I.D. Number:
Permit/Certification Number: WC18-102080
Date of Issue: January 2, 1986
Expiration Date: January 2, 1987

SPECIFIC CONDITIONS:

3. Where water and sewer mains cross with less than 18" vertical clearance, the sewer will be 20 ft. of either cast iron pipe or concrete encased vitrified clay pipe, centered on the point of crossing. When a water main parallels a sewer main, a separation of at least 10 ft. should be maintained where practical.

4. Certification as to construction of this project in accordance with the approved plans by a Florida Registered Professional Engineer together with satisfactory bacteriological analyses shall be provided and a letter of clearance obtained from this Agency before placing these facilities in service.

5. All PVC pipe shall bear the National Sanitation Foundation (NSF) seal of approval for potable water pipe.

6. The maximum number of equivalent residential connections allowed will be 954 until additional raw water supply, filters, and high service pumps are added. Extension to the ERC's will be considered based on the future consumption and peak demand.

7. Prior to placing this system into service it will be necessary for you to supply the Department 20 bacteriological analyses of each well.

8. The wells shall have a 6'X6' concrete slab, a sample tap, a pressure gauge, a check valve, and a shut-off valve.

9. This facility shall have laboratory equipment to measure turbidity, color, chlorine residual, hardness, and alkalinity.

10. A flow meter to measure the filter backwash flow rate in gpm shall be available. A minimum backwash flow rate of 15 gpm/sq. ft. and a 40' head pressure shall be provided for the backwash. The duration of the backwash cycle shall be based on the backwash quality.

11. A guage to measure the filter head loss shall be available in each of the three filters.

Issued this 2nd day of Jan., 19 86

STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL REGULATION

Ernest E. Frey, District Manager

St. Johns River
Water Management District
Kirby B. Green III, Executive Director • John R. Wehle, Assistant Executive Director

Post Office Box 1429 • Palatka, FL 32178-1429 • (386) 329-4500

March 14, 2002

Plantation Bay Utility Co
100 Plantation Bay Dr
Ormond Beach, FL 32174

SUBJECT: Water Well Construction Permit 82738located in Flagler County

Dear Sirs/Madam:

Please find enclosed the permit for the above referenced project. Permit issuance does not relieve you from the responsibility of obtaining permits from any federal, state, and/or local agencies asserting concurrent jurisdiction for this work.

In the event you sell your property, the permit will be transferred to the new owner if we are notified by you within thirty (30) days of the recording of the sale. Please assist us in this matter so as to maintain a valid permit for the new property owner.

The permit enclosed is a legal document. Please read the permit carefully since you are responsible for compliance with any conditions which is a part of this permit. Compliance is a legal requirement and your assistance in this matter will be greatly appreciated.

If you have any questions concerning your permit, please do not hesitate to contact this office at (904) 329-4401.

Thank you for your interest in our water resources.

Sincerely,

Janet A. Stein

Janet A Stein
Sr.Permit Data Technician
Division of Permit Data Services

Cc: District Permit File
Contractor
Jr., Harris B George

GOVERNING BOARD

Duane Ottenstroer, CHAIRMAN JACKSONVILLE
Ometrias D. Long, VICE CHAIRMAN APOPKA
R. Clay Albright, SECRETARY EAST LAKE WEIR
David G. Graham, TREASURER JACKSONVILLE
W. Michael Branch FERNANDINA BEACH
Jeff K. Jennings MAITLAND
William Kerr MELBOURNE BEACH
Ann T. Moore BUNNELL
Catherine A. Walker ALTAMONTE SPRINGS

STATE OF FLORIDA PERMIT APPLICATION TO CONSTRUCT, REPAIR, MODIFY, OR ABANDON A WELL

☐ Southwest
☐ Northwest
☒ St. Johns River
☐ South Florida
☐ Suwannee River

CHECK BOX FOR APPROPRIATE DISTRICT. ADDRESS ON BACK OF PERMIT FORM.

THIS FORM ***MUST*** BE FILLED OUT COMPLETELY.

The water well contractor is responsible for completing this form and forwarding the permit to the appropriate delegated county where applicable.

Permit No. 82738
Florida Unique I.D. _____
Permit Stipulations Required (See attached)
62-524 well ☐
CUP/WUP Application No. _____

ABOVE THIS LINE FOR OFFICIAL USE ONLY

1. Plantation Bay Utility Co 100 Plantation Bay Dr. Ormond Beach 32174
Owner, Legal Name of Entity if Corporation — Address — City — Zip — Telephone Number
34 13S 31E
2. _____
Well Location — Address, Road Name or Number, City
3. THOMPSON well And Pump INC 7157
Well Drilling Contractor — License No. — Telephone No.
1995 LARCHMONT DR.
Address
DELAND FL 32724
City — State — Zip
4. ____ (smallest) 1/4 of ____ (biggest) 1/4 of Section 4
(Indicate Well on Chart)
5. Township 13S Range 31E
6. Flagler | Plantation Bay | | | |
County — Subdivision Name — Lot — Block — Unit

NW NE SW SE

7. Number of proposed wells 1 Check the use of well: (See back of permit for additional choices) _____ Domestic Monitor (type) _____
_____ Irrigation (type) (See Back) Public Water Supply (type) ✓ (See Back) List Other _____
Distance from septic system _____ ft. Description of facility well Field Estimated start of construction date 3-25-02

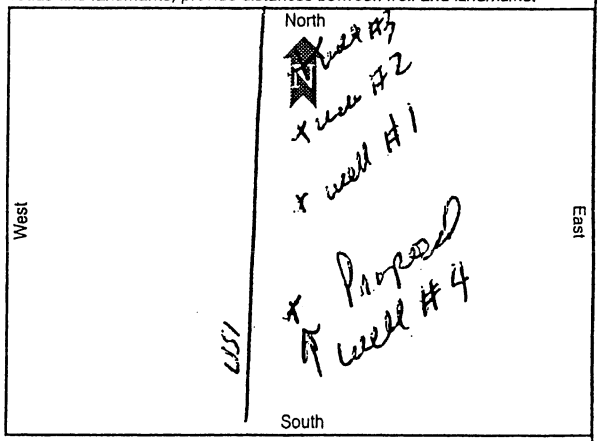
8. Application for: ✓ New Construction _____ Repair/Modify _____ Abandonment _____ (Reason for Abandonment) File Status

RECEIVED
MAR 0 8 2002
PDS
ALTAMONTE SVC. CTR.

9. Estimated: Well Depth 150' Casing Depth 100' Screen Interval from ____ to ____
Casing Material: Blk-Steel / Gal / PVC Casing Diameter 8" Seal Material _____

10. If applicable: Proposed Grouting Interval From 0 to 100 Seal Material Portland
From ____ to ____ Seal Material _____
From ____ to ____ Seal Material _____

Draw a map of well location and indicate well site with an "X". Identify known roads and landmarks; provide distances between well and landmarks.



11. Telescope Casing ____ or Liner ____ (check one) Diameter ____
Blk-Steel / Galvanized / PVC Other (specify: SURFACE 14" 0'-63'

12. Method of Construction: ✓ Rotary _____ Cable Tool _____ Combination
_____ Auger _____ Other (specify:) _____

13. Indicate total No. of wells on site 3. List number of unused wells on site 0.

14. Is this well or any other well or water withdrawal on the owner's contiguous property covered under a Consumptive/Water Use Permit (CUP/WUP) or CUP/WUP Application? ___No ✓Yes
(If yes, complete the following) CUP/WUP No. 19600
District well I.D. No. _____
Latitude _____ Longitude _____
Data obtained from GPS ____ or map ____ or survey ____ (*map datum NAD 27*___ *NAD 83*___)

15. I hereby certify that I will comply with the applicable rules of Title 40, Florida Administrative Code, and that a water use permit or artificial recharge permit, if needed, has been or will be obtained prior to commencement of well construction. I further certify that all information provided on this application is accurate and that I will obtain necessary approval from other federal, state, or local governments, if applicable. I agree to provide a well completion report to the District within 30 days after drilling or the permit expiration, whichever occurs first.

Signature of Contractor — License No.

I certify that I am the owner of the property, that the information provided is accurate, and that I am aware of my responsibilities under Chapter 373, Florida Statutes, to maintain or properly abandon this well; or, I certify that I am the agent for the owner, that the information provided is accurate, and that I have informed the owner of his responsibilities as stated above. Owner consents to personnel of the WMD or a representative access to the well site.

Owner's or Agent's Signature — Date

DO NOT WRITE BELOW THIS LINE — FOR OFFICIAL USE ONLY

Approval Granted By: Larry Lee Issue Date: 3-14-02 Hydrologist Approval _____ Initials
construction report
Owner Number: _____ Fee Received: $ 120.00 Receipt No.: 023149 Check No.: 2930

THIS PERMIT NOT VALID UNTIL PROPERLY SIGNED BY AN AUTHORIZED OFFICER OR REPRESENTATIVE OF THE WMD. IT SHALL BE AVAILABLE AT THE WELL SITE DURING ALL DRILLING OPERATIONS. ***This permit is valid for 90 days from date of issue.***

FORM 41.10 – 410 (1) REV. 4/95

WHITE: ORIGINAL FILE
YELLOW: DRILLING CONTRACTOR
PINK: OWNER

"EXHIBIT A"
CONDITIONS FOR ISSUANCE OF PERMIT NUMBER 82738
PLANTATION BAY UTILITY CO
DATED MARCH 14, 2002

1. The water well contractor must notify a District field representative 24 hours prior to initiating construction or grouting operations.

2. A permanent identification tag must be placed on the well head, concrete marker, terminal box, or a permanently attached fixture as required in sub-section 40C-3.461 (3).

3. A copy of this permit must be on site during all phases of well construction.

b. Every Public Supply well must be equipped with a sampling tap located a minimum distance of twelve inches above the ground surface as required in paragraph 17-555.315 (2) (f) and (3) (a).

c. Every Public Supply well must be pumped clean with the permanent pump and disinfected in accordance with paragraph 17-555.315 (3) (b).

5. Pursuant to Chapter 17-555.520 (1), F.A.C.. The well owner must obtain a public supply water systems permit from the Florida Department of Environmental Protection prior to initiating construction of the permitted well water system.

Department of Environmental Protection

Jeb Bush
Governor

Northeast District
7825 Baymeadows Way, Suite B200
Jacksonville, Florida 32256-7590

David B. Struhs
Secretary

PERMITTEE:

Mr. Douglas R. Ross Jr., Utility Manager
Plantation Bay Utility Company
2359 Beville Road
Daytona Beach, Florida 32119

I.D. Number: 2184251
Permit/Cert Number: 0080285-009-DS
Date of Issue: July 9, 2002
Expiration Date: July 8, 2007
County: Flagler
Sec/Town/Rge: 5 & 8/13S/31E
Lat/Long: N/A
Project: Plantation Bay Utility Company – Well #4
Plant: Plantation Bay WTP

This permit is issued under the provisions of Chapter 403, Florida Statutes (F.S.), and Florida Administrative Code (F.A.C.) Chapter 62-555 (formerly 17-22). The above named Permittee is hereby authorized to perform the work or operate the facility shown on the application and approved drawing(s), plans, and other documents attached hereto or on file with the Department and made a part hereof and specifically described as follows:

Description: Raw water line connection to well #4.

Location: Plantation Bay is located just southeast of US Route 1 and Old Dixie Highway intersection, in Flagler County, Florida.

"More Protection, Less Process"

Printed on recycled paper.

PERMITTEE:

Mr. Douglas R. Ross Jr.
Plantation Bay Utility Company

Permit/Cert Number: 0080285-009-DS
Date of Issue: July 9, 2002
Expiration Date: July 8, 2007
Project: Plantation Bay Utility Company - Well #4

GENERAL CONDITIONS:

1. The terms, conditions, requirements, limitations and restrictions set forth in this permit, are "permit conditions" and are binding and enforceable pursuant to Sections 403.141, 403.727, or 403.859 through 403.861, F.S. Permittee is placed on notice that the Department will review this permit periodically and may initiate enforcement action for any violation of these conditions.

2. This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviation from the approved drawings, exhibits, specifications, or conditions of this permit may constitute grounds for revocation and enforcement action by the Department.

3. As provided in subsections 403.087(6) and 403.722(5), F.S., the issuance of this permit does not convey any vested rights or any exclusive privileges. Neither does it authorize any injury to public or private property or any invasion of personal rights, nor any infringement of federal, state, or local laws or regulations. This permit is not a waiver of or approval of any other Department permit that may be required for other aspects of the total project which are not addressed in this permit.

4. This permit conveys no title to land or water, does not constitute State recognition or acknowledgment of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the State. Only the Trustees of the Internal Improvement Trust Fund may express State opinion as to title.

5. This permit does not relieve Permittee from liability for harm or injury to human health or welfare, animal, or plant life, or property caused by the construction or operation of this permitted source, or from penalties therefore; nor does it allow Permittee to cause pollution in contravention of Florida Statutes and Department rules, unless specifically authorized by an order from the Department.

6. Permittee shall properly operate and maintain the facility and systems of treatment and control (and related appurtenances) that are installed and used by Permittee to achieve compliance with the conditions of this permit, and required by Department rules. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to achieve compliance with the conditions of the permit and when required by Department rules.

GENERAL CONDITIONS:

7. Permittee, by accepting this permit, specifically agrees to allow authorized Department personnel, upon presentation of credentials or other documents as may be required by law and at reasonable times, access to the premises where the permitted activity is located or conducted to:

   a. Have access to and copy any records that must be kept under conditions of the permit;

   b. Inspect the facility, equipment, practices, or operations regulated or required under this permit; and

   c. Sample or monitor any substances or parameters at any location reasonably necessary to assure compliance with this permit or Department rules. Reasonable time may depend on the nature of the concern being investigated.

8. If, for any reason, Permittee does not comply with or will be unable to comply with any condition or limitation specified in this permit, Permittee shall immediately provide the Department with the following information:

   a. A description of and cause of noncompliance; and

   b. The period of noncompliance, including dates and times; or, if not corrected, the anticipated time the noncompliance is expected to continue, and steps being taken to reduce, eliminate, and prevent recurrence of the noncompliance. Permittee shall be responsible for any and all damages which may result and may be subject to enforcement action by the Department for penalties or for revocation of this permit.

9. In accepting this permit, Permittee understands and agrees that all records, notes, monitoring data, and other information relating to the construction or operation of this permitted source which are submitted to the Department may be used by the Department as evidence in any enforcement case involving the permitted source arising under Florida Statutes or Department rules, except where such use is prescribed by Section 403.111 and 403.73, F.S. Such evidence shall only be used to the extent it is consistent with the Florida Rules of Civil Procedure and appropriate evidentiary rules.

GENERAL CONDITIONS:

10. Permittee agrees to comply with changes in Department rules and Florida Statutes after a reasonable time for compliance; provided, however, Permittee does not waive any other rights granted by Florida Statutes or Department rules. A reasonable time for compliance with a new or amended surface water quality standard, other than those standards addressed in Rule 62-302.500, F.A.C., shall include a reasonable time to obtain or be denied a mixing zone for the new or amended standard.

11. This permit is transferable only upon Department approval in accordance with Rule 62-4.120 and 62-730.300, F.A.C., as applicable. Permittee shall be liable for any noncompliance of the permitted activity until the transfer is approved by the Department.

12. This permit or a copy thereof shall be kept at the work site of the permitted activity.

13. This permit also constitutes:

    ( ) Determination of Best Available Control Technology (BACT)

    ( ) Determination of Prevention of Significant Deterioration (PSD)

    ( ) Certification of compliance with state Water Quality Standards (Section 401, PL 92-500)

    ( ) Compliance with New Source Performance Standards

14. Permittee shall comply with the following:

    a. Upon request, Permittee shall furnish all records and plans required under Department rules. During enforcement actions, the retention period for all records will be extended automatically unless otherwise stipulated by the Department.

    b. Permittee shall hold at the facility or other location designated by this permit, records of all monitoring information (including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation) required by the permit, copies of all reports required by this permit, and records of all data used to complete the application for this permit. These materials shall be retained at least three years from the date of the sample, measurement, report, or application unless otherwise specified by Department rule.

GENERAL CONDITIONS:

c. Records of monitoring information shall include:

- the date, exact place, and time of sampling or measurements;
- the person responsible for performing the sampling or measurements;
- the dates analyses were performed;
- the person responsible for performing the analyses;
- the analytical techniques or methods used;
- the results of such analyses.

15. When requested by the Department, Permittee shall within a reasonable time furnish any information required by law which is needed to determine compliance with the permit. If Permittee becomes aware the relevant facts were not submitted or were incorrect in the permit application or in any report to the Department, such facts or information shall be corrected promptly.

PERMITTEE:

Mr. Douglas R. Ross Jr.
Plantation Bay Utility Company

Permit/Cert Number: 0080285-009-DS
Date of Issue: July 9, 2002
Expiration Date: July 8, 2007
Project: Plantation Bay Utility Company - Well #4

SPECIFIC CONDITIONS:

1. This approval for construction is given with the understanding that, upon the installation of such works, the operation shall be placed under the care of a competent person, whose qualifications are approved by the Department. Operation of the facility shall be carried out according to best accepted practice and in accordance with the requirements of the rules and regulations of the Department. Permittee shall ensure, not only the provision of continuing essential funds for proper operation and maintenance of this project, but also the funds necessary to comply with all regulatory, monitoring, and statutory requirements.

2. Water supply facilities, including mains, shall be installed in accordance with the latest applicable AWWA Standards and Department rules and regulations. The system shall be pressure and leak tested in accordance with AWWA Standard C600 and disinfected in accordance with AWWA Standard C651, as well as, in accordance with Rule 62-555.340, F.A.C.

3. Permittee shall maintain a minimum vertical clearance of 18 inches and a minimum horizontal separation of 10 feet between water mains and sanitary sewers, storm sewers, etc. unless approved otherwise by the Department, as provided in Rule 62-555.314, F.A.C., and Section 8.6 of *Recommended Standards for Water Works*, a manual adopted by reference in Rule 62-555.330(3), F.A.C. Where adjustments under or over sewer or storm mains are required, D.I.P. shall be used for the water main.

4. Prior to placing this project into service, Permittee shall submit, at a minimum, all of the following to the Department for evaluation and approval for operation, as provided in Rules 62-555.340 and 62-555.345, F.A.C.:

   a. the engineer's *Certification of Construction Completion and Request for a Letter of Clearance to Place a Public Drinking Water Facility into Service* {DEP Form 62-555.900(9)};

   b. certified record drawings, if there are any changes noted for the permitted project.

   c. two consecutive days of satisfactory bacteriological analytical results.

   In order to facilitate the issuance of a letter of clearance, the Department requests that all of the above information be submitted as one package.

PERMITTEE:

Mr. Douglas R. Ross Jr.
Plantation Bay Utility Company

Permit/Cert Number: 0080285-009-DS
Date of Issue: July 9, 2002
Expiration Date: July 8, 2007
Project: Plantation Bay Utility Company - Well #4

SPECIFIC CONDITIONS:

5. All PVC piping shall bear the National Sanitation Foundation (NSF) International seal of approval for potable water pipe.

6. All products, including paints, which shall come into contact with potable water, either directly or indirectly, shall conform with American National Standards Institute (ANSI), National Sanitation Foundation (NSF) International, and American Water Works Association (AWWA) Standards, as provided in Rule 62-555.320(4), F.A.C.

7. Permittee shall ensure that there shall be no cross-connection with any non-potable water source in accordance Rule 62-555.360, F.A.C.

8. Permittee shall install backflow prevention devices in accordance with Rule 62-555.360, F.A.C.; *Recommended Practice for Backflow Prevention and Cross-Connection Control (M-14),* a manual adopted by reference in Rule 62-555.330(6), F.A.C.; and *Cross Connections and Backflow Prevention,* a manual adopted by reference in Rule 62-555.330(7), F.A.C.

9. Permittee shall follow the guidelines of Chapters 62-550, 62-555, and 62-560, F.A.C., regarding public drinking water system standards, monitoring, reporting, permitting, construction, and operation.

10. The water treatment facility to which this distribution system will be connected shall have the capacity and water quality as required by the standards set forth in Chapters 62-550, 62-555, and 62-560, F.A.C. for public water systems.

11. This project shall be completed prior to the expiration date of this permit. Otherwise, Permittee shall submit a written request to the Department at least thirty days prior to the expiration date requesting an extension of the permit or Permittee must reapply for a new permit.

12. Chapters 62-555.500-521, F.A.C. requires all new public supply wells permitted to complete initial chemical monitoring. The following chemical analyses are required for well clearance of a Community system: Primary Inorganics, Turbidity, Secondary Standards, Radionuclides, Volatile Organic Contaminants, Pesticides and PCBs, Unregulated Contaminants - Groups I, II, and III. Please contract a potable water certified laboratory for the above-named chemical analyses, and submit the results to the Department.

14. Permittee shall maintain a maximum separation of reclaimed water lines and potable water lines. A minimum horizontal separation of 5 feet, center-to-center, or 3 feet, outside-to-outside, shall be maintained between reclaimed water mains and potable water mains unless otherwise approved by the Department, as provided in Rule 62-610.469, F.A.C.

15. The Department reserves the right to require installation of additional best available treatment if the existing treatment system does not reduce the Iron level below the 0.3 mg/L maximum contaminant level for drinking water in accordance with Rule 62-550.320, F.A.C.

Executed in Jacksonville, Florida.

Issued this 9th day of July, 2002

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION

Jerry M. Owen, P. E.
Water Facilities Administrator

cc BW
JMO:EDC:BEAW:DAL:dl

Permitting File

Copies furnished to:
Jerry K. Finley, P.E., Finley Engineering Group

FILING AND ACKNOWLEDGEMENT
FILED, on this date, pursuant to S120.52 Florida Statutes, with the designated Department Clerk, receipt of which is hereby acknowledged.
Catherine Conner 7-9-02
Clerk Date

CERTIFICATE OF SERVICE

This is to certify that this NOTICE OF PERMIT and all copies were mailed before the close of business on July 9, 2002 to the listed persons.

Department of Environmental Protection

Lawton Chiles
Governor

Northeast District
7825 Baymeadows Way, Suite B200
Jacksonville, Florida 32256-7590

Virginia B. Wetherell
Secretary

Mr. Jack Afflebach, Manager
Plantation Bay Utility Company
100 Plantation Bay Drive
Ormond Beach, Florida 32174

Date: November 4, 1998
County: Flagler
Project: Corrosion Control
Water Plant(s): Plantation Bay WTP

Re: General Permit Notice No. **0080285-002-WC**

Dear Mr. Afflebach:

On **October 23, 1998**, the Florida Department of Environmental Protection received your "Notification for Use of the General Permit for Corrosion Control for Small and Medium Systems" {DEP Form No. 62-555.900(18)}, under the provisions of Florida Administrative Code (F.A.C.) Rule 62-4.530 and Chapter 62-550.800.

After reviewing the notice, it appears that your project will have minimal adverse environmental effect and apparently can be constructed pursuant to a general permit as described in Chapter 62-550.800, F.A.C. Any activities performed under this general permit are subject to the general conditions required in Rules 62-4.540 (attached), 62-555.410, 62-550.800, F.A.C., and are also subject to the following conditions:

1. The Permittee shall provide to this office, a semi-annual report beginning January 1, 1999, indicating the effectiveness of the corrosion control treatment. This report shall be supported with Lead and Copper analysis results from the samples collected at the taps, water quality parameter data and information on the dosage rate and concentration of the chemicals used for corrosion control. Please refer to Rule 62-550.800, F.A.C., for proper sampling.

2. The Permittee shall evaluate the installation of additional treatment if the corrosion control treatment selected under this General Permit is not optimal or effective. Any additional treatment must be approved by the Department prior to installation.

3. The Permittee shall ensure that all chemicals used for corrosion control are NSF approved.

4. The Permittee shall comply with all applicable conditions of Chapters 62-550.800 and 62-555, F.A.C., for Public Water Systems.

Assuming you have properly qualified for this general permit, the permit expires on **November 3, 2003**. If you wish to continue this general permit beyond the expiration date, you must notify the Department at least 30 days before its expiration. Your construction activity must conform to the description contained in your notice. Any substantial deviation may subject the Permittee to enforcement action and possible penalties.

If you have any questions concerning the use of the general permit, please contact this office at the above letterhead address or at telephone number (904) 448-4330.

Sincerely,

for Jerry M. Owen, P. E.
Water Facilities Administrator

JMO:BRR:SMT:FD:fd

Enclosure

cc: Flagler County Department of Health
Mr. Jerry Finley, P. E.
Lead and Copper File

Department of Environmental Protection

Jeb Bush
Governor

Northeast District
7825 Baymeadows Way, Suite B200
Jacksonville, Florida 32256-7590

David B. Struhs
Secretary

STATE OF FLORIDA
DOMESTIC WASTEWATER FACILITY PERMIT

PERMITTEE:

Plantation Bay Utility Company

PERMIT NUMBER: FLA011597 (Minor)
PA FILE NUMBER: FLA011597-001-DWIR
ISSUANCE DATE: May 22, 2003
EXPIRATION DATE: May 21, 2008

RESPONSIBLE AUTHORITY:

Mr. Morteza Hosseini-Kargar
President
2359 Beville Road
Daytona Beach, FL 32119
(386) 788-0820

FACILITY:

Plantation Bay WWTF
Old Dixie Highway, West of I-95
Ormond Beach, FL 32174
Flagler County
Latitude: 29° 24' 05" N Longitude: 81° 10' 23" W

This permit is issued under the provisions of Chapter 403, Florida Statutes, and applicable rules of the Florida Administrative Code. The above named permittee is hereby authorized to operate the facilities shown on the application and other documents attached hereto or on file with the Department and made a part hereof and specifically described as follows:

TREATMENT FACILITIES:

To operate an existing 0.475 mgd annual average daily flow (AADF) extended aeration wastewater treatment facility with the following process units: influent bar screen, three aeration tanks with a total capacity of 453,900 gallons, one 112,500 gallon clarifier, one 56,100 gallon aerobic digester, one 240 square foot gravity sand filter consisting of three cells and a 16,100 gallon mudwell, and one 52,600 gallon chlorine contact chamber. Residuals are transported to a Residuals Management Facility for land application.

REUSE:

Land Application: An existing 0.475 MGD annual average daily flow (AADF) permitted capacity slow-rate Part III public access spray irrigation system (R-001) consisting of a 1,700,00 gallon holding pond and providing irrigation to the 75 acre Plantation Bay Golf Course.

IN ACCORDANCE WITH: The limitations, monitoring requirements and other conditions set forth in Pages 1 through 20 of this permit.

Received Time Jul. 13. 2:09PM

07/13/2008 13:00 FAX 1 800 431 0100 PLANTATION BAY SALES 003

I. RECLAIMED WATER AND EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS

A. Reuse and Land Application Systems

1. During the period beginning on the issuance date and lasting through the expiration date of this permit, the permittee is authorized to direct reclaimed water to Reuse System R-001. Such reclaimed water shall be limited and monitored by the permittee as specified below:

			Reclaimed Water Limitations				Monitoring Requirements			
Parameter	Units	Max/Min	Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequency	Sample Type	Monitoring Location Site Number	Notes
Flow	MGD	Maximum	0.475	Report	-	-	Daily	Flow meters	EFA-1	See Cond.I.A.3
BOD, Carbonaceous 5 day, 20C	MG/L	Maximum	20.0	30.0	45.0	60.0	Every Two Weeks	8-hour flow proportioned composite	EFA-1	
Solids, Total Suspended	MG/L	Maximum	-	-	-	5.0	4 Days/Week	Grab	EFB-1	
pH	SU	Range	-	-	-	6.0 to 8.5	Daily	Grab	EFA-1	
Coliform, Fecal	#/100 ML	Maximum	See Permit Condition I.A.4.				4 Days/Week	Grab	EFA-1	
Coliform, Fecal, % less than detection	PERCENT	Maximum	See Permit Condition I.A.4.				4 Days/Week	Grab	EFA-1	
Total Residual Chlorine (For Disinfection)	MG/L	Minimum	-	-	-	1.0	Daily	Grab	EFA-1	See Cond.I.A.5

FACILITY: Plantation Bay WWTF
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2359 Beville Road
Daytona Beach, FL 32119

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2. Reclaimed water samples shall be taken at the monitoring site locations listed in Permit Condition I. A. 1. and as described below:

Monitoring Location Site Number	Description of Monitoring Location
EFA-1	After high level disinfection.
EFB-1	After filtration, prior to high level disinfection.

3. Flow meters shall be utilized to measure flow and calibrated at least annually. *[62-601.200(17) and .500(6)]*

4. Over a 30-day period, at least 75 percent of the fecal coliform values shall be below the detection limits. No sample shall exceed 25 fecal coliforms per 100 mL. No sample shall exceed 5.0 mg/L of total suspended solids (TSS) at a point before the application of the disinfectant. Note: To report the "% less than detection," count the number of fecal coliform observations that were less than detection, divide by the total number of fecal coliform observations in the month, and multiply by 100% (round to the nearest integer). *[62-600.440(5)(f)]*

5. The minimum total chlorine residual shall be limited as described in the approved operating protocol, such that the permit limitation for fecal coliform bacteria will be achieved. In no case shall the total chlorine residual be less than 1.0 mg/L. *[62-600.440(5)(b); 62-610.460(2); and 62-610.463(2)]*

Received Time Jul. 13. 2:09PM

07/13/2005 13:08 FAX 1 386 437 0100 PLANTATION BAY SALES 005

B. Other Limitations and Monitoring and Reporting Requirements

1. During the period beginning on the issuance date and lasting through the expiration date of this permit, the treatment facility shall be limited and monitored by the permittee as specified below:

			Limitations				Monitoring Requirements			
Parameter	**Units**	**Max/Min**	**Annual Average**	**Monthly Average**	**Weekly Average**	**Single Sample**	**Monitoring Frequency**	**Sample Type**	**Monitoring Location Site Number**	**Notes**
BOD, Carbonaceous 5 day, 20C	MG/L	Maximum	-	Report	-	-	Every Two Weeks	8-hour flow proportioned composite	INF-1	See Cond.I.B.3
Solids, Total Suspended	MG/L	Maximum	-	Report	-	-	Every Two Weeks	8-hour flow proportioned composite	INF-1	See Cond.I.B.3
Percent Capacity, (TMADF/Permitted Capacity) x 100	PERCENT	Maximum	-	Report (Mo.Total)	-	-	Monthly	Calculated	CAL-1	

FACILITY: Plantation Bay WWTF
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2. Samples shall be taken at the monitoring site locations listed in Permit Condition I. B. 1 and as described below:

Monitoring Location Site Number	Description of Monitoring Location
INF-1	Prior to biological treatment.
CAL-1	Calculated based on reported flow value.

3. Influent samples shall be collected so that they do not contain digester supernatant or return activated sludge, or any other plant process recycled waters. *[62-601.500(4)]*

4. Parameters which must be monitored as a result of a surface water discharge shall be analyzed using a sufficiently sensitive method in accordance with 40 CFR Part 136. Parameters which must be monitored as a result of a ground water discharge (i.e., underground injection or land application system) shall be analyzed in accordance with Chapter 62-601, F.A.C. *[62-620.610(18)]*

5. The permittee shall provide safe access points for obtaining representative influent, reclaimed water, and effluent samples which are required by this permit. *[62-601.500(5)]*

6. Monitoring requirements under this permit are effective on the first day of the second month following permit issuance. Until such time, the permittee shall continue to monitor and report in accordance with previously effective permit requirements, if any. During the period of operation authorized by this permit, the permittee shall complete and submit to the Department's Northeast District Office Discharge Monitoring Reports (DMRs) in accordance with the frequencies specified by the REPORT type (i.e., monthly, toxicity, quarterly, semiannual, annual, etc.) indicated on the DMR forms attached to this permit. Monitoring results for each monitoring period shall be submitted in accordance with the associated DMR due dates below.

REPORT Type	Monitoring Period	Due Date
Monthly or Toxicity	first day of month – last day of month	28th day of following month
Quarterly	January 1 - March 31 April 1 – June 30 July 1 – September 30 October 1 – December 31	April 28 July 28 October 28 January 28
Semiannual	January 1 – June 30 July 1 – December 31	July 28 January 28
Annual	January 1 – December 31	January 28

DMRs shall be submitted for each required monitoring period including months of no discharge. The permittee shall make copies of the attached DMR form(s) and shall submit the completed DMR form(s) to the Department's Northeast District Office at the address specified in Permit Condition I.B. 12 by the twenty-eighth (28th) of the month following the month of operation.

[62-620.610(18)][62-601.300(1), (2), and (3)]

7. During the period of operation authorized by this permit, reclaimed water or effluent shall be monitored annually for the primary and secondary drinking water standards contained in Chapter 62-550, F.A.C., (except for turbidity, total coliforms, color, and corrosivity). Twenty-four hour composite samples shall be

used to analyze reclaimed water or effluent for the primary and secondary drinking water standards. These monitoring results shall be reported to the Department annually on the Reclaimed Water or Effluent Analysis Report, Form 62-620.910(15), or in another format if requested by the permittee and if approved by the Department as being compatible with data entry into the Department's computer system. During years when a permit is not renewed, a certification stating that no new non-domestic wastewater dischargers have been added to the collection system since the last reclaimed water or effluent analysis was conducted may be submitted in lieu of the report. The annual reclaimed water or effluent analysis report or the certification shall be completed and submitted in a timely manner so as to be received by the Department by July 15 of each year. *[62-601.300(4)][62-601.500(3)]*

8. The permittee shall submit an Annual Reuse Report using DEP Form 62-610.300(4)(a)2. on or before January 1 of each year. *[62-610.870(3)]*

9. The permittee shall maintain an inventory of storage systems. The inventory shall be submitted to the Department at least 30 days before reclaimed water will be introduced into any new storage system. The inventory of storage systems shall be attached to the annual submittal of the Annual Reuse Report. *[62-610.464(5)]*

10. Unless specified otherwise in this permit, all reports and other information required by this permit, including 24-hour notifications, shall be submitted to or reported to, as appropriate, the Department's Northeast District Office at the address specified below:

    Northeast District Office
    7825 Baymeadows Way, Suite B-200
    Jacksonville, Florida 32256-7590

    Phone Number - 904-807-3300
    FAX Number - 904-448-4366
    All FAX copies shall be followed by original copies. All reports and other information shall be signed in accordance with the requirements of Rule 62-620.305, F.A.C. *[62-620.305]*

II. RESIDUALS MANAGEMENT REQUIREMENTS

1. The method of residuals use or disposal by this facility is transport to Shelley's Environmental Systems or disposal in a Class I or II solid waste landfill.

2. The permittee shall be responsible for proper treatment, management, use, and land application or disposal of its residuals. *[62-640.300(5)]*

3. The permittee shall not be held responsible for treatment, management, use, or land application violations that occur after its residuals have been accepted by a permitted residuals management facility with which the source facility has an agreement in accordance with Rule 62-640.880(1)(c), F.A.C., for further treatment, management, use or land application. *[62-640.300(5)]*

4. Disposal of residuals, septage, and other solids in a solid waste landfill, or disposal by placement on land for purposes other than soil conditioning or fertilization, such as at a monofill, surface impoundment, waste pile, or dedicated site, shall be in accordance with Chapter 62-701, F.A.C. *[62-640.100(6)(k)3 & 4]*

5. If the permittee intends to accept residuals from other facilities, a permit revision is required pursuant to Rule 62-640.880(2)(d), F.A.C. *[62-640.880(2)(d)]*

6. The permittee shall keep hauling records to track the transport of residuals between facilities. The hauling records shall contain the following information:

Source Facility	Residuals Management Facility or Treatment Facility
1. Date and Time Shipped	1. Date and Time Received
2. Amount of Residuals Shipped	2. Amount of Residuals Received
3. Degree of Treatment (if applicable)	3. Name and ID Number of Source Facility
4. Name and ID Number of Residuals Management Facility or Treatment Facility	4. Signature of Hauler
5. Signature of Responsible Party at Source Facility	5. Signature of Responsible Party at Residuals Management Facility or Treatment Facility
6. Signature of Hauler and Name of Hauling Firm	

These records shall be kept for five years and shall be made available for inspection upon request by the Department. A copy of the hauling records information maintained by the source facility shall be provided upon delivery of the residuals to the residuals management facility or treatment facility. The permittee shall report to the Department within 24 hours of discovery any discrepancy in the quantity of residuals leaving the source facility and arriving at the residuals management facility or treatment facility. *[62-640.880(4)]*

7. Storage of residuals or other solids at the permitted facility shall require prior written notification to the Department. *[62-640.300(4)]*

III. GROUND WATER REQUIREMENTS

Construction Requirements

1. The permittee shall give at least 72-hours notice to the Department's Northeast District Office, prior to the installation of any monitoring wells detailed in this permit. *[62-4.070]*

2. Prior to construction of new ground water monitoring wells, a soil boring shall be made at each new monitoring well location in order to establish the well depth and screen interval. *[62-522.900(3)]*

3. Within 30 days after installation of a new monitoring well, the permittee shall submit to the Department's Northeast District Office detailed information on the well's location and construction on the attached DEP Form(s) 62-522.900(3), Monitor Well Completion Report. *[62-522.600]*

Operational Requirements

4. For the Part III Public Access system, all ground water quality criteria specified in Chapter 62-520, F.A.C., shall be met at the edge of the zone of discharge. For major users of reclaimed water (i.e., using 0.1 MGD or more), the zone of discharge shall extend horizontally 100 feet from the application site or to user's site property line, whichever is less, and vertically to the base of the surficial aquifer. For other users, the zone of discharge shall extend horizontally to the boundary of the general service area identified in the attached map and vertically to the base of the surficial aquifer. *[62-520.200(23)] [62-522.400 and 62-522.410]*

5. The ground water minimum criteria specified in Rule 62-520.400 F.A.C., shall be met within the zone of discharge. *[62-520.400 and 62-520.420(4)]*

FACILITY: Plantation Bay WWTF
PERMITTEE: Plantation Bay Utility Company
2359 Beville Road
Daytona Beach, FL 32119

PERMIT NUMBER: FLA011597
ISSUANCE DATE: May 22, 2003
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6. During the period of operation authorized by this permit, the permittee shall sample ground water in accordance with this permit and the approved ground water monitoring plan prepared in accordance with Rule 62-522.600, F.A.C. *[62-522.600][62-610.463,]*

7. The following monitoring wells shall be sampled in accordance with the monitoring frequencies specified in Permit Condition III.8. for Reuse System R-001. Quarterly sampling must be reasonably spaced to be representative of potentially changing conditions.

Monitoring Well ID	Alternate Well Name and/or Description of Monitoring Location	Depth (Feet)	Aquifer Monitored	New or Existing
MWB-1	At NE corner of potable water treatment plant	15	Surficial	existing
MWC-2	WWTP site @ SE corner of perc/holding pond	17	Surficial	existing
MWC-3R	WWTP site along southern margin of perc pond	17	Surficial	new

MWB = Background; MWI = Intermediate; MWC = Compliance

[62-522.600][62-610.463]

8. The following parameters shall be analyzed for each of the monitoring well(s) identified in Permit Condition(s) III. 7:

Parameter	Compliance Well Limit	Units	Sample Type	Monitoring Frequency
Water Level Relative to NGVD	Report	FEET	In-situ	Semi-annual
Solids, Total Dissolved (TDS)	500	MG/L	Grab	Semi-annual
Chloride (as Cl)	250	MG/L	Grab	Semi-annual
Coliform, Fecal	4	#/100ML	Grab	Semi-annual
pH	6.5 to 8.5	SU	In-situ	Semi-annual
Sulfate, Total	250	MG/L	Grab	Semi-annual
Nitrite plus Nitrate, Total (as N)	10	MG/L	Grab	Semi-annual

[62-522.600(11)(b)] [62-601.300(3), 62-601.700, and Figure 3 of 62-601][62-601.300(6)] [62-520.300(9)]

9. If the concentration for any constituent listed in Permit Condition III. 8. in the natural background quality of the ground water is greater than the stated maximum, or in the case of pH is also less than the minimum, the representative natural background quality shall be the prevailing standard. *[62-520.420(2)]*

10. In accordance with Part D of Form 62-620.910(10), water levels shall be recorded before evacuating wells for sample collection. Elevation references shall include the top of the well casing and land surface at each well site (NGVD allowable) at a precision of plus or minus 0.1 foot. *[62-610.463(3)(a),]*

11. Ground water monitoring wells shall be purged prior to sampling to obtain representative samples. *[62-601.700(5)]*

12. Analyses shall be conducted on unfiltered samples, unless filtered samples have been approved by the Department's Northeast District Office as being more representative of ground water conditions. *[62-520.300(9)]*

FACILITY: Plantation Bay WWTF
PERMITTEE: Plantation Bay Utility Company
2359 Beville Road
Daytona Beach, FL 32119

PERMIT NUMBER: FLA011597
ISSUANCE DATE: May 22, 2003
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13. Ground water monitoring parameters shall be analyzed in accordance with Chapter 62-601, F.A.C. *[62-620.610(18)]*

14. Ground water monitoring test results shall be submitted on Part D of Form 62-620.910(10). For reuse or land application projects, results shall be submitted for each month listed in the following schedule. The submitted results shall be for each year during the period of operation allowed by this permit in accordance with Permit Condition I.B.8. *[62-522.600(10) and (11)(b)] [62-601.300(3), 62.601.700, and Figure 3 of 62-601] [62-620.610(18)]*

SAMPLE PERIOD	REPORT DUE DATE
January - June	July 28
July - December	January 28

15. If any monitoring well becomes damaged or cannot be sampled for some reason, the permittee shall notify the Department's Northeast District Office immediately and a written report shall follow within seven days detailing the circumstances and remedial measures taken or proposed. Repair or replacement of monitoring wells shall be approved in advance by the Department's Northeast District Office. *[62-522.600][62-4.070(3)]*

16. The Permittee shall provide verbal notice to the Department's Northeast District Office as soon as practical after discovery of a sinkhole within an area for the management or application of wastewater, wastewater residuals (sludges), or reclaimed water. The Permittee shall immediately implement measures appropriate to control the entry of contaminants, and shall detail these measures to the Department's Northeast District Office in a written report within 7 days of the sinkhole discovery. *[62-4.070(3)]*

17. All piezometers and wells not part of the approved ground water monitoring plan are to be plugged and abandoned in accordance with Rule 62-532.500(4), F.A.C., unless there is intent for their future use. *[62-532.500(4)]*

18. All correspondence, reports, plans and summaries pertaining to ground water monitoring shall be directed to the Ground Water Section of the department's northeast district office. *[62-4.070(3), 10/22/00]*

IV. ADDITIONAL REUSE AND LAND APPLICATION REQUIREMENTS

Part III Public Access System(s) (R-001)

1. Cross-connections to the potable water system are prohibited. *[62-610.469(7)]*

2. A cross-connection control program shall be implemented and/or remain in effect within the areas where reclaimed water will be provided for use. *[62-610.469(7)]*

3. If a cross-connection between the potable and reclaimed water systems is discovered, the permittee shall:

   a. Immediately discontinue potable water and/or reclaimed water service to the affected area.

   b. If the potable water system is contaminated, clear the potable water lines.

   c. Eliminate the cross-connection.

   d. Test the affected area for other possible cross-connections.

FACILITY:	Plantation Bay WWTF	PERMIT NUMBER:	FLA011597
PERMITTEE:	Plantation Bay Utility Company 2359 Beville Road Daytona Beach, FL 32119	ISSUANCE DATE: EXPIRATION DATE:	May 22, 2003 May 21, 2008

e. Within 24 hours, notify the Northeast District Office's domestic wastewater and drinking water programs.

f. Within 5 days of discovery of a cross-connection, submit a written report to the Department detailing: a description of the cross-connection, how the cross-connection was discovered, the exact date and time of discovery, approximate time that the cross-connection existed, the location, the cause, steps taken to eliminate the cross-connection, whether reclaimed water was consumed, and reports of possible illness, whether the drinking water system was contaminated and the steps taken to clear the drinking water system, when the cross-connection was eliminated, plan of action for testing for other possible cross-connections in the area, and an evaluation of the cross-connection control and inspection program to ensure that future cross-connections do not occur. *[62-555.350(3) and 62-555.360][62-620.610(20)]*

4. Maximum obtainable separation of reclaimed water lines and potable water lines shall be provided and the minimum separation distances specified in Rule 62-610.469(7), F.A.C., shall be provided. Reuse facilities shall be color coded or marked. Underground piping which is not manufactured of metal or concrete shall be color coded using Pantone Purple 522C using light stable colorants. Underground metal and concrete pipe shall be color coded or marked using purple as the predominant color. *[62-610.469(7)]*

5. In constructing reclaimed water distribution piping, the permittee shall maintain a 75-foot setback distance from a reclaimed water transmission facility to public water supply wells. No setback distances are required to other potable water supply wells or to any nonpotable water supply wells. *[62-610.471(3)]*

6. A setback distance of 75 feet shall be maintained between the edge of the wetted area and potable water supply wells, unless the utility adopts and enforces an ordinance prohibiting potable water supply wells within the reuse service area. No setback distances are required to any nonpotable water supply well, to any surface water, to any developed areas, or to any private swimming pools, hot tubs, spas, saunas, picnic tables, barbecue pits, or barbecue grills. *[62-610.471(1), (2), (5), and (7)]*

7. Reclaimed water shall not be used to fill swimming pools, hot tubs, or wading pools. *[62-610.469(4)]*

8. Low trajectory nozzles, or other means to minimize aerosol formation shall be used within 100 feet from outdoor public eating, drinking, or bathing facilities. *[62-610.471(6)]*

9. A setback distance of 100 feet shall be maintained from indoor aesthetic features using reclaimed water to adjacent indoor public eating and drinking facilities. *[62-610.471(8)]*

10. The public shall be notified of the use of reclaimed water. This shall be accomplished by posting of advisory signs in areas where reuse is practiced, notes on scorecards, or other methods. *[62-610.468(2)]*

11. All new advisory signs and labels on vaults, service boxes, or compartments that house hose bibbs along with all labels on hose bibbs, valves, and outlets shall bear the words "do not drink" and "no beber" along with the equivalent standard international symbol. In addition to the words "do not drink" and "no beber," advisory signs posted at storage ponds and decorative water features shall also bear the words "do not swim" and "no nadar" along with the equivalent standard international symbols. Existing advisory signs and labels shall be retrofitted, modified, or replaced in order to comply with the revised wording requirements. For existing advisory signs and labels this retrofit, modification, or replacement shall occur within 365 days after the date of this permit. For labels on existing vaults, service boxes, or compartments housing hose bibbs this retrofit, modification, or replacement shall occur within 730 days after the date of this permit. *[62-610.468 & 62-610.469]*

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12. The permittee shall ensure that users of reclaimed water are informed about the origin, nature, and characteristics of reclaimed water; the manner in which reclaimed water can be safely used; and limitations on the use of reclaimed water. Notification is required at the time of initial connection to the reclaimed water distribution system and annually after the reuse system is placed into operation. A description of on-going public notification activities shall be included in the Annual Reuse Report. *[62-610.468(6)]*

13. Routine aquatic weed control and regular maintenance of storage pond embankments and access areas are required. *[62-610.414 & 62-610.464]*

14. Overflows from emergency discharge facilities on storage ponds shall be reported as an abnormal event to the Department's Northeast District Office within 24 hours of an occurrence. The provisions of Rule 62-610.800(9), F.A.C., shall be met. *[62-610.800(9)]*

V. OPERATION AND MAINTENANCE REQUIREMENTS

1. During the period of operation authorized by this permit, the wastewater facilities shall be operated under the supervision of a(n) operator(s) certified in accordance with Chapter 62-602, F.A.C. In accordance with Chapter 62-699, F.A.C., this facility is a Category I, Class C facility and, at a minimum, operators with appropriate certification must be on the site as follows:

   A Class C or higher operator 6 hours/day for 5 days/week and one visit on each weekend day. The lead operator must be a C, or higher.

   [62-620.630(3)] [62-699.310] [62-610.462]

2. The lead operator shall be employed at the plant full time. "Full time" shall mean at least 4 days per week, working a minimum of 35 hours per week, including leave time. A certified operator shall be on-site and in charge of each required shift and for periods of required staffing time when the lead operator is not on-site. An operator meeting the lead operator classification level of the plant shall be available during all periods of plant operation. "Available" means able to be contacted as needed to initiate the appropriate action in a timely manner. *[62-699.311(10), (5) and (1)]*

3. An operator meeting the lead operator classification level of the plant shall be available during all periods of plant operation. "Available" means able to be contacted as needed to initiate the appropriate action in a timely manner. *[62-699.311(1)]*

4. The application to renew this permit shall include an updated capacity analysis report prepared in accordance with Rule 62-600.405, F.A.C. *[62-600.405(5)]*

5. The application to renew this permit shall include a detailed operation and maintenance performance report prepared in accordance with Rule 62-600.735, F.A.C. *[62-600.735(1)]*

6. The permittee shall maintain the following records and make them available for inspection on the site of the permitted facility:

   a. Records of all compliance monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation and a copy of the laboratory certification showing the certification number of the laboratory, for at least three years from the date the sample or measurement was taken;

   b. Copies of all reports required by the permit for at least three years from the date the report was prepared;

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c. Records of all data, including reports and documents, used to complete the application for the permit for at least three years from the date the application was filed;

d. Monitoring information, including a copy of the laboratory certification showing the laboratory certification number, related to the residuals use and disposal activities for the time period set forth in Chapter 62-640, F.A.C., for at least three years from the date of sampling or measurement;

e. A copy of the current permit;

f. A copy of the current operation and maintenance manual as required by Chapter 62-600,. F.A.C.;

g. A copy of the facility record drawings;

h. Copies of the licenses of the current certified operators; and

i. Copies of the logs and schedules showing plant operations and equipment maintenance for three years from the date of the logs or schedules. The logs shall, at a minimum, include identification of the plant; the signature and certification number of the operator(s) and the signature of the person(s) making any entries; date and time in and out; specific operation and maintenance activities; tests performed and samples taken; and major repairs made. The logs shall be maintained on-site in a location accessible to 24-hour inspection, protected from weather damage, and current to the last operation and maintenance performed.

[62-620.350]

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VI. SCHEDULES

1. The following improvement actions shall be completed according to the following schedule:

	Improvement Action	Completion Date
1	Repair V-notch weir.	August 15, 2003
2	Paint interior of tanks.	August 15, 2003

[62-600.735(1)]

2. The permittee shall conduct and implement according to the following schedule:

	Implementation Step	Completion Date
1	Begin consultation for compliance with F.A.C. Chapter 62-610.	March 15, 2005
2	Interview engineering consultants, select consultants	June 15, 2005
3	Contract with consultant to prepare compliance report.	September 15, 2005
4	Authorize Consultant to initiate design of improvements required.	June 15, 2006
5	Prepare Operating Protocol and Operating and Maintenance Manual.	June 15, 2006
6	Apply to the Department for permit modifications.	December 1, 2007
7	Start construction of FDEP approved improvements.	September 1, 2008
8	Complete construction and implement changes as per F.A.C. 62-610.	July 1, 2009

[62-620.320(1) and (2)] [62-4.070(3)]

VII. INDUSTRIAL PRETREATMENT PROGRAM REQUIREMENTS

This facility is not required to have a pretreatment program at this time. *[62-625.500]*

VIII. OTHER SPECIFIC CONDITIONS

1. If the permittee wishes to continue operation of this wastewater facility after the expiration date of this permit, the permittee shall submit an application for renewal, using Department Forms 62-620.910(1) and (2), no later than one-hundred and eighty days (180) prior to the expiration date of this permit. *[62-620.410(5)]*

2. Florida water quality criteria and standards shall not be violated as a result of any discharge or land application of reclaimed water or residuals from this facility. *[62-610.850(1)(a) and (2)(a)]*

3. In the event that the treatment facilities or equipment no longer function as intended, are no longer safe in terms of public health and safety, or odor, noise, aerosol drift, or lighting adversely affects neighboring

developed areas at the levels prohibited by Rule 62-600.400(2)(a), F.A.C., corrective action (which may include additional maintenance or modifications of the permitted facilities) shall be taken by the permittee. Other corrective action may be required to ensure compliance with rules of the Department. Additionally, the treatment, management, use or land application of residuals shall not cause a violation of the odor prohibition in Rule 62-296.320(2), F.A.C. *[62-600.410(8) and 62-640.400(6)]*

4. The deliberate introduction of stormwater in any amount into collection/transmission systems designed solely for the introduction (and conveyance) of domestic/industrial wastewater; or the deliberate introduction of stormwater into collection/transmission systems designed for the introduction or conveyance of combinations of storm and domestic/industrial wastewater in amounts which may reduce the efficiency of pollutant removal by the treatment plant is prohibited, except as provided by Rule 62-610.472, F.A.C. *[62-604.130(3)]*

5. Collection/transmission system overflows shall be reported to the Department in accordance with Permit Condition IX. 20. *[62-604.550] [62-620.610(20)]*

6. The operating authority of a collection/transmission system and the permittee of a treatment plant are prohibited from accepting connections of wastewater discharges which have not received necessary pretreatment or which contain materials or pollutants (other than normal domestic wastewater constituents):

   a. Which may cause fire or explosion hazards; or

   b. Which may cause excessive corrosion or other deterioration of wastewater facilities due to chemical action or pH levels; or

   c. Which are solid or viscous and obstruct flow or otherwise interfere with wastewater facility operations or treatment; or

   d. Which result in treatment plant discharges having temperatures above 40°C.

   [62-604.130(4)]

7. The treatment facility, storage ponds, rapid infiltration basins, and/or infiltration trenches shall be enclosed with a fence or otherwise provided with features to discourage the entry of animals and unauthorized persons. *[62-600.400(2)(b)]*

8. Screenings and grit removed from the wastewater facilities shall be collected in suitable containers and hauled to a Department approved Class I landfill or to a landfill approved by the Department for receipt/disposal of screenings and grit. *[62-701.300(1)(a)]*

9. The permittee shall provide adequate notice to the Department of the following:

   a. Any new introduction of pollutants into the facility from an industrial discharger which would be subject to Chapter 403, F.S., and the requirements of Chapter 62-620, F.A.C. if it were directly discharging those pollutants; and

   b. Any substantial change in the volume or character of pollutants being introduced into that facility by a source which was identified in the permit application and known to be discharging at the time the permit was issued.

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Adequate notice shall include information on the quality and quantity of effluent introduced into the facility and any anticipated impact of the change on the quantity or quality of effluent or reclaimed water to be discharged from the facility.

[62-620.625(2)]

IX. GENERAL CONDITIONS

1. The terms, conditions, requirements, limitations and restrictions set forth in this permit are binding and enforceable pursuant to Chapter 403, Florida Statutes. Any permit noncompliance constitutes a violation of Chapter 403, Florida Statutes, and is grounds for enforcement action, permit termination, permit revocation and reissuance, or permit revision. *[62-620.610(1)]*

2. This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviations from the approved drawings, exhibits, specifications or conditions of this permit constitutes grounds for revocation and enforcement action by the Department. *[62-620.610(2)]*

3. As provided in Subsection 403.087(6), F.S., the issuance of this permit does not convey any vested rights or any exclusive privileges. Neither does it authorize any injury to public or private property or any invasion of personal rights, nor authorize any infringement of federal, state, or local laws or regulations. This permit is not a waiver of or approval of any other Department permit or authorization that may be required for other aspects of the total project which are not addressed in this permit. *[62-620.610(3)]*

4. This permit conveys no title to land or water, does not constitute state recognition or acknowledgment of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the State. Only the Trustees of the Internal Improvement Trust Fund may express State opinion as to title. *[62-620.610(4)]*

5. This permit does not relieve the permittee from liability and penalties for harm or injury to human health or welfare, animal or plant life, or property caused by the construction or operation of this permitted source; nor does it allow the permittee to cause pollution in contravention of Florida Statutes and Department rules, unless specifically authorized by an order from the Department. The permittee shall take all reasonable steps to minimize or prevent any discharge, reuse of reclaimed water, or residuals use or disposal in violation of this permit which has a reasonable likelihood of adversely affecting human health or the environment. It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit. *[62-620.610(5)]*

6. If the permittee wishes to continue an activity regulated by this permit after its expiration date, the permittee shall apply for and obtain a new permit. *[62-620.610(6)]*

7. The permittee shall at all times properly operate and maintain the facility and systems of treatment and control, and related appurtenances, that are installed and used by the permittee to achieve compliance with the conditions of this permit. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to maintain or achieve compliance with the conditions of the permit. *[62-620.610(7)]*

8. This permit may be modified, revoked and reissued, or terminated for cause. The filing of a request by the permittee for a permit revision, revocation and reissuance, or termination, or a notification of planned changes or anticipated noncompliance does not stay any permit condition. *[62-620.610(8)]*

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9. The permittee, by accepting this permit, specifically agrees to allow authorized Department personnel, including an authorized representative of the Department and authorized EPA personnel, when applicable, upon presentation of credentials or other documents as may be required by law, and at reasonable times, depending upon the nature of the concern being investigated, to:

   a. Enter upon the permittee's premises where a regulated facility, system, or activity is located or conducted, or where records shall be kept under the conditions of this permit;

   b. Have access to and copy any records that shall be kept under the conditions of this permit;

   c. Inspect the facilities, equipment, practices, or operations regulated or required under this permit; and

   d. Sample or monitor any substances or parameters at any location necessary to assure compliance with this permit or Department rules.

   [62-620.610(9)]

10. In accepting this permit, the permittee understands and agrees that all records, notes, monitoring data, and other information relating to the construction or operation of this permitted source which are submitted to the Department may be used by the Department as evidence in any enforcement case involving the permitted source arising under the Florida Statutes or Department rules, except as such use is proscribed by Section 403.111, Florida Statutes, or Rule 62-620.302, Florida Administrative Code. Such evidence shall only be used to the extent that it is consistent with the Florida Rules of Civil Procedure and applicable evidentiary rules. *[62-620.610(10)]*

11. When requested by the Department, the permittee shall within a reasonable time provide any information required by law which is needed to determine whether there is cause for revising, revoking and reissuing, or terminating this permit, or to determine compliance with the permit. The permittee shall also provide to the Department upon request copies of records required by this permit to be kept. If the permittee becomes aware of relevant facts that were not submitted or were incorrect in the permit application or in any report to the Department, such facts or information shall be promptly submitted or corrections promptly reported to the Department. *[62-620.610(11)]*

12. Unless specifically stated otherwise in Department rules, the permittee, in accepting this permit, agrees to comply with changes in Department rules and Florida Statutes after a reasonable time for compliance; provided, however, the permittee does not waive any other rights granted by Florida Statutes or Department rules. A reasonable time for compliance with a new or amended surface water quality standard, other than those standards addressed in Rule 62-302.500, F.A.C., shall include a reasonable time to obtain or be denied a mixing zone for the new or amended standard. *[62-620.610(12)]*

13. The permittee, in accepting this permit, agrees to pay the applicable regulatory program and surveillance fee in accordance with Rule 62-4.052, F.A.C. *[62-620.610(13)]*

14. This permit is transferable only upon Department approval in accordance with Rule 62-620.340, F.A.C. The permittee shall be liable for any noncompliance of the permitted activity until the transfer is approved by the Department. *[62-620.610(14)]*

15. The permittee shall give the Department written notice at least 60 days before inactivation or abandonment of a wastewater facility and shall specify what steps will be taken to safeguard public health and safety during and following inactivation or abandonment. *[62-620.610(15)]*

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16. The permittee shall apply for a revision to the Department permit in accordance with Rules 62-620.300, 62-620.420 or 62-620.450, F.A.C., as applicable, at least 90 days before construction of any planned substantial modifications to the permitted facility is to commence or with Rule 62-620.300 for minor modifications to the permitted facility. A revised permit shall be obtained before construction begins except as provided in Rule 62-620.300, F.A.C. *[62-620.610(16)]*

17. The permittee shall give advance notice to the Department of any planned changes in the permitted facility or activity which may result in noncompliance with permit requirements. The permittee shall be responsible for any and all damages which may result from the changes and may be subject to enforcement action by the Department for penalties or revocation of this permit. The notice shall include the following information:

    a. A description of the anticipated noncompliance;

    b. The period of the anticipated noncompliance, including dates and times; and

    c. Steps being taken to prevent future occurrence of the noncompliance.

    [62-620.610(17)]

18. Sampling and monitoring data shall be collected and analyzed in accordance with Rule 62-4.246, Chapters 62-160 and 62-601, F.A.C., and 40 CFR 136, as appropriate.

    a. Monitoring results shall be reported at the intervals specified elsewhere in this permit and shall be reported on a Discharge Monitoring Report (DMR), DEP Form 62-620.910(10).

    b. If the permittee monitors any contaminant more frequently than required by the permit, using Department approved test procedures, the results of this monitoring shall be included in the calculation and reporting of the data submitted in the DMR.

    c. Calculations for all limitations which require averaging of measurements shall use an arithmetic mean unless otherwise specified in this permit.

    d. Any laboratory test required by this permit shall be performed by a laboratory that has been certified by the Department of Health (DOH) under Chapter 64E-1, F.A.C., where such certification is required by Rule 62-160.300, F.A.C. The laboratory must be certified for any specific method and analyte combination that is used to comply with this permit. For domestic wastewater facilities, the on-site test procedures specified in Rule 62-160.300(4), F.A.C., shall be performed by a laboratory certified test for those parameters or under the direction of an operator certified under Chapter 62-602, F.A.C.

    e. Field activities including on-site tests and sample collection, whether performed by a laboratory or a certified operator, must follow the applicable procedures described in DEP-SOP-001/01 (January 2002). Alternate field procedures and laboratory methods may be used where they have been approved according to the requirements of Rules 62-160.220, and 62-160.330, F.A.C.

    [62-620.610(18)]

19. Reports of compliance or noncompliance with, or any progress reports on, interim and final requirements contained in any compliance schedule detailed elsewhere in this permit shall be submitted no later than 14 days following each schedule date. *[62-620.610(19)]*

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20. The permittee shall report to the Department any noncompliance which may endanger health or the environment. Any information shall be provided orally within 24 hours from the time the permittee becomes aware of the circumstances. A written submission shall also be provided within five days of the time the permittee becomes aware of the circumstances. The written submission shall contain: a description of the noncompliance and its cause; the period of noncompliance including exact dates and time, and if the noncompliance has not been corrected, the anticipated time it is expected to continue; and steps taken or planned to reduce, eliminate, and prevent recurrence of the noncompliance.

a. The following shall be included as information which must be reported within 24 hours under this condition:

1. Any unanticipated bypass which causes any reclaimed water or effluent to exceed any permit limitation or results in an unpermitted discharge,

2. Any upset which causes any reclaimed water or the effluent to exceed any limitation in the permit,

3. Violation of a maximum daily discharge limitation for any of the pollutants specifically listed in the permit for such notice, and

4. Any unauthorized discharge to surface or ground waters.

b. Oral reports as required by this subsection shall be provided as follows:

1. For unauthorized releases or spills of treated or untreated wastewater reported pursuant to subparagraph a.4 that are in excess of 1,000 gallons per incident, or where information indicates that public health or the environment will be endangered, oral reports shall be provided to the Department by calling the STATE WARNING POINT TOLL FREE NUMBER (800) 320-0519, as soon as practical, but no later than 24 hours from the time the permittee becomes aware of the discharge. The permittee, to the extent known, shall provide the following information to the State Warning Point:

a) Name, address, and telephone number of person reporting;

b) Name, address, and telephone number of permittee or responsible person for the discharge;

c) Date and time of the discharge and status of discharge (ongoing or ceased);

d) Characteristics of the wastewater spilled or released (untreated or treated, industrial or domestic wastewater);

e) Estimated amount of the discharge;

f) Location or address of the discharge;

g) Source and cause of the discharge;

h) Whether the discharge was contained on-site, and cleanup actions taken to date;

i) Description of area affected by the discharge, including name of water body affected, if any; and

j) Other persons or agencies contacted.

2. Oral reports, not otherwise required to be provided pursuant to subparagraph b.1 above, shall be provided to the Department within 24 hours from the time the permittee becomes aware of the circumstances.

c. If the oral report has been received within 24 hours, the noncompliance has been corrected, and the noncompliance did not endanger health or the environment, the Department shall waive the written report.

[62-620.610(20)]

21. The permittee shall report all instances of noncompliance not reported under Permit Conditions IX. 18. and 19. of this permit at the time monitoring reports are submitted. This report shall contain the same information required by Permit Condition IX. 20 of this permit. *[62-620.610(21)]*

22. Bypass Provisions.

a. Bypass is prohibited, and the Department may take enforcement action against a permittee for bypass, unless the permittee affirmatively demonstrates that:

1. Bypass was unavoidable to prevent loss of life, personal injury, or severe property damage; and

2. There were no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime. This condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance; and

3. The permittee submitted notices as required under Permit Condition IX. 22. b. of this permit.

b. If the permittee knows in advance of the need for a bypass, it shall submit prior notice to the Department, if possible at least 10 days before the date of the bypass. The permittee shall submit notice of an unanticipated bypass within 24 hours of learning about the bypass as required in Permit Condition IX. 20. of this permit. A notice shall include a description of the bypass and its cause; the period of the bypass, including exact dates and times; if the bypass has not been corrected, the anticipated time it is expected to continue; and the steps taken or planned to reduce, eliminate, and prevent recurrence of the bypass.

c. The Department shall approve an anticipated bypass, after considering its adverse effect, if the permittee demonstrates that it will meet the three conditions listed in Permit Condition IX. 22. a. 1. through 3. of this permit.

d. A permittee may allow any bypass to occur which does not cause reclaimed water or effluent limitations to be exceeded if it is for essential maintenance to assure efficient operation. These bypasses are not subject to the provisions of Permit Condition IX. 22. a. through c. of this permit.

[62-620.610(22)]

23. Upset Provisions

a. A permittee who wishes to establish the affirmative defense of upset shall demonstrate, through properly signed contemporaneous operating logs, or other relevant evidence that:

1. An upset occurred and that the permittee can identify the cause(s) of the upset;

2. The permitted facility was at the time being properly operated;

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3. The permittee submitted notice of the upset as required in Permit Condition IX. 20. of this permit; and

4. The permittee complied with any remedial measures required under Permit Condition IX. 5. of this permit.

b. In any enforcement proceeding, the permittee seeking to establish the occurrence of an upset has the burden of proof.

c. Before an enforcement proceeding is instituted, no representation made during the Department review of a claim that noncompliance was caused by an upset is final agency action subject to judicial review.

[62-620.610(23)]

Executed in Jacksonville, Florida.

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

Jerry M. Owen, P.E.
Water Facilities Administrator

DATE: 19 MAY 2003

FILING AND ACKNOWLEDGEMENT
FILED, on this date, pursuant to S120.52 .Florida Statutes with the designated Department Clerk, receipt of which is hereby acknowledged.
Clerk Date: 19 MAY 2003

STATEMENT OF BASIS
FOR
STATE OF FLORIDA
DOMESTIC WASTEWATER FACILITY PERMIT

PERMIT NUMBER: FLA011597

FACILITY NAME: Plantation Bay WWTF

FACILITY LOCATION: Ormond Beach
Flagler County

NAME OF PERMITTEE: Plantation Bay Utility Company

PERMIT WRITER: Permit Writer

1. BASIS FOR EFFLUENT AND RECLAIMED WATER LIMITS AND MONITORING REQUIREMENTS (INCLUDING EFFLUENT MONITORING REQUIREMENTS)

This facility discharges to a Part III Public Access Reuse system. According to Rule 62-610.100 (2)(I), this facility should comply with all requirements in Part III of Chapter 62-610, Reuse of Reclaimed Water and Land Application, by January 1, 2010. This Rule also states that all permit renewal applications received by "grandfathered" reuse facilities received between August 8, 1999 and December 31, 2009 shall describe construction and other actions required to bring the facility into compliance with Part III of Chapter 62-610 requirements by January 1, 2010. The facility does have a plan in place to complete requirements in Chapter 62-610 as outlined in the permit.

The following table provides the basis for Part I. A. provisions.

Land Application System R-001 (slow-rate public access):

Parameter	Limit	Basis	Rationale
Flow (MGD)	0.475	Annual Average	62-600.400(3)(b) FAC
BOD, Carbonaceous 5 day, 20C (MG/L)	20.0 30.0 45.0 60.0	Annual Average Monthly Average Weekly Average Single Sample Max.	62-610.460 & 62-600.740(1)(b)1.a. FAC 62-600.740(1)(b)1.b. FAC 62-600.740(1)(b)1.c. FAC 62-600.740(1)(b)1.d. FAC
Solids, Total Suspended (MG/L)	5.0	Single Sample Max.	62-610.460(1) & 62-600.440(5)(f)3. FAC
pH (SU)	6.0 to 8.5	Minimum and Maximum	62-600.445 FAC

Received Time Jul.13. 2:09PM

Parameter	Limit	Basis	Rationale
Coliform, Fecal (#/100ML)	25	Single Sample Max.	62-600.440(5)(f)2. FAC
Coliform, Fecal, % less than detection (PERCENT)	75	Single Sample Max.	62-600.440(5)(f)1. FAC
Total Residual Chlorine (For Disinfection) (MG/L)	1.0	Minimum	62-600.440(5)(b), 62-610.460(2), & 62-610.463(2) FAC

The following table provides the basis for Part I. B. provisions.

Other Limitations and Monitoring Requirements:

Parameter	Limit	Basis	Rationale
BOD, Carbonaceous 5 day, 20C (MG/L)	Report	Monthly Average	62-601.300(1)FAC
Solids, Total Suspended (MG/L)	Report	Monthly Average	62-601.300(1)FAC
Percent Capacity, (TMADF/Permitted Capacity) x 100 (PERCENT)	Report	Monthly Average	62-600.405(4) FAC
Monitoring Frequency and Sample Type	-	All Parameters	62-601 FAC & 62-699 FAC and/or BPJ of permit writer
Sampling Location	-	All Parameters	62-601, 62-610.412, 62-610.463(1), 62-610.568, 62-610.613 FAC and/or BPJ of permit writer

2. RESIDUALS MANAGEMENT

The method of residuals use or disposal by this facility are transport to Shelley's Environmental Systems, or disposal in a Class I or II solid waste landfill.

3. GROUND WATER MONITORING REQUIREMENTS

Ground water monitoring requirements have been established in accordance with Rules 62-601 and 62-522, F.A.C. Ground water monitoring has been reduced to semi-annually from quarterly as per John Davis, P.G.

Received Time Jul.13. 2:09PM

4. INDUSTRIAL PRETREATMENT REQUIREMENTS

At this time, the facility is not required to develop an approved industrial pretreatment program. However, the Department reserves the right to require an approved program if future conditions warrant.

5. APPLICABLE RULES

The following were used as the basis of the permit limitations/conditions:

a. FAC refers to various portions of the Florida Administrative Code.

The effective dates of FAC Rule Chapters cited in the table are as follows:

Chapter	Effective Date
62-4	07-08-02
62-160	04-09-02
62-302	05-15-02
62-520	12-09-96
62-522	08-27-01
62-550	11-27-01
62-600	12-24-96
62-601	12-24-96
62-602	02-06-02
62-610	08-08-99
62-620	04-17-02
62-625	01-08-97
62-640	03-30-98
62-650	12-26-96
62-699	07-05-01

b. FS refers to various portions of the Florida Statutes

c. CFR refers to various portions of the Code of Federal Regulations, Title 40

d. BPJ refers to Best Professional Judgment

Received Time Jul.13. 2:09PM

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A DRAFT

When Completed mail this report to: Department of Environmental Protection, Northeast District. 7825 Baymeadows Way, Suite B-200, Jacksonville, FL, 32256-7590

PERMITTEE NAME: Plantation Bay Utility Company
MAILING ADDRESS: 2359 Beville Road
Daytona Beach, FL 32119

PERMIT NUMBER FLA011597

LIMIT: Final
CLASS SIZE: Minor

REPORT: Monthly
GROUP: Domestic

FACILITY: Plantation Bay WWTF
LOCATION: Old Dixie Highway, West of I-95
Ormond Beach, FL 32174

MONITORING GROUP NUMBER: R-001
MONITORING GROUP DESC: Part III Reuse

COUNTY: Flagler

NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: _____ To: _____

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement										
PARM Code 50050 Y Mon.Site No. EFA-1	Permit Requirement	0.475 (An.Avg.)		MGD						Daily	Flow meters
Flow	Sample Measurement										
PARM Code 50050 1 Mon.Site No. EFA-1	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo. Avg.)	MGD						Daily	Flow meters
BOD, Carbonaceous 5 day, 20C	Sample Measurement										
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement					20.0 (An.Avg.)		MG/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement										
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Requirement					30.0 (Mo.Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement										
PARM Code 00530 B Mon.Site No. EFB-1	Permit Requirement						5.0 (Max.)	MG/L		4 Days/Week	Grab
pH	Sample Measurement										
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)		8.5 (Max.)	SU		Daily	Grab

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)

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

Received Time Jul. 13. 2:09PM
07/13/2005 13:13 FAX 1 386 437 0100 PLANTATION BAY SALES 025

DISCHARGE MONITORING REPORT - PART A DRAFT (Continued)

FACILITY NAME: Plantation Bay WWTF PERMIT NUMBER: FLA011597 MONITORING GROUP NUMBER: R-001

COUNTY: Flagler MONITORING PERIOD From: _____ To: _____

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
oliform, Fecal	Sample Measurement										
ARM Code 74055 Y lon.Site No. EFA-1	Permit Requirement						25 (Max.)	#/100ML		4 Days/Week	Grab
oliform, Fecal, % less than detection	Sample Measurement										
ARM Code 51005 1 Mon.Site No. EFA-1	Permit Requirement				75 (Min.)			PER-CENT		4 Days/Week	Grab
otal Residual Chlorine (For isinfection)	Sample Measurement										
ARM Code 50060 A lon.Site No. EFA-1	Permit Requirement				1.0 (Min.)			MG/L		Daily	Grab
OD, Carbonaceous 5 day, 20C	Sample Measurement										
ARM Code 80082 G lon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		MG/L		Every Two Weeks	8-hour FPC
olids, Total Suspended	Sample Measurement										
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement					Report (Mo.Avg.)		MG/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement										
PARM Code 00180 1 Mon.Site No. CAL-1	Permit Requirement						Report (Mo.Total)	PER-CENT		Monthly	Calculated

Received Time Jul. 13. 2:09PM

07/13/2005 13:14 FAX 1 386 437 0100 PLANTATION BAY SALES 026

DAILY SAMPLE RESULTS - PART B DRAFT

Permit Number: FLA011597

Facility: Plantation Bay WWTF
County: Flagler

Monitoring Period From: _____ To: _____

	Flow, (MGD)	CBOD5 (MG/L)	TSS (MG/L)	pH (SU)	Fecal Coliform Bacteria (#/100ML)	Coliform, Fecal, % less than detection (PERCENT)	TRC (For Disinfect.) (MG/L)	CBOD5 (MG/L)	TSS (MG/L)
Code	50050	80082	00530	00400	74055	51005	50060	80082	00530
Mon. Site	EFA-1	EFA-1	EFB-1	EFA-1	EFA-1	EFA-1	EFA-1	INF-1	INF-1
1									
2									
3									
4									
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25									
26									
27									
28									
29									
30									
31									
Total									
Mo. Avg.									

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____

Evening Shift Operator Class: _____ Certificate No: _____ Name: _____

Night Shift Operator Class: _____ Certificate No: _____ Name: _____

Lead Operator Class: _____ Certificate No: _____ Name: _____

GROUND WATER MONITORING WELL REPORT - PART D DRAFT

County: Flagler
Facility Name: Plantation Bay WWTF
Permit Number: FLA011597

Monitoring Well ID: MWB-1
Well Type: Background
Description: At NE corner of potable water treatment plant

Monitoring Period From: _____ To: _____

Date Sample Obtained: _____

Was the well purged before sampling? ___ Yes ___ No

Time Sample Obtained: _____

Parameter	PARM Code	Sample Measurement	Permit Requirement	Units	Statistical Base Code	Monitoring Frequency	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to NGVD	82545		Report	FEET	Single Sample	Semi-annual				
Solids, Total Dissolved (TDS)	70304		Report	MG/L	Single Sample	Semi-annual				
Chloride (as Cl)	00940		Report	MG/L	Single Sample	Semi-annual				
Coliform, Fecal	31616		Report	#/100ML	Single Sample	Semi-annual				
pH	00406		Report	SU	Single Sample	Semi-annual				
Sulfate, Total	00945		Report	MG/L	Single Sample	Semi-annual				
Nitrite plus Nitrate, Total (as N)	00630		Report	MG/L	Single Sample	Semi-annual				

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (yy/mm/dd)

COMMENTS AND EXPLANATION (Reference all attachments here):

Received Time Jul. 13. 2:09PM
07/13/2005 13:14 FAX 1 386 437 0100 PLANTATION BAY SALES 028

GROUND WATER MONITORING WELL REPORT - PART D DRAFT

County: Flagler
Facility Name: Plantation Bay WWTF
Permit Number: FLA011597

Monitoring Well ID: MWC-2
Well Type: Compliance
Description: WWTP site @ SE corner of perc/holding pond

Monitoring Period From: _____ To: _____

Was the well purged before sampling? ___ Yes ___ No

Date Sample Obtained: _____

Time Sample Obtained: _____

Parameter	PARM Code	Sample Measurement	Permit Requirement	Units	Statistical Base Code	Monitoring Frequency	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
iter Level Relative to NGVD	82545		Report	FEET	Single Sample	Semi-annual				
lids, Total Dissolved (TDS)	70304		500	MG/L	Single Sample	Semi-annual				
loride (as Cl)	00940		250	MG/L	Single Sample	Semi-annual				
liform, Fecal	31616		4	#/100ML	Single Sample	Semi-annual				
	00406		6.5 to 8.5	SU	Single Sample	Semi-annual				
lfate, Total	00945		250	MG/L	Single Sample	Semi-annual				
rite plus Nitrate, Total (as N)	00630		10	MG/L	Single Sample	Semi-annual				

COMMENTS AND EXPLANATION (Reference all attachments here):

Received Time Jul 13 2:06PM

07/13/2006 13:14 FAX 1 386 437 0100 PLANTATION BAY SALES 029

07/13/2005 13:15 FAX 1 386 437 0100 PLANTATION BAY SALES 030

Received Time=Jul-13-=2:09PM

GROUND WATER MONITORING WELL REPORT - PART D DRAFT

County: Flagler
Facility Name: Plantation Bay WWTF
Permit Number: FLA011597

Monitoring Well ID: MWC-3R
Well Type: Compliance
Description: WWTP site along southern margin of perc pond

Monitoring Period From: _____ To: _____

Date Sample Obtained: _____

Was the well purged before sampling? ___ Yes ___ No

Time Sample Obtained: _____

Parameter	PARM Code	Sample Measurement	Permit Requirement	Units	Statistical Base Code	Monitoring Frequency	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
ater Level Relative to NGVD	82545		Report	FEET	Single Sample	Semi-annual				
lids, Total Dissolved (TDS)	70304		500	MG/L	Single Sample	Semi-annual				
loride (as Cl)	00940		250	MG/L	Single Sample	Semi-annual				
liform, Fecal	31616		4	#/100ML	Single Sample	Semi-annual				
	00406		6.5 to 8.5	SU	Single Sample	Semi-annual				
lfate, Total	00945		250	MG/L	Single Sample	Semi-annual				
trite plus Nitrate, Total (as N)	00630		10	MG/L	Single Sample	Semi-annual				

COMMENTS AND EXPLANATION (Reference all attachments here):

INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT

The DMR consists of four parts--A, B, C, and D--all of which may or may not be applicable to every facility. Facilities may have one or more Part A's for reporting effluent data. All domestic wastewater facilities will have a Part B for reporting daily sample results. Part C is only applicable for domestic wastewater facilities with limited wet weather discharges permitted under Chapter 62-610.860, F.A.C. Part D is used for reporting ground water monitoring well data.

Hard copies and/or electronic copies of the required parts of the DMR were provided with the permit. All required information shall be typed or printed in ink.

In addition to filling in numerical results on various parts of the DMR, the following codes should be used and an explanation provided where appropriate. Note: Codes used by the lab for raw data may be different.

CODE	DESCRIPTION/INSTRUCTIONS
ANC	Analysis not conducted.
DRY	Dry Well
FLD	Flood disaster.
IFS	Insufficient flow for sampling.
LS	Lost sample.
MNR	Monitoring not required this period.

CODE	DESCRIPTION/INSTRUCTIONS
NOD	No discharge from/to site.
OPS	Operations were shutdown so no sample could be taken.
OTH	Other. Please enter an explanation of why monitoring data were not available.
SEF	Sampling equipment failure.

When reporting analytical results that fall below a laboratory's reported method detection limits or practical quantification limits, the following instructions should be used:

1. Results greater than or equal to the PQL shall be reported as the measured quantity.
2. Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter and when determining compliance with permit limits.
3. Results less than the MDL shall be reported by entering a less than sign ("<") followed by the laboratory's MDL value, e.g. < 0.001. A value of one half the MDL or half the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limitation.

PART A -DISCHARGE MONITORING REPORT (DMR)

Part A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring requirements are interim or final, and the required submittal frequency (e.g. monthly, annually, quarterly, etc.) Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The following blanks in the header should be completed by the permittee or authorized representative:

No Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number. If there was no discharge of effluent for a particular outfall, reuse, or land application system and the DMR monitoring group includes other monitoring locations (e.g., influent sampling); the "NOD" code should be used to individually denote those parameters for which there was no discharge.
Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.
Sample Measurement: Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row. Be sure the result being entered corresponds to the appropriate statistical base code (e.g. annual average, monthly average, single sample maximum, etc.).
No. Ex.: Enter the number of sample measurements during the monitoring period that exceeded the permit limit for each parameter. If none, enter zero.
Frequency of Analysis: The shaded areas in this column contain the minimum number of times the measurement is required to be made according to the permit. Enter the actual number of times the measurement was made in the space above the shaded area.
Sample Type: The shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.
Signature: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.
Comment and Explanation of Any Violations: Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area.

Received Time Jul. 3. 2:09PM

PLANTATION BAY SALES 031

07/13/2005 13:15 FAX 1 386 437 0100 PLANTATION BAY SALES 032

Received Time Jul. 13. 2005 2:09PM

PART B - DAILY SAMPLE RESULTS

Month/Year: Enter the month and year during which the data on this report were collected and analyzed.
Three-month Average Daily Flow: Calculate and enter the three-month average daily flow to the treatment facility.
(TMADF/Permitted Capacity) x 100: Divide the three-month average daily flow by the permitted capacity of the treatment facility, multiply by 100, and enter this value.
Daily Monitoring Results: Record the results of daily monitoring for the parameters required to be sampled by your permit. Record the data in the units indicated.
Plant Staffing: List the name, certificate number, and class of all state certified operators operating the facility during the monitoring period. Use additional sheets as necessary.
Type of Effluent Disposal or Reclaimed Water Reuse: Enter the type of effluent disposal or reclaimed water reuse (e.g. surface water discharge, ocean outfall, slow rate land application-public access, slow rate land application-restricted public access, rapid rate land application, absorption field, underground injection).
Limited Wet Weather Discharge Activated: If this plant does not have a limited wet weather discharge permitted under the provision of Rule 62-610.860, F.A.C., check 'Not Applicable.' If the plant activated the wet weather discharge during the reporting month, check 'Yes' and attach PART C - LIMITED WET WEATHER DISCHARGE.

PART C - LIMITED WET WEATHER DISCHARGE

This part is to be completed and submitted each month reclaimed water or effluent is discharged by a limited wet weather discharge permitted under Rule 62-610.860, F.A.C. For months with no discharge, Part C need not be submitted. All information is to be provided for each day on which the limited wet weather discharge was activated.

Month/Year: Enter the month and year during which the data on this report were collected and analyzed.
Rainfall Information: Enter the name and location of the rainfall gauging station, the source of climatological (normal rainfall) data, the cumulative rainfall for the average rainfall year, and the cumulative rainfall to date for this calendar year. The cumulative rainfall for the average rainfall year is the amount of rain, in inches, which falls during an average rainfall year from January through the month for which this part contains data. The cumulative rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the month for which this DMR contains data.
Date: Enter the date on which the discharge occurred.
Duration of Discharge: Enter the number of hours, to the nearest 0.1 of an hour (0.1 hr. = 6 min.) during each day of discharge that reclaimed water was actually discharged to surface waters.
Gallons Discharged: Enter the quantity in millions of gallons of reclaimed water discharged during the period shown in duration of discharge. Show the units as millions of gallons (mg), accurate to the nearest 0.01.
Average Discharge Flow Rate: Divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day (MGD).
Average Upstream Flow Rate: Enter the average flow rate in the receiving stream upstream from the point of discharge for the period shown in duration of discharge. The average flow rate can be calculated based on two measurements; one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit.
Stream Dilution Factor: Enter the actual stream dilution ratio accurate to the nearest 0.1. To calculate the factor, divide the average upstream flow rate by the average discharge flow rate.
$CBOD_5$: Enter the average $CBOD_5$ of the reclaimed water discharged during the period shown in duration of discharge.
TKN: Enter the average TKN of the reclaimed water discharged during the period shown in duration of discharge.
Total P: Enter the cumulative number of days since January 1 of the current year during which the limited wet weather discharge was activated divided by the total number of days since January 1 of the current year multiplied by 100%.
Reason for Discharge: Provide a brief explanation of the factors contributing to the need to activate the limited wet weather discharge.

PART D - GROUND WATER MONITORING REPORT

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.
Date Sample Obtained: Enter the date the sample was taken. Also, check whether or not the well was purged before sampling.
Sampling Methods: Indicate the procedure used to collect the sample (e.g. airlift, bucket/bailer, centrifugal pump, etc.)
Samples Filtered: Indicate whether the sample obtained was filtered by laboratory (L), filtered in field (F), or unfiltered (N).
Preservatives Added: State what preservatives were added to the sample.
Analysis Method: Indicate the analytical method used. Record the method number from Chapter 62-160 or Chapter 62-601, F.A.C., or from other sources.
Analysis Result/Units: Record the results of the analysis. If the result was below the minimum detection limit, indicate that. Enter the units associated with the results of the analysis.
Detection Limits/Units: Record the detection limits of the analytical methods used and the units associated with them.
Comments and Explanations: Use this space to make any comments on or explanations of results which are unexpected. If more space is needed, reference all attachments in this area.

(2nd) PBUC - DEP WWTF Operating Permit 2003 Expires 5/21/2008

Department of Environmental Protection

Jeb Bush
Governor

Northeast District
7825 Baymeadows Way, Suite B200
Jacksonville, Florida 32256-7590

David B. Struhs
Secretary

MAY 27 2003

CERTIFIED MAIL – RETURN RECEIPT

RECEIVED
MAY 22 2003
ADMINISTRATION

May 22, 2003

In the Matter of an
Application for Permit by:

Plantation Bay Utility Company
Mr. Morteza Hosseini-Kargar
President
2359 Beville Road
Daytona Beach, FL 32119

PA File No. FLA011597-001-DW1R
Flagler County
Plantation Bay WWTF
FLA011597

NOTICE OF PERMIT ISSUANCE

Enclosed is Permit Number FLA011597 to operate an existing 0.475 mgd annual average daily flow (AADF) extended aeration wastewater treatment facility with the following process units: influent bar screen, three aeration tanks with a total capacity of 453,900 gallons, one 112,500 gallon clarifier, one 56,100 gallon aerobic digester, one 240 square foot gravity sand filter consisting of three cells and a 16,100 gallon mudwell, and one 52,600 gallon chlorine contact chamber. Treated effluent is distributed to a 1,700,000 gallon holding pond and used for irrigation on the 75-acre Plantation Bay Golf Course. Residuals are transported to a Residuals Management Facility for land application. This permit is issued under section(s) 62-4, 62-600, 62-601, 62-610, 62-620 and 62-699 of the Florida Administrative Code and Section 403 of the Florida Statutes.

The Department's proposed agency action shall become final unless a timely petition for an administrative hearing is filed under Sections 120.569 and 120.57, Florida Statutes, within fourteen days of receipt of notice. The procedures for petitioning for a hearing are set forth below.

A person whose substantial interests are affected by the Department's proposed permitting decision may petition for an administrative proceeding (hearing) under Sections 120.569 and 120.57, Florida Statutes. The petition must contain the information set forth below and must be filed (received by the clerk) in the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida 32399-3000.

Under Rule 62-110.106(4), Florida Administrative Code, a person may request enlargement of the time for filing a petition for an administrative hearing. The request must be filed (received by the clerk) in the Office of General Counsel before the end of the time period for filing a petition for an administrative hearing.

Received Time Jul.13. 2:09PM

Petitions by the applicant or any of the persons listed below must be filed within fourteen days of receipt of this written notice. Petitions filed by any persons other than those entitled to written notice under Section 120.60(3), Florida Statutes, must be filed within fourteen days of publication of the notice or within fourteen days of receipt of the written notice, whichever occurs first. Under Section 120.60(3), Florida Statutes, however, any person who has asked the Department for notice of agency action may file a petition within fourteen days of receipt of such notice, regardless of the date of publication.

The petitioner shall mail a copy of the petition to the applicant at the address indicated above at the time of filing. The failure of any person to file a petition or request for enlargement of time within fourteen days of receipt of notice shall constitute a waiver of that person's right to request an administrative determination (hearing) under Sections 120.569 and 120.57, Florida Statutes. Any subsequent intervention (in a proceeding initiated by another party) will be only at the discretion of the presiding officer upon the filing of a motion in compliance with Rule 28-106.205, Florida Administrative Code.

A petition that disputes the material facts on which the Department's action is based must contain the following information:

(a) The name, address, and telephone number of each petitioner; the name, address, and telephone number of the petitioner's representative, if any; the Department permit identification number and the county in which the subject matter or activity is located;

(b) A statement of how and when each petitioner received notice of the Department action;

(c) A statement of how each petitioner's substantial interests are affected by the Department action;

(d) A statement of all disputed issues of material fact. If there are none, the petition must so indicate;

(e) A statement of facts that the petitioner contends warrant reversal or modification of the Department action;

(f) A concise statement of the ultimate facts alleged, as well as the rules and statutes which entitle the petitioner to relief; and

(g) A statement of the relief sought by the petitioner, stating precisely the action that the petitioner wants the Department to take.

Because the administrative hearing process is designed to formulate final agency action, the filing of a petition means that the Department's final action may be different from the position taken by it in this notice. Persons whose substantial interests will be affected by any such final decision of the Department have the right to petition to become a party to the proceeding, in accordance with the requirements set forth above.

In addition to requesting an administrative hearing, any petitioner may elect to pursue mediation. The election may be accomplished by filing with the Department a mediation agreement with all parties to the proceeding (i.e., the applicant, the Department, and any person who has filed a timely and sufficient petition for a hearing). The agreement must contain all the information required by Rule 28-106.404, Florida Administrative Code. The agreement must be received by the clerk in the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida 32399-3000, within ten days after the deadline for filing a petition, as set forth above. Choosing mediation will not adversely affect the right to a hearing if mediation does not result in a settlement.

As provided in Section 120.573, Florida Statutes, the timely agreement of all parties to mediate will toll the time limitations imposed by Sections 120.569 and 120.57, Florida Statutes, for holding an administrative hearing and issuing a final order. Unless otherwise agreed by the parties, the mediation must be concluded within sixty days of the execution of the agreement. If mediation results in settlement of the administrative dispute, the Department must enter a final order incorporating the agreement of the parties. Persons seeking to protect their substantial interests that would be affected by such a modified final decision must file their petitions within fourteen days of receipt of this notice, or they shall be deemed to have waived their right to a proceeding under Sections 120.569 and 120.57, Florida Statutes. If mediation terminates without settlement of the dispute, the Department shall notify all parties in writing that the administrative hearing processes under Sections 120.569 and 120.57, Florida Statutes, remain available for disposition of the dispute, and the notice will specify the deadlines that then will apply for challenging the agency action and electing remedies under those two statutes.

This permit is final and effective on the date filed with the clerk of the Department unless a petition (or request for enlargement of time) is filed in accordance with the above. Upon the timely filing of a petition (or request for enlargement of time) this permit will not be effective until further order of the Department.

Any party to this permit has the right to seek judicial review under Section 120.68, Florida Statutes, by the filing of a notice of appeal under Rules 9.110 and 9.190, Florida Rules of Appellate Procedure with the clerk of the Department in the Office of General Counsel, 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida, 32399-3000; and by filing a copy of the notice of appeal accompanied by the applicable filing fees with the appropriate district court of appeal. The notice of appeal must be filed within 30 days from the date when this permit is filed with the clerk of the Department.

Executed in Jacksonville, FL, Florida.

T.B.L.

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION

Jerry M. Owen, P.E.
Water Facilities Administrator

CERTIFICATE OF SERVICE

The undersigned hereby certifies that this NOTICE OF PERMIT ISSUANCE and all copies were mailed before the close of business on 14 MAY , 2003 to the listed persons.

Name

14 MAY 2003
Date

Copies furnished by U.S. mail to:
Flagler CHD
Flagler County Commissioners Office
Jerry Finley, P.E.
Phil Kane, FDEP Central District

FILING AND ACKNOWLEDGEMENT
FILED, on this date, pursuant to S120.52 Florida Statutes with the designated Department Clerk, receipt of which is hereby acknowledged.

Clerk 14 MAY 2003

Department of Environmental Protection

Jeb Bush
Governor

Northeast District
7825 Baymeadows Way, Suite B200
Jacksonville, Florida 32256-7590

David B. Struhs
Secretary

February 23, 2004

Mr. Douglas Ross, Vice President
Plantation Bay Utility Company
100 Plantation Bay Drive
Ormond Beach, Florida 32174

Dear Mr. Ross:

Flagler County – Potable Water
Plantation Bay Utility Company WTP // PWS ID: 2184251
Disinfection/Disinfection Byproducts Monitoring Plan

We have reviewed your Disinfectant/Disinfection Byproducts Monitoring Plan for the above referenced water system and it appears to be satisfactory. Therefore, please continue monitoring in accordance with the plan you provided and note that, the chlorine residual monitoring was to have begun with the January bacteriological sampling and should also continue.

Your first round of Total Trihalomethane (TTHM) and Haloacetic Acid Five (HAA5) sampling should take place between July and September 2004.

If you have any questions, please contact me by telephone at (904) 807-3335 or via my Internet E-mail address at Emerson.Raulerson@dep.state.fl.us.

Thank you for your cooperation with the Florida Safe Drinking Water Program.

Sincerely,

Emerson C. Raulerson

Emerson C. Raulerson, P.E.
Potable Water Section

ECR:er

cc: Finley Engineering Group
Wetherell Treatment Systems

STAGE 1 DISINFECTANTS/DISINFECTION BYPRODUCTS RULE MONITORING PLAN EXAMPLE FORMAT FOR GROUND WATER SYSTEMS[1]

SECTION 1: SYSTEM INFORMATION

System Name:PLANTATION BAY UTILITY COMPANY		County: FLAGLER
PWS ID Number: 2184251		Contact Person: GLEN WETHERELL
Phone Number: 386.673.4161	Cell (optional):	Fax Number (optional)
e-mail address (optional):		

SECTION 2: SYSTEM CHARACTERISTICS

SYSTEM TYPE		POPULATION DATA	
X	Community	Total Population Served[1*]:	2000
☐	Non-Transient, Non Community	Number of Service Connections-	1000
☐	Transient Non-Community[2*]	Source of Population Data (i.e. U.S. Census, Based on number of service connections (indicate multiplier) etc.)	HOMEOWNERS' ASSN DATA
☐	Consecutive	Effective Date of Population Data	12/03

[1*] In accordance with 62-550.821(2)(a), the number of persons served by a wholesale system must include the number of persons served by the consecutive systems that receive finished water from the wholesale system.
[2*] The Stage 1 D/DBP Rule **only** applies to TWS that are using chlorine dioxide.

SECTION 3: SOURCES OF RAW WATER/NUMBER OF TREATMENT PLANTS:

XGround	How Many Wells?	4	
☐ Purchased	If finished or raw water is purchased from a wholesale system(s), indicate the name and PWS ID Number for the system.	Wholesale System Name	PWS ID Number

Total number of water treatment plants = 1

- In accordance with 62-550.821(5), an entry point from a wholesale system to a consecutive system is considered a plant for the consecutive system.
- If your system has submitted a request in accordance with 62-550.821(5)(a) or 62-550.821(9), F.A.C. to consolidate multiple entry points from a wholesale system or multiple plants treating water from multiple wells in the same aquifer as one treatment plant, please complete the TTHM/HAA5 consolidation table in Section 8.
- Please note that booster chlorination stations should not be considered as separate water treatment plant(s).

[1] Monitoring plans must be prepared in accordance with 62-550.821(11), F.A.C. This example format does not address the monitoring plan requirements for subpart H systems or for PWSs using chlorine dioxide or ozone. Example format prepared by the Florida Department of Environmental Protection and the Florida Rural Water Association. Effective date 09/30/03.

SECTION 4: DISINFECTANTS

INDICATE THE DISINFECTANTS UTILIZED IN THE TREATMENT PROCESS AS A DISINFECTANT OR OXIDANT (CHECK ALL THAT APPLY)

X Chlorine ✓	If chlorine is selected as the primary disinfectant, indicate the chlorine type below	Does your system have one or more disinfection addition points after the entrance to the distribution system? (i.e. booster chlorination) ☐ *Yes* *X No*
☐ Chloramines	X Chlorine Gas ✓	
	☐ Sodium Hypochlorite	
☐ Other (Specify[1])	☐ Calcium Hypochlorite	*If yes, indicate the number of addition points in your system:*
	☐ Other (Specify)	

[1]Monitoring plans must be prepared in accordance with 62-550.821(11), F.A.C. This example format does not address the monitoring plan requirements for subpart H systems or for PWSs using chlorine dioxide or ozone.

SECTION 5: SCHEMATIC DRAWING OF THE DISTRIBUTION SYSTEM

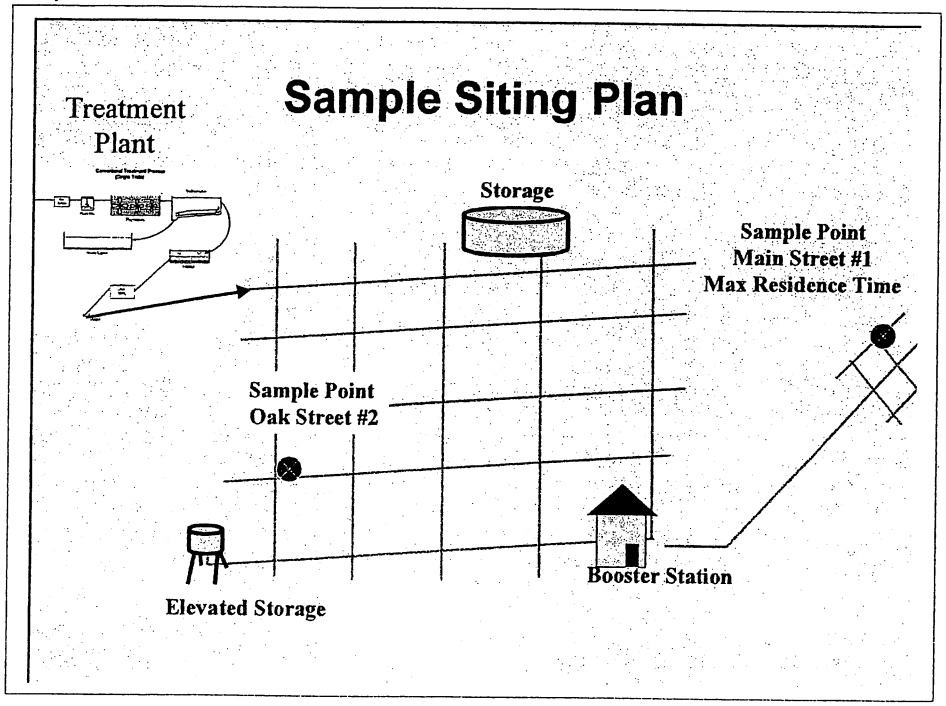
In accordance with Rule 62-550.821(11) (e) attach a schematic drawing of the system's distribution system. The schematic drawing at a minimum, must include the following information: (An example is provided below)

Entry points to the distribution system (i.e. water treatment plants and, if the system is a consecutive system, entry points from the wholesale systems)

Finished water storage facilities and booster chlorination facilities

Sampling locations identified and numbered

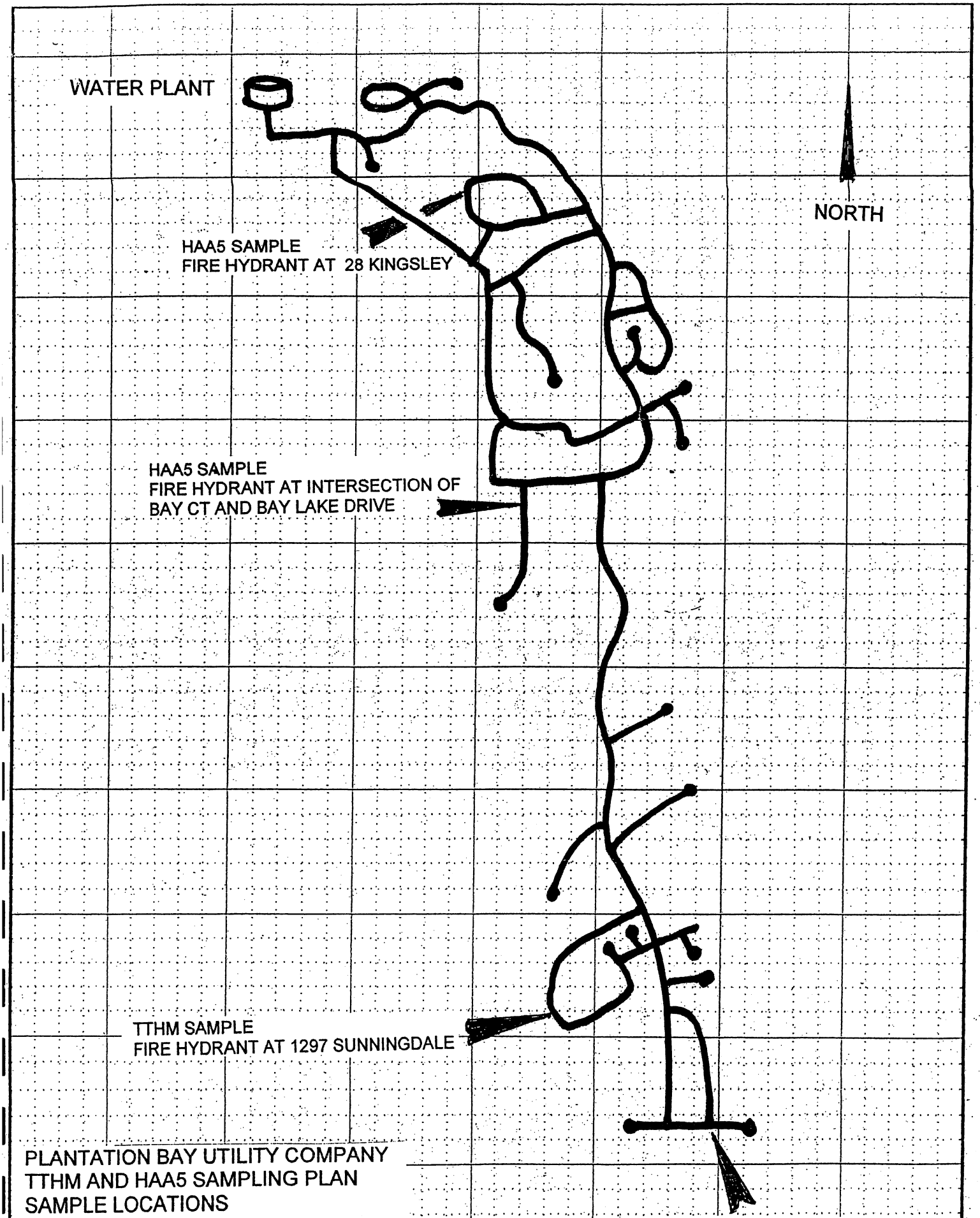
An example is provided below.



SECTION 6: DISTRIBUTION SYSTEM CHARACTERISTICS

In accordance with 62-550.821(11)(f) F.A.C., provide a summary of typical distribution system operating characteristics. The summary should address seasonal operating characteristics and identify the areas where average and maximum residence times are expected to occur in the distribution system. Provide a brief explanation of why you believe the locations that you selected represent the maximum residence time(s). (You may have more than one location to represent your maximum residence time sampling point.) For example, "the maximum residence time is located in an area with several dead-ends"; "in the summer months few residents are served by our water system resulting in extended residence times", etc).

ONE SAMPLE FOR TTHM AND HAA5 IS LOCATED AT POINT OF MAXIMUM RESIDENCE TIME. (AT DEAD ENDS OF THE SYSTEM WHICH IS APPROXIMATELY FIVE MILES FROM THE WATER PLANT). ONE SAMPLE FOR TTHM AND HAA5 IS TAKEN AT AN AVERAGE POINT ALONG THE DISTRIBUTION SYSTEM.



PLANTATION BAY UTILITY COMPANY
TTHM AND HAA5 SAMPLING PLAN
SAMPLE LOCATIONS
JANUARY 29, 2004

NOT TO SCALE

SECTION 7. DISINFECTANT MONITORING SCHEDULE FOR CHLORINE/CHLORAMINES

Sample ID Number	Sample Location	Sample Time (Frequency)	Analytical Method	Sample Handling & Preservation Requirements	Analysis Information (Indicate one of the following: Samples will be analyzed by: 1 = A licensed operator, 2 = A person under the direct supervision of a licensed operator, 3 = Analyzed at a certified laboratory)
	Samples should be collected in the distribution system at the same time and place that total coliform samples are collected.				
CL1	PER MONTHLY BACTERIOLOGICAL SAMPLING PLAN – SEE ATTACHED	MONTHLY	DPD-COLOR METRIC	NONE	1
CL2	PER MONTHLY BACTERIOLOGICAL SAMPLING PLAN – SEE ATTACHED	MONTHLY	DPD-COLOR METRIC	NONE	1

SECTION 8: ROUTINE MONITORING FREQUENCY FOR TTHM AND HAA5

System Population	Minimum Monitoring Frequency	Sample Location(s)	Number of Treatment Plants[1]	Minimum Number of Samples Required[3]	Number of samples your facility will collect	Indicate the month(s) that samples will be collected	Conditions for Increased Monitoring
Ground water system serving at least 10,000 persons	One sample per quarter per treatment plant	Locations representing the maximum residence time[2]	N/A				N/A
Ground water system serving less than 10,000 persons	One sample per year per treatment plant during the warmest month of water temperature	Locations representing the maximum residence time[2]	1	1	2	JULY	If the sample (or average if more than one sample is collected) exceeds the MCL, the system must increase monitoring to one sample per treatment plant per quarter, taken at a point representative of the maximum residence time

[1]If your system has submitted a request in accordance with 62-550.821(9), F.A.C. to consider multiple plants treating water from multiple wells in the same aquifer as one treatment plant, please complete the TTHM / HAA5 system consolidation information table below. Consecutive systems with multiple entry points into their distribution system that have requested to be considered as one plant should also complete the consolidation table below. (In accordance with 62-550.821(5), an entry point from a wholesale system to a consecutive system is considered a plant for the consecutive system.)

[2]Locations representing maximum residence time. If the system elects to sample more frequently than the minimum required, at least 25 percent of all samples collected each quarter (including those taken in excess of the required frequency) must be taken at locations that represent the maximum residence time of the water in the distribution system.

[3]Multiply the number of treatment plants by one (1) to obtain the minimum number of compliance samples required annually.

TTHM / HAA5 SYSTEM CONSOLIDATION TABLE

(This Section is only applicable for systems wishing to consolidate multiple entry points from a wholesale system or multiple plants treating water from the same aquifer in accordance with 62-550.821(5)(a) or 62-550.821(9), F.A.C.

System Type	Total Number of Treatment Plants/Number of Entry Points from the wholesale system	Date Request Submitted	Date DEP/DOH Approval Received (Attach letter of approval)	Total Number of Consolidated Treatment Plants or Wholesale System Entry Points
Ground Water System (multiple plants treating water from the same aquifer)	N/A			
Consecutive System				

SECTION 9: ROUTINE MONITORING SCHEDULE FOR TOTAL TRIHALOMETHANES (TTHM)

Sample ID Number	Sample Location	Distribution System Location (Average, or Maximum Residence Time)	Sample Time (Frequency)	Analytical Method	Sampling Handling and Preservation Requirements	ANALYSIS INFORMATION	
						Laboratory Name	DOH ID Number
TTHM-1	INT OF CROWN POINTE LN AND ROYAL POINTE LN	MAXIMUM	1 IN JULY	EPA 502.2	DECHLORIN / ACIDIFIC	ELAB	E83079
TTHM2	BAY LAKE DRIVE AT BAY CT	AVERAGE	1 IN JULY	EPA 502.2	DECHLORIN / ACIDIFIC	ELAB	E83079

SECTION 10: ROUTINE MONITORING SCHEDULE FOR HALOACETIC ACIDS FIVE (HAA5)

Sample ID Number	Sample Location	Distribution System Location (Average, or Maximum Residence Time)	Sample Time (Frequency)	Analytical Method*	Sampling Handling and Preservation Requirements	ANALYSIS INFORMATION	
						Laboratory Name	DOH ID Number
HAA5-1	INT OF CROWN POINTE LN AND ROYAL POINTE LN	MAXIMUM	1 IN JULY	EPA 552.1	NH4CL	ELAB	E83079
HAA5-2	BAY LAKE DRIVE AT BAY CT	AVERAGE	1 IN JULY	EPA 552.1	NH4CL	ELAB	E83079

*The analytical method selected for HAA5s affects the maximum holding time.

SECTION 11: SAMPLE COLLECTION PROCEDURES

Parameter	Container	Cap/Septa Material	Sample Collection Guidelines	Preservative(s)	Maximum Holding Time	Analytical Method(s)
Chlorine	> 500 mL Plastic or Glass	N/A	Grab sample. Either free or total residual chlorine measurement is acceptable	None	Analysis should be completed within 15 minutes of collection	Free-Standard Methods (SM) 4500-C1D, CL F, 4500-C1 G **(DPD Colormetric)**
						Combined- SM 4500 Cl D, F, G
						Total-SM 4500-Cl D, E, F, G, I
Chloramines	> 500 mL Plastic or Glass	N/A	Grab sample. The residual measurement must be combined or total chlorine	None	Analysis should be completed within 15 minutes of collection	Standard Methods 4500C1 D, 4500C1E, 4500CL F4500-C1 I 4500-C1G-**(DPD Colormetric)** ASTM Method D 1253-86
HAA5	>100 mL amber glass	Teflon-lined septum	1. Fill bottle completely but be careful not to flush out preservatives 2. Sample should not have bubbles 3. Sample disinfectant at time of collection	NH_4CL (ammonium chloride) Review the specific method for max holding times/preservation procedures.	28 days @ 4°C	EPA Method 552.1
	>50 mL amber glass				7-14 days @ 4°C	EPA Method 552.2
	40-60 mL glass vial				9 days @ 4°C to extraction, 21 days to analysis @ -11°C	Standard Method 6251B
pH	Plastic or Glass	N/A	Grab Sample	None	Sample should be analyzed within 15 minutes of collection	All methods allowed in 40 CFR 141.23(k)(1) including but not limited to Standard Method 4500 H B, EPA Method 150.1 & 150.2
TTHM	40-120 mL Glass vial	Teflon- lined septum	1 **Samples must be dechlorinated prior to acidification.** 2 Sample residual disinfectant at time of collection.	Dechlorination with $Na_2S_2O_3$ and acidification using HCL to pH <2	14 Days @ 4°C	EPA Methods 502.2 , 524.2
	60 mL Glass vial	Teflon- lined septum		Sodium sulfite or NH_4CL (ammonium chloride) with a phosphate buffer (pH = 4.5-5.5)	14 Days @ 4°C	EPA Method 551.1

SECTION 12: MONITORING SUMMARY/CONDITIONS FOR REDUCED MONITORING FOR GROUND WATER SYSTEMS[1]

PARAMETER	APPLICIBILITY		ROUTINE MONITORING FREQUENCY	CRITERIA FOR REDUCED MONITORING	REDUCED MONITORING FREQUENCY*	IS YOUR SYSTEM CONDUCTING ROUTINE, REDUCED, OR INCREASED MONITORING?
Chlorine/ Chloramines	PWSs that use the disinfectants		At the same time and location and frequency as total coliform sampling	Monitoring may not be reduced.	Not Applicable	ROUTINE ✓
Total Trihalomethanes (TTHMs) & Haloacetic Acids 5 (HAA5s)	All CWS & NTNC systems that are adding a chemical disinfectant	Ground water systems serving at least 10,000 persons	One sample/ per quarter/ per treatment plant	≤ 50% of the TTHM & HAA5 RAA MCLs	One sample/ per year/ per treatment plant at maximum residence time location(s) in the distribution system during the month of warmest water temperature.	N/A ✓
		Ground water systems serving fewer than 10,000 persons	One sample/ per treatment plant/ during the month of the warmest water temperature	≤ 50% of the TTHM & HAA5 RAA MCLs for 2 years OR ≤25 % of the TTHM & HAA5 RAA MCLs for 1 year	One sample/ Every 3 years/ At max residence time location(s) in the distribution system during the month of warmest water temperature.	ROUTINE ✓

1 Please review 40 CFR 141.132 "Monitoring Requirements" for complete details on routine and reduced monitoring requirements.

*In accordance with 40 CFR 141.132(5)(b)(1)(iii), systems on reduced monitoring may remain on a reduced schedule as long as the average of all samples taken in a year (for systems monitoring quarterly or more frequently) or the result of the sample (for systems monitoring annually during the month of the warmest water temperature) is no more than 0.060 mg/L and 0.045 mg/L for TTHMs and HAA5s respectively. Systems that do not meet these criteria must return to routine monitoring.

SECTION 13: METHOD FOR CALCULATING COMPLIANCE FOR MAXIMUM RESIDUAL DISINFECTANT LEVELS (MRDL) (CHLORINE AND/OR CHLORAMINES)

Sample Locations: Within the distribution system at the same time and locations where samples for total coliform are collected in accordance with 62-550.518, F.A.C.

Compliance Determination: In accordance with 40 CFR 141.133(c)(1), compliance is based on a running annual arithmetic average computed quarterly, using the monthly averages of all samples collected

How to Determine Compliance with the MRDL:

1. Each month, add together the disinfectant residual results of all the samples taken during the month at the total coliform sampling locations. Divide by the total number of total number of samples. This is your monthly MRDL average.
2. Determine the running annual average. To determine the running annual average, add the twelve most recent consecutive monthly MRDL averages together; then divide by twelve. This is your running annual average.
3. Compare your running annual average to the MRDL for chlorine / chloramines of 4.0 mg/L. If your running annual average for the MRDL is less than 4.0 mg/L, the facility is in compliance with the maximum residual disinfectant level.

An example MRDL compliance calculation is provided below. The results are listed in mg/L.

Month	MRDL Monthly Averages	Reporting the MRDL to the Department
January 2004	4.5	♦ Report your Monthly MRDL results to the Department on a quarterly basis. ♦ Submit the quarterly RAA within 10 days of the end of each quarter ♦ For example, January-March 2004 results are due to the Department on April 10, 2004.
February 2004	3.5	
March 2004	3.2	
April 2004	**4.6**	
May 2004	**3.3**	
June 2004	**2.4**	
July 2004	3.4	
August 2004	2.9	
September 2004	2.8	
October 2004	**2.7**	
November 2004	**2.4**	
December 2004	**3.1**	
MRDL Running Annual Average	**Add the last 12 monthly averages to calculate the RAA 4.5 + 3.5 + 3.2 + 4.6 + 3.3 + 2.4 + 3.4 + 2.9 + 2.8 + 2.7 + 2.4 +3.1= 38.8/12 (Most Recent Months) =3.2 mg/L**	

The running annual average is 3.2 mg/L. Therefore, the system in the example is in compliance with the MRDL of 4.0 mg/L.

SECTION 14: METHOD FOR CALCULATING COMPLIANCE WITH THE MAXIMUM CONTAMINANT LEVELS FOR TTHMS AND HAA5

Compliance Determination: In accordance with 40 CFR 141.133(b)(1), for systems monitoring quarterly (ground water systems serving > 10,000 persons) compliance is based on a running annual average computed quarterly, using the quarterly arithmetic averages of all samples collected by the system.

For systems monitoring less frequently than quarterly; (ground water systems (GWS) serving less than 10,000 persons that monitor annually) compliance is demonstrated if the single sample collected in the month of the warmest water temperature at a location representing the maximum residence time is in compliance with the MCL of 0.080 mg/L for TTHMs and 0.060 mg/L for HAA5. If the average of these samples exceeds the MCL, the facility is not immediately out of compliance. The system must increase to quarterly monitoring immediately. Compliance is then based on the running annual average, computed quarterly, using all of the quarterly sample results. (Note if the sum of fewer than four quarters of data exceeds 0.320 mg/L for TTHM or 0.240 mg/L for HAA5, then the system is immediately in violation since they will exceed the applicable MCL even if the remaining quarters are zero.)

How to Determine Compliance with the MCLs for TTHM and HAA5 for Systems Monitoring Quarterly:

1. Determine the quarterly average. To calculate the quarterly average, add together the concentrations of all samples taken during the quarter (Please note that TTHM and HAA5 samples should be averaged separately.) Divide by the total number of samples to obtain the quarterly average.
2. Determine the running annual average. To determine the running annual average, add the four most recent consecutive quarterly averages together, then divide by four. This is your running annual average.
3. Compare your running annual averages for TTHM and HAA5. If your running annual average for TTHM and HAA5 is less than or equal to 0.080 mg/L or 0.060 mg/L respectively, the facility is in compliance with the MCLs.

An example of a TTHM compliance calculation is provided below. All values listed are in ug/L. (MCL in ug/L= TTHM= 80 ug/L HAA5 = 60 ug/L)

Quarter	Number of Sampling Points	TTHM Quarterly Average	TTHM Running Annual Average
Q1=Jan-Mar	3	$\frac{50 + 45 + 39}{3} = 45$	Q1 Average = 45 Q2 Average = 50 Q3 Average = 84 Q4 Average = 70 $\frac{45 + 50 + 84 + 70}{4} = \mathbf{62}$
Q2=Apr-Jun	3	$\frac{57 + 49 + 43}{3} = 50$	
Q3 =Jul-Sep	3	$\frac{75 + 80 + 98}{3} = 84$	
Q4 =Oct-Dec	3	$\frac{60 + 72 + 79}{3} = 70$	

The running annual average for TTHM in this example is 62 ug/L. Therefore, the system is in compliance with the MCL of 80 ug/L.

WTS WETHERELL TREATMENT SYSTEMS
ROUTE 3, 600 HULL ROAD, ORMOND BEACH, FL 32174
Telephone 904/673-4161

PLANTATION BAY
BACTERIOLOGICAL SAMPLING PLAN

MONTH	SUB-DISTRICT	SUB-DISTRICT
January	Magnolia	Bay Isles
February	Tree Top	Lakewood
March	Jamine Run	Fairwinds II
April	Plantation Point	Fairwinds III
May	Landings	Kingsley
June	Bay Isles	Lago Grande
July	Magnolia	Oakbrook
August	Tree Top	Lakewood
September	Jasmine Run	Fairwinds II
October	Landings	Fairwinds III
November	Kingsley	Lago Grande
December	Bay Pointe	Meadow Brook

Department of Environmental Protection

Jeb Bush
Governor

Northeast District
7825 Baymeadows Way, Suite B200
Jacksonville, Florida 32256-7590

Colleen M. Castille
Secretary

March 19, 2004

Mr. Douglas Ross, Vice President
Plantation Bay Utility Company
100 Plantation Bay Drive
Ormond Beach, Florida 32174

Flagler County - Potable Water
OGC Consent Order No. 03-2194
DEP vs. Plantation Bay Utility Company

Dear Mr. Ross:

On December 15, 2003 the Department sent Consent Orders (COs) to systems that were known to have problems with Disinfection Byproducts (DBPs). We have received the responses and have been asked by most systems to make changes to the time frames. We have therefore decided to split the requirements of Paragraph 5 into multiple subparagraphs and to extend some of those dates. Please look over the attached revision to Paragraph 5 and indicate your acceptance of the language, along with reasonable time frames that you think can be met.

Also, due to the uncertainty with the allocation of grant/loan funding requests, a couple of systems have asked to delay signing the COs until April and May. Therefore, due to our desire to keep everyone on an equal footing with similar time frames, we are going to hold off final agreement on those dates (and, therefore, on the execution of the COs) until that time.

Finally, please remember that your system is still required to conduct quarterly DBP monitoring (total trihalomethanes and haloacetic acids) in accordance with your disinfectants/disinfection byproducts monitoring plan and that the first samples must be taken by the end of this month.

If you have any questions, please contact me by telephone at (904) 807-3304 or by e-mail at Emerson.Raulerson@DEP.STATE.FL.US. Thank you for your cooperation with Florida's Safe Drinking Water Act.

Sincerely,

Emerson C. Raulerson, P.E.
Drinking Water Section

EDC:ECR:er
Enforcement File
Enclosure

cc: Flagler County Health Department
Finley Engineering
Wetherell Treatment Systems

copy to DR
JF

Proposed Revision to Paragraph 5 of Consent Order No. 03-2194

5. Respondent shall comply with the following actions within the stated time periods.

a. Obtain all required permits by _____;

b. Complete the modification of the system's treatment processes and/or the installation of new treatment processes that will ensure compliance with the MCLs for all Disinfection Byproducts (including, but not limited to, total trihalomethanes) by _____;

c. Begin operation of the new or modified system by _____.

Department of Environmental Protection

DEC 3 1 2003

Jeb Bush
Governor

Northeast District
7825 Baymeadows Way, Suite B200
Jacksonville, Florida 32256-7590

David B. Struhs
Secretary

December 15, 2003

CERTIFIED MAIL – RETURN RECEIPT

Mr. Douglas Ross, Vice President
Plantation Bay Utility Company
100 Plantation Bay Drive
Ormond Beach, Florida 32174

COPY TO:
JERRY FINLEY
TOM R.
GLEN W.

Flagler County - Potable Water
OGC Consent Order No. 03-2194
DEP vs. Plantation Bay Utility Company

Dear Mr. Ross:

Earlier this year, Rule 62-550 of the Florida Administrative Code was revised to require all facilities such as yours to begin routine Disinfection Byproducts monitoring during the first quarter of 2004. As a result, this office is issuing Consent Orders to facilities known to exceed the maximum contaminant level for Disinfection Byproducts. The Consent Orders are only intended to place facilities on a time schedule for completing activities needed to bring them in compliance and only address penalties if that schedule is not met. Therefore, please review the attached draft Consent Order and sign and return the entire document to this office within 14 days of receipt.

While a Consent Order will have to be agreed upon in order to avoid more severe enforcement, we are willing to work with you on the time frames. Please notify the Department in writing within 14 days in the event you require additional consideration.

If you have any questions concerning this Consent Order, please contact Emerson Raulerson by telephone at (904) 807-3304 or by e-mail at Emerson.Raulerson@DEP.STATE.FL.US. Thank you for your cooperation with Florida's Safe Drinking Water Act.

Sincerely,

Jerry M. Owen, P.E.
Water Facilities Administrator

cc ECR
JMO:EDC:ECR:er
Enforcement File
Enclosure
cc: Flagler County Health Department
Wetherell Treatment Systems

BEFORE THE STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

IN THE OFFICE OF THE NORTHEAST DISTRICT

Complainant, OGC FILE NO. 03-2194

vs.

Plantation Bay Utility Company

Respondent.
_____/

CONSENT ORDER

This Consent Order is entered into between the State of Florida Department of Environmental Protection ("Department") and Plantation Bay Utility Company ("Respondent") to reach settlement of certain matters at issue between the Department and Respondent.

The Department finds and the Respondent admits the following:

1. The Department is the administrative agency of the State of Florida having the power and duty to administer and enforce the provisions of the Florida Safe Drinking Water Act, Sections 403.850, et seq., Florida Statutes, and the rules promulgated thereunder, Title 62, Florida Administrative Code. The Department has jurisdiction over the matters addressed in this Consent Order.

2. Respondent is a person within the meaning of Section 403.852(5), Florida Statutes.

3. Respondent is the owner of a community public water system, [PWS #2184251] located approximately 1 mile west of Interstate 95 and south of Old Dixie Highway at the Plantation Bay community in Flagler County, Florida ("system").

4. The Department finds that the Plantation Bay Water System is in exceedance of the maximum contaminant level (MCL) for total trihalomethanes.

Having reached a resolution of the matter, Respondent and the Department mutually agree and it is,

ORDERED:

5. Respondent shall comply with the following actions within the stated time periods.

a. Obtain all required permits; complete the modification of the system's treatment processes and/or the installation of new treatment processes that will ensure compliance with the MCLs for all Disinfection Byproducts (including, but not limited to, total trihalomethanes); and begin operation of the new or modified system by December 31, 2004.

6. Respondent agrees to pay the Department stipulated penalties in the amount of $100 per day for each and every day Respondent fails to timely comply with any of the requirements of paragraph 5 of this Consent Order. A separate stipulated penalty shall be assessed for each violation of this Consent Order. Within 30 days of written demand from the Department, Respondent shall make payment of the appropriate stipulated penalties to "The Department of Environmental Protection" by cashier's check or money order and shall include thereon the OGC number assigned to this Consent Order and the notation "Ecosystem Management and Restoration Trust Fund". Payment shall be sent to the Department of Environmental Protection, 7825 Baymeadows Way, Suite 200B, Jacksonville, Florida 32256. The Department may make demands for payment at any time after violations occur. Nothing in this paragraph shall prevent the Department from filing suit to specifically enforce any of the terms of this Consent Order.

7. If any event, including administrative or judicial challenges by third parties unrelated to the Respondent, occurs which causes delay or the reasonable likelihood of delay, in complying with the requirements of this Consent Order, Respondent shall have the burden of proving the delay was or will be caused by circumstances beyond the reasonable control of the Respondent and could not have been or cannot be overcome by Respondent's due diligence.

Economic circumstances shall not be considered circumstances beyond the control of Respondent, nor shall the failure of a contractor, subcontractor, materialman or other agent (collectively referred to as "contractor") to whom responsibility for performance is delegated to meet contractually imposed deadlines be a cause beyond the control of Respondent, unless the cause of the contractor's late performance was also beyond the contractor's control. Upon occurrence of an event causing delay, or upon becoming aware of a potential for delay, Respondent shall notify the Department orally within 24 hours or by the next working day and shall, within seven calendar days of oral notification to the Department, notify the Department in writing of the anticipated length and cause of the delay, the measures taken or to be taken to prevent or minimize the delay and the timetable by which Respondent intends to implement these measures. If the parties can agree that the delay or anticipated delay has been or will be caused by circumstances beyond the reasonable control of Respondent, the time for performance hereunder shall be extended for a period equal to the agreed delay resulting from such circumstances. Such agreement shall adopt all reasonable measures necessary to avoid or minimize delay. Failure of Respondent to comply with the notice requirements of this Paragraph in a timely manner shall constitute a waiver of Respondent's right to request an extension of time for compliance with the requirements of this Consent Order.

8. Persons who are not parties to this Consent Order but whose substantial interests are affected by this Consent Order have a right, pursuant to Sections 120.569 and 120.57, Florida Statutes, to petition for an administrative hearing on it. The Petition must contain the information set forth below and must be filed (received) at the Department's Office of General Counsel, 3900 Commonwealth Boulevard, MS-35, Tallahassee, Florida 32399-3000, within 21 days of receipt of this notice. A copy of the Petition must also be mailed at the time of filing to the District Office named above at the address indicated. Failure to file a petition within the 21 days constitutes a waiver of any right such person has to an administrative hearing pursuant to Sections 120.569 and 120.57, Florida Statutes.

The petition shall contain the following information:

(a) The name, address, and telephone number of each petitioner; the Department's Consent Order identification number and the county in which the subject matter or activity is located; (b) A statement of how and when each petitioner received notice of the Consent Order; (c) A statement of how each petitioner's substantial interests are affected by the Consent Order; (d) A statement of the material facts disputed by petitioner, if any; (e) A statement of facts which petitioner contends warrant reversal or modification of the Consent Order; (f) A statement of which rules or statutes petitioner contends require reversal or modification of the Consent Order; (g) A statement of the relief sought by petitioner, stating precisely the action petitioner wants the Department to take with respect to the Consent Order.

If a petition is filed, the administrative hearing process is designed to formulate agency action. Accordingly, the Department's final action may be different from the position taken by it in this Notice. Persons whose substantial interests will be affected by any decision of the Department with regard to the subject Consent Order have the right to petition to become a party to the proceeding. The petition must conform to the requirements specified above and be filed (received) within 21 days of receipt of this notice in the Office of General Counsel at the above address of the Department. Failure to petition within the allowed time frame constitutes a waiver of any right such person has to request a hearing under Sections 120.569 and 120.57, Florida Statutes, and to participate as a party to this proceeding. Any subsequent intervention will only be at the approval of the presiding officer upon motion filed pursuant to Rule 28-106.205, Florida Administrative Code.

A person whose substantial interests are affected by the Consent Order may file a timely petition for an administrative hearing under Sections 120.569 and 120.57, Florida Statutes, or may choose to pursue mediation as an alternative remedy under Section 120.573, Florida Statutes, before the deadline for filing a petition. Choosing mediation will not adversely affect the right to a hearing if mediation does not result in a settlement. The procedures for pursuing mediation are set forth below.

Mediation may only take place if the Department and all the parties to the proceeding agree that mediation is appropriate. A person may pursue mediation by reaching a mediation agreement with all parties to the proceeding (which include the Respondent, the Department, and any person who has filed a timely and sufficient petition for a hearing) and by showing how the substantial interests of each mediating party are affected by the Consent Order. The agreement must be filed in (received by) the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida 32399-3000, within 10 days after the deadline as set forth above for the filing of a petition.

The agreement to mediate must include the following:

(a) The names, addresses, and telephone numbers of any persons who may attend the mediation;

(b) The name, address, and telephone number of the mediator selected by the parties, or a provision for selecting a mediator within a specified time;

(c) The agreed allocation of the costs and fees associated with the mediation;

(d) The agreement of the parties on the confidentiality of discussions and documents introduced during mediation;

(e) The date, time, and place of the first mediation session, or a deadline for holding the first session, if no mediator has yet been chosen;

(f) The name of each party's representative who shall have authority to settle or recommend settlement; and

(g) Either an explanation of how the substantial interests of each mediating party will be affected by the action or proposed action addressed in this notice of intent or a statement clearly identifying the petition for hearing that each party has already filed, and incorporating it by reference.

(h) The signatures of all parties or their authorized representatives.

As provided in Section 120.573, Florida Statutes, the timely agreement of all parties to mediate will toll the time limitations imposed by Sections 120.569 and 120.57, Florida Statutes,

for requesting and holding an administrative hearing. Unless otherwise agreed by the parties, the mediation must be concluded within sixty days of the execution of the agreement. If mediation results in settlement of the administrative dispute, the Department must enter a final order incorporating the agreement of the parties. Persons whose substantial interests will be affected by such a modified final decision of the Department have a right to petition for a hearing only in accordance with the requirements for such petitions set forth above, and must therefore file their petitions within fourteen days of receipt of this notice. If mediation terminates without settlement of the dispute, the Department shall notify all parties in writing that the administrative hearing processes under Sections 120.569 and 120.57, Florida Statutes, remain available for disposition of the dispute, and the notice will specify the deadlines that then will apply for challenging the agency action and electing remedies under those two statutes.

9. Entry of this Consent Order does not relieve Respondent of the need to comply with applicable federal, state or local laws, regulations or ordinances.

10. The terms and conditions set forth in this Consent Order may be enforced in a court of competent jurisdiction pursuant to Sections 120.69 and 403.121, Florida Statutes. Failure to comply with the terms of this Consent Order shall constitute a violation of Section 403.859, Florida Statutes.

11. Respondent is fully aware that a violation of the terms of this Consent Order may subject Respondent to judicial imposition of damages, civil penalties up to $5,000.00 per day per violation, and criminal penalties.

12. Respondent shall allow all authorized representatives of the Department access to the property and facility at reasonable times for the purpose of determining compliance with the terms of this Consent Order and the rules and statutes of the Department.

13. All submittals and payments required by this Consent Order to be submitted to the Department shall be sent to the Florida Department of Environmental Protection, 7825 Baymeadows Way, Suite B200, Jacksonville, Florida 32256.

14. The Department hereby expressly reserves the right to initiate appropriate legal action to prevent or prohibit any violations of applicable statutes, or the rules promulgated thereunder that are not specifically addressed by the terms of this Consent Order.

15. The Department, for and in consideration of the complete and timely performance by Respondent of the obligations agreed to in this Consent Order, hereby waives its right to seek judicial imposition of damages or civil penalties for alleged violations addressed in this Consent Order.

16. Respondent acknowledges and waives its right to an administrative hearing pursuant to Sections 120.569 and 120.57, Florida Statutes, on the terms of this Consent Order. Respondent acknowledges its right to appeal the terms of this Consent Order pursuant to Section 120.68, Florida Statutes, and waives that right upon signing this Consent Order.

17. No modifications of the terms of this Consent Order shall be effective until reduced to writing and executed by both Respondent and the Department.

18. In the event of a sale or conveyance of the facility or of the property upon which the facility is located, if all of the requirements of this Consent Order have not been fully satisfied, Respondent shall, at least 30 days prior to the sale or conveyance of the property or facility, (1) notify the Department of such sale or conveyance, (2) provide the name and address of the purchaser, or operator, or person(s) in control of the facility, and (3) provide a copy of this Consent Order with all attachments to the new owner. The sale or conveyance of the facility, or the property upon which the facility is located shall not relieve the Respondent of the obligations imposed in this Consent Order.

19. This Consent Order is a settlement of the Department's civil and administrative authority arising under Florida law to resolve the matters addressed herein. This Consent Order is not a settlement of any criminal liabilities that may arise under Florida law, nor is it a settlement of any violation that may be prosecuted criminally or civilly under federal law.

20. This Consent Order is a final order of the Department pursuant to Section 120.52(7), Florida Statutes, and it is final and effective on the date filed with the Clerk of the

Department unless a Petition for Administrative Hearing is filed in accordance with Chapter 120, Florida Statutes. Upon the timely filing of a petition this Consent Order will not be effective until further order of the Department.

FOR THE RESPONDENT

DATE: 12/31/03

NAME

TITLE VICE PRES

DONE AND ORDERED this _____ day of _____, 200_, in Jacksonville, Florida.

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION

_____
Mario L. Taylor
District Director

FILING AND ACKNOWLEDGEMENT FILED, on this date, pursuant to §120.52 Florida Statutes, with the designated Department Clerk, receipt of which is hereby acknowledged.

_____ _____
Clerk **Date**

Copies furnished to:
Larry Morgan

Department of Environmental Protection

Jeb Bush
Governor

Northeast District
7825 Baymeadows Way, Suite B200
Jacksonville, Florida 32256-7590

David B. Struhs
Secretary

January 14, 2003

CERTIFIED MAIL – RETURN RECEIPT

Mr. Douglas Ross, Vice President
Plantation Bay Utlity Company
100 Plantation Bay Drive
Ormond Beach, Florida 32174

Flagler County - Potable Water
Plantation Bay Utility WS // PWS# 2184251
WARNING LETTER No.WL03-0004-PW-18-NED

Dear Mr. Ross:

The purpose of this letter is to advise you of possible violations of law for which you might be responsible and to seek your cooperation in resolving this matter. A review of your records indicates that violations of the Florida Statutes and the Florida Administrative Code may exist at the above referenced facility. During the records review, the following were noted:

1. The 90th percentile result for lead in the July-December 2002 monitoring round was 23 micrograms per liter.

2. Only five or six of the eight locations that are required to be sampled during each round of monitoring, were sampled during the July-December 2000; the January-June 2001; and the January-June and July-December 2002 monitoring rounds.

Chapter 62, Florida Administrative Code, provides that:

1. Rule 62-550.800 sets the Lead Action Level at 15 micrograms per liter.

2. Rule 62-550.800 requires that Lead and Copper Tap Samples be collected from the sites located in the approved Sample Plan.

You are requested to contact Emerson Raulerson at (904) 807-3304 within fifteen (15) days of receipt of this warning letter to arrange a meeting to discuss this matter. The Department is interested in reviewing any facts you may have that will assist in determining whether any violations have occurred. You may bring anyone with you to the meeting that could help resolve this matter.

Please be advised that this Warning Letter is part of an agency investigation, preliminary to agency action in accordance with section 120.57(4), Florida Statutes. We look forward to your cooperation in completing the investigation and resolution of this matter.

Sincerely:

for Jerry M. Owen, P.E.
Water Facilities Administrator

JMO:EDC:ECR:er

Enforcement File

cc: Flagler County Health Department
Finley Engineering Group

Department of Environmental Protection

Jeb Bush
Governor

Northeast District
7825 Baymeadows Way, Suite B200
Jacksonville, Florida 32256-7590

David B. Struhs
Secretary

January 13, 2003

Mr. Douglas Ross, Vice President
Plantation Bay Utility Company
100 Plantation Bay Drive
Ormond Beach, Florida 32174

Flagler County - PW
Plantation Bay WTP
PWS ID # 2184251
Lead and Copper Tap Sampling: July– December 2002

Dear Mr. Ross:

I have reviewed the lead and copper tap sampling results for the above-referenced monitoring period. Unfortunately, the results show a large exceedance of the Lead Action Level. You are therefore required to provide written notification to all customers that the water may be leaching excessive amounts of lead out of their plumbing and/or faucets. This notification must also indicate the adverse health effects of lead exposure and what actions can be taken to reduce their risk of exposure. Also, a copy of the notification must be provided to this office along with written certification (by you) that the notices were delivered as required. Finally, **the next lead and copper tap sampling is required between January and June of this year.**

On a related issue, two of the eight locations that should be sampled during each round of sampling were once again not sampled. Due to this, as well as to the new lead action level exceedance, **this letter will be followed up with a Warning Letter**.

If you have any questions, please contact me by telephone at (904) 807-3304 or by e-mail at Emerson.Raulerson@DEP.STATE.FL.US.

Sincerely,

Emerson C. Raulerson, P.E.
Drinking Water Section

EDC:BRR:ECR:ecr

Lead and Copper File

cc: Finley Engineering Group

PLANTATION BAY UTILITY COMPANY, INC.
List of Field Employees, Duties, Responsibilities
and Method of Salary Allocation

Plantation Bay Utility Company, Inc. does not have any employees. The operation and maintenance of the water and wastewater systems is performed by a contract plant operator, Wetherall Treatment Systems, under separate contracts for the respective systems. Costs are charged by specific identification.

PLANTATION BAY UTILITY COMPANY, INC.
List of Vehicles Owned or Leased by the Utility

Plantation Bay Utility Company, Inc. does not own or lease any vehicles. Therefore, this requirement is not applicable.

2004
PLANTATION BAY UTILITY COMPANY
#6 - Letter of April 14, 2005

Customer calls and disposition 2004

DATE	NAME	ADDRESS	REASON CALLED	DISPOSITION
19-May	Joan Smythe	25 Magnolia N.	sediment in her water	Glenn Wetherell took sample/water ok
25-May	Harry Gersh	1223 Hampstead	water smells like mothballs/ red stain in toilet bowl	Glenn flushed the lines in area
10-Jun	Joan Smythe	25 Magnolia N.	Ring in toilet bowl/sediment in her water	Glenn took sample of her water/tested ok
14-Jun	Lily Danner	823 Westlake	Low water pressure	Hydrant being repaired
24-Jun	Irene Anderson	1244 Hampstead	resident getting some dirt out of faucet	Glenn took sample/water tested ok
23-Jul	Bill Stewart	1096 Hampstead	Low water pressure at kitchen sink	Glenn reported faucet aerator needed cleaning
2-Sep	Mrs. Dellaselva	44 Meadowbrook	Grease on top of bath water	Glenn found no grease/recommended a flush valve for the area.
22-Nov	Charlie Miller	6 Jasmine Run	Water tastes like chlorine	Flushed hydrants in area
22-Dec	Gerda Hudson	1261 Crown Pt	Water is cloudy/sediment in her water	Glenn took sample/water ok
22-Dec	Mrs. Mims	4 Magnolia No.	asked about cloudy water; is it safe to drink?	Explained we were flushing the lines

Received Time Jul.12. 3:07PM