State of Florida



Hublic Serbice Commission

CAPITAL CIRCLE OFFICE CENTER • 2540 SHUMARD OAI 16 ULE 27 D PM 1: 34
TALLAHASSEE, FLORIDA 32399-0850

-M-E-M-O-R-A-N-D-U-M-

COMMISSION CLERK

DATE:

July 27, 2011

TO:

Ann Cole, Commission Clerk, Office of Commission Clerk

FROM:

Robert Simpson, Engineering Specialist II, Division of Economic Regulation

RE:

Docket No. 110130-WS; Application for staff-assisted rate case in Lake County by

Shangri-La By The Lake Utilities, Inc.

Attached are responses from the Utility regarding the June 8, 2011 letter which requested engineering information from Shangri-La By the Lake Utilities, Inc. Please place the attached documents in the docket file.

Should you have any questions, regarding this matter, please contact me.

Attachments

DOCUMENT NUMBER-DATE

05220 JUL 27 =

COMMISSIONERS: ART GRAHAM, CHAIRMAN LISA POLAK EDGAR RONALD A. BRISE EDUARDO E. BALBIS JULIE I. BROWN





MARSHALL WILLIS, DIRECTOR DIVISION OF ECONOMIC REGULATION (850) 413-6900

COMMIS COMMIS

Hublic Service Commission

June 8, 2011

Shangri-La By the Lake Utilities, Inc.

Attn: Jay R. Werner 1214 W IL Route 72 Leaf River, IL 61047

Re: Docket No. 110130-WS; Application for staff-assisted rate case in Lake County by Shangri-La by the Lake Utilities, Inc.

Dear Werner:

This letter is to confirm my telephone conversation with you regarding my planned engineering field investigation on July 21, 2011. In order to ensure fast, expedient treatment of your rate case, please have the following information submitted to the Commission on or before July 12, 2011.

- 1. A copy of all Department of Environmental Protection (DEP) Permits.
- 2. A copy of all Discharge Monitoring Reports filed with the DEP for the period beginning in April 1, 2010 through May 2011.
- 3. A copy of Monthly Operating Reports filed with the DEP for the period beginning in April 1, 2010 through May 2011.
- 4. A copy of all wastewater treatment plant flow measuring device calibration reports for the past three years.
- 5. A copy of all water treatment plant flow measuring device calibration reports for the past three years.
- 6. A copy of all correspondence, inspection reports, notices of violation, or consent orders from DEP in the past three years.
- 7. A schedule showing the amount of water sold each month from April 2010 through May 2011.
- 8. A list of all customer complaints received during the past three years and an explanation of how each was resolved.

DOCUMENT NO. DATE

- 9. A description of all assets (land, treatment facilities, pumps, storage tanks, water distribution system, collection systems, and lift stations) owned by the utility.
- 10. A map showing the location and size of the water distribution system throughout the service area. The location of all existing customers (residential and general service), and the location of all vacant lots.
- 11. A description of any planned or future expansion of your service area.
- 12. A map showing the location and size of the wastewater collection system throughout the service area. The location of all existing customers (residential and general service), and the location of all vacant lots.
- 13. A description of any plant additions or repairs that have been made in the past year along with the cost and reason for the addition or repair. If the additions or repairs are in response to a DEP or health department compliance requirement, provide a copy of the supporting documentation.
- 14. A description of any plant additions or repairs that are expected to be made in the next year, along with the estimated cost and reason for the addition or repair. The cost should include at least 2 bids to support the addition or repair. If the additions or repairs are in response to a DEP or health department compliance requirement, provide a copy of the supporting documentation.
- 15. A list of all general service customers and their type of businesses.

Please submit the following information on or before July 12, 2011, to the Office of Commission Clerk, Docket No. 110130-WS, Florida Public Service Commission, 2540 Shumard Oak Blvd., Tallahassee, Florida 32399-0850.

On July 21, 2011, I will inspect the water and wastewater treatment plants, the water distribution and collection systems, and the general service area. Please have someone (lead operator, chief maintenance person, or an assigned person with access to the plants) available for this tour. If you have any questions, do not hesitate to contact me at (850) 413-7001.

Sincerely,

Robert Simpson

Engineering Specialist

Bureau of Certification, Economics & Tariff.

RS:

Cc: Division of Economic Regulation (Hudson, Fletcher, Maurey, Daniel)

Office of General Counsel (Harris)

Martin S. Friedman

Office of Commission Clerk

Shangri-La By The Lake Utilities, Inc.

Business Manager: Jay E. Werner 1214 West Route 72 Leaf River, IL 61047 (815) 738-2508 telephone & fax

e-mail: jaylaura6@msn.com

Site Manager:
Andrew Werner
100 Shangri-La Blvd.
Leesburg, FL 34788
(800) 682-7744
telephone & fax

July 7, 2011

Florida Public Service Commission Bureau of Certification, Economics Attn: Robert Simpson Capital Circle Office Center 2540 Shumard Oak Blvd. Tallahassee, Fl. 32399-0850

Re: Docket No. 110130-WS

Re. Docket No. 110130-

Via UPS Next Day Delivery

Dear Mr. Simpson:

We have compiled the requested information to the best of our ability. We have not diligently kept our records in order. I asked the DEP and our engineer to help us produce some of the requests. Some of the requests we only have partial information on. #1 we cannot find our permit for water from the DEP; we do have the one issued from St. Johns Water Management District. #9 we have a lot of undetermined water and sewer lines. We have asked the Florida Rural Water Association to help us, and we would appreciate if the PSC could guide us on this requirement. And #13 I don't think we had any DEP non-compliance repair issues. It seems that some of the DEP letter referenced dates may be off by a year.

These items we do not have any files on: #5 we haven't checked this meter in about 5 years. #8 we have a small service area, no formal office, and Andrew is usually in the area all day. Also Andrew lives close by and everyone has his phone number. Complaints come to us verbally and we answer them when they come in. And #11 we don't plan to expand our service area.

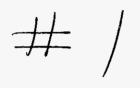
If there is more information required, or better explanations needed, please contact me. Phone numbers are 815-738-2508 house, fax, and answering machine; 815-708-3342 mobile; or e-mail jaylaura6@msn.com.

Sincerely,

Jay E. Werner

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Enclosures





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

Colleen M. Castille Secretary

October 31, 2006

Paul Buchanan 129 Lakeshore Drive Leesburg, Florida 34748

Attention: Paul Buchanan, Trustee

Lake County - PW Shangri-La-By-The-Lake Eagles Point Subdivision Phase 2

Dear Mr. Buchanan:

This acknowledges receipt of certification that the subject water distribution system extension has been completed in accordance with the plans and related materials permitted by this agency on Permit Number WD35-0080550-005 dated August 15, 2006 and that the system has passed the pressure and bacteriological tests that were conducted in accordance with the AWWA Standards.

Based on this certification and satisfactory bacteriological results, we are clearing the system for service.

The responsibility for the microbiological quality of the water at the time it ultimately reaches the consumer's meter remains entirely with the utility and/or the owner/operator of the system who should ensure that this quality remains as represented by the bacteriological test results presented. This letter of clearance does not preclude the need for obtaining acceptance by other entities as may be required.

Sincerely,

Kyle M. Kubanek, E.I.

Engineer III

Drinking Water Permitting

KMK

cc: Kevin L. Atchley, P.E.

Andrew Werner

DEP Compliance/Enforcement

3523600496@fax1.dep.state.fl.us; 3525897744@fax1.dep.state.fl.us; kevin@wallingengineering.com



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

Colleen M. Castille Secretary

Notification of Use of General Permit

SENT BY E-MAIL

Permittee: Paul Buchanan

Utility: Shangri-La-By-The-Lake

Engineer: Kevin L. Atchley, P.E., Walling Engineering, Inc.

Permit Number: WD35-0080550-005

Project Name: Eagles Point Subdivision Phase 2

County: Lake

Location: Forest Lake Road 0.7 miles south of County Road 44

Project Description: 24 lot residential subdivision

To the Permittee: Paul Buchanan

In response to your request, this document is to advise you that the Department has received your notice of intent to use a general permit as provided in Chapter 62-555, Florida Administrative Code (F.A.C.), to construct a water distribution system extension and is not at this time objecting to your use of such general permit. Please be advised that you are required to abide by all conditions in Chapters 62-4, 62-550, 62-555, the general requirements for general permits, and Rule 62-555.405, F.A.C.

A LETTER OF CLEARANCE MUST BE ISSUED BY THE DEPARTMENT PRIOR TO PLACEMENT OF THIS PROJECT INTO SERVICE. FAILURE TO DO SO WILL RESULT IN THE PERMITTEE BEING SUBJECT TO APPROPRIATE ENFORCEMENT ACTION.

To obtain the clearance letter, the engineer-of-record must submit a "Request for Letter of Release to Place Water Supply System into Service" [DEP Form 62-555.900(9), F.A.C.] (attached), a copy of this letter and satisfactory bacteriological test results (with chlorine residuals indicated) taken on two consecutive days from the following locations:

a. the point of connection to the existing main

b. lots 4 and 15

Water sample forms must indicate specific recommended sample locations <u>and</u> file number above. Permit expiration date is 5 years from the date of issuance.

Richard S. Lott, P.G., P.E.

(Richard & Lott

Manager - Drinking Water Program

Date: August 15, 2006

RSL/kmk

3523600496@fax1.dep.state.fl.us; 3525897744@fax1.dep.state.fl.us; kevin@wallingengineering.com

"More Protection, Less Process"



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

Colleen Castille Secretary

NOTICE OF PERMIT ISSUANCE

CERTIFIED MAIL 7005 0390 0002 0084 3777

SHANGRI-LA BY THE LAKE UTILITIES INC 100 SHANGRI-LA BOULEVARD LEESBURG FL 34788

ATTENTION ANDREW R WARNER
MANAGER

Lake County - DW Shangri-La By The Lake WWTF

Enclosed is Permit Number FLA010521 to operate a domestic wastewater facility issued under Section(s) 403.087 and 403.0885 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 of the Florida Statutes before the deadline for filing a petition. 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 of the 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.

Petitions by the applicant or any of the parties 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) of the 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) of the 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 within the appropriate time period shall constitute a waiver of that person's right to request an administrative determination (hearing) under sections 120.569 and 120.57 of the Florida Statutes. Any subsequent intervention (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 of the 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.

A petition that does not dispute the material facts on which the Department's action is based shall state that no such facts are in dispute and otherwise shall contain the same information as set forth above, as required by rule 28-106.301.

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.

Mediation under section 120.573 of the Florida Statutes is not available for this proceeding.

This action is final and effective on the date filed with the Clerk of the Department unless a petition is filed in accordance with the above. Upon the timely filing of a petition this order will not be effective until further order of the Department.

Any party to the order has the right to seek judicial review of the order under section 120.68 of the Florida Statutes, by the filing of a notice of appeal under rule 9.110 of the Florida Rules of Appellate Procedure with the Clerk of the Department in the Office of General Counsel, Mail Station 35, 3900 Commonwealth Boulevard, Tallahassee, Florida, 32399-3000; and by filing a copy of the notice of appeal accompanied by the applicable filing fees with the appropriate district court of appeal. The notice of appeal must be filed within 30 days from the date when the final order is filed with the Clerk of the Department.

Executed in Orlando, Florida.

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

Dennise Judy Program Manager Domestic Waste

3319 Maguire Boulevard, Suite 232

Orlando, FL 32803-3767 Phone: (407) 894-7555

Date: September 19, 2006

FILED, on this date, pursuant to Section 120.52, F. S., with the designated Department Clerk, receipt of which is hereby acknowledged.

Clerk September 22, 2006

Date

DJ/aet/cs/ply

Enclosures: Permit and DMR

Copies furnished to:
Compliance Section (via e-mail)
Groundwater Section (via e-mail)
Lake County Water Resource Management (via e-mail: mbowers@co.lake.fl.us)
Kenneth Wicks, P.E. (via e-mail: admin@wicksconsulting.com)

CERTIFICATE OF SERVICE

This is to certify that this NOTICE OF PERMIT ISSUANCE and all copies were mailed before close of business on September 22, 2006 to the listed persons, by



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

Colleen Castille Secretary

STATE OF FLORIDA DOMESTIC WASTEWATER FACILITY PERMIT

PERMITTEE:

Shangri-La By The Lake Utilities, Inc.

PERMIT NUMBER: FL.

FLA010521 FLA010521-003-DW3P

PA FILE NUMBER: ISSUANCE DATE: EXPIRATION DATE:

September 22, 2006 September 12, 2011

RESPONSIBLE AUTHORITY:

Mr. Andrew R. Werner Manager 100 Shangri-La Boulevard Leesburg, FL 34788

(352) 589-7744

FACILITY:

Shangri-La By The Lake WWTF 100 Shangri-La Boulevard Leesburg, FL 34788 Lake County

Lake County

Latitude: 28° 51' 38" N Longitude: 81° 45' 29" W

This permit is issued under the provisions of Chapter 403, Florida Statutes (F.S.), and applicable rules of the Florida Administrative Code (F.A.C.). The above named permittee is hereby authorized to operate the facilities shown on the application and other documents attached hereto or on file with the Department and made a part hereof and specifically described as follows:

TREATMENT FACILITIES:

An existing 0.050 million gallon per day (mgd) annual average daily flow (AADF) permitted capacity step aeration activated sludge domestic wastewater treatment plant consisting of aeration, secondary clarification, chlorination and aerobic digestion of residuals.

REUSE:

Land Application: An existing 0.050 MGD AADF permitted capacity slow-rate restricted public access system (R-001). R-001 consists of a sprayfield with a total wetted area of 3.2 acres having a capacity of 0.050 MGD located approximately at latitude 28° 51′ 38" N, longitude 81° 45′ 29" W. There is a 0.080 acre backup rapid infiltration basin for wet weather conditions with a permit capacity of 0.013 mgd located approximately at latitude 81° 51′ 38" N, longitude 81° 45′ 29" W.

IN ACCORDANCE WITH: The limitations, monitoring requirements and other conditions set forth in Pages 1 through 13 of this permit.

FACILITY:

Shangri-La By The Lake WWTF

PERMITTEE:

Shangri-La By The Lake Utilities, Inc.

PERMIT NUMBER: EXPIRATION DATE:

FLA010521

September 12, 2011

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 authoriz System R-001 (Sprayfield + backup RIB). Such reclaimed water shall be limited and monitored by the permittee as specified with condition I.B.6:

		1	Reclaimed Wat	er Limitation	s	Monitoring Requirements		
Parameter	Units	Max/Min	Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequency	Sample Type
Flow (Total Flow)1	MGD	Maximum	0.050	_	-	-	5 Days/Week	Meter
Flow (Backup RIB) ²	MGD	Maximum	0.013	-	-	-	5 Days/Week	Meter
BOD, Carbonaceous 5 day, 20C	MG/L	Maximum	20.0	30.0	45.0	60.0	Monthly	Grab
Solids, Total Suspended	MG/L	Maximum	20.0	30.0	45.0	60.0	Monthly	Grab
pH	SU	Range	-	-	-	6.0 to 8.5	5 Days/Week	Grab
Coliform, Fecal	#/100 ML	Maximum	See Permit Condition I.A.4.			Monthly	Grab	
Total Residual Chlorine (For Disinfection)	MG/L	Minimum	-	-	-	0.5	5 Days/Week	Grab

¹ Total Flow (Sprayfield + Backup RIB)

² Backup RIB for wet weather conditions

FACILITY: Shangri-La By The Lake WWTF PERMIT NUMBER: FLA010521
PERMITTEE: Shangri-La By The Lake Utilities, Inc. EXPIRATION DATE: September 12, 2011

2. Reclaimed water samples shall be taken at the monitoring site locations listed in Permit Condition I. A. 1. and as described below:

Monitoring Location Site Number	Description of Monitoring Location
EFA-1	Chlorine contact chamber effluent
FLW-1	Effluent flow meters

- 3. Flow meter shall be utilized to measure flow and calibrated at least annually. [62-601.200(17) and .500(6)]
- 4. The arithmetic mean of the monthly fecal coliform values collected during an annual period shall not exceed 200 per 100 mL of reclaimed water sample. The geometric mean of the fecal coliform values for a minimum of 10 samples of reclaimed water, each collected on a separate day during a period of 30 consecutive days (monthly), shall not exceed 200 per 100 mL of sample. No more than 10 percent of the samples collected (the 90th percentile value) during a period of 30 consecutive days shall exceed 400 fecal coliform values per 100 mL of sample. Any one sample shall not exceed 800 fecal coliform values per 100 mL of sample. Note: To report the 90th percentile value, list the fecal coliform values obtained during the month in ascending order. Report the value of the sample that corresponds to the 90th percentile (multiply the number of samples by 0.9). For example, for 30 samples, report the corresponding fecal coliform number for the 27th value of ascending order. [62-610.410 and 62-600.440(4)(c)]
- 5. A minimum of 0.5 mg/L total residual chlorine must be maintained for a minimum contact time of 15 minutes based on peak hourly flow. [62-610.410 and 62-600.440(4)(b)]

FACILITY: Shangri-La By The Lake WWTF PERMIT NUMBER: FLA010521

PERMITTEE: Shangri-La By The Lake Utilities, Inc. EXPIRATION DATE: September 12, 2011

I. RECLAIMED WATER AND EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS (cont.)

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 shapermittee as specified below and reported in accordance with condition I.B.6:

				Limita			Monitoring Requir		
Parameter	Units	Max/Min	Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequency	Sample Type	
BOD, Carbonaceous 5 day, 20C	MG/L	Maximum	Report	-	-	-	Annually	Grab	
Solids, Total Suspended	MG/L	Maximum	Report	. -	-	-	Annually	Grab	
Percent Capacity, (TMADF/Permitted Capacity) x 100	PER CENT	Maximum	-	Report	-	-	Monthly	Calculated	

FACILITY: Shangri-La By The Lake WWTF PERMIT NUMBER: FLA010521
PERMITTEE: Shangri-La By The Lake Utilities, Inc. EXPIRATION DATE: September 12, 2011

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
FLW-1	Effluent flow meters
INF-1	Raw influent to aeration tank

- 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 to assure compliance with applicable water quality standards and effluent limitations in accordance with 40 CFR (Code of Federal Regulations) Part 136. All monitoring shall be representative of the monitored activity. [62-620.320(6)]
- 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 Central 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	first day of month - last day of	28 th day of following month
Toxicity	month	
Quarterly	January 1 - March 31	April 28
	April 1 – June 30	July 28
•	July 1 – September 30	October 28
	October 1 – December 31	January 28
Semiannual	January 1 – June 30	July 28
	July 1 – December 31	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 Central District Office at the address specified in Permit Condition I.B. 7 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. 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, Lake County Water Resource Management and the Department's Central District Office at the address specified below:

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

Phone Number - (407) 894-7555 FAX Number - (407) 897-2966

All FAX copies shall be followed by original copies. All reports and other information shall be signed in accordance with the requirements of Rule 62-620.305, F.A.C. [62-620.305]

FACILITY: Shangri-La By The Lake WWTF PERMIT NUMBER: FLA010521

PERMITTEE: Shangri-La By The Lake Utilities, Inc. EXPIRATION DATE: September 12, 2011

II. RESIDUALS MANAGEMENT REQUIREMENTS

 The method of residuals use or disposal by this facility is transport to Central Process Residuals Management Facility (RMF) 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

- 1. Date and Time Shipped
- 2. Amount of Residuals Shipped
- 3. Degree of Treatment (if applicable)
- Name and ID Number of Residuals Management Facility or Treatment Facility
- 5. Signature of Responsible Party at Source Facility
- 6. Signature of Hauler and Name of Hauling Firm

Residuals Management Facility or Treatment Facility

- 1. Date and Time Received
- 2. Amount of Residuals Received
- 3. Name and ID Number of Source Facility
- 4. Signature of Hauler
- Signature of Responsible Party at Residuals Management Facility or Treatment Facility

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

Section III is not applicable to this facility.

IV. ADDITIONAL REUSE AND LAND APPLICATION REQUIREMENTS

Part II Slow-Rate/Restricted Access System(s) (R-001)

- 1. Advisory signs shall be posted around the site boundaries to designate the nature of the project area. [62-610.418(1)]
- 2. Routine aquatic weed control and regular maintenance of storage pond embankments and access areas are required. [62-610.414(8)]

FACILITY: Shangri-La By The Lake WWTF PERMIT NUMBER: FLA010521
PERMITTEE: Shangri-La By The Lake Utilities, Inc. EXPIRATION DATE: September 12, 2011

3. The annual average hydraulic loading rate to the sprayfield with a total wetted area of 3.2 acres shall be limited to a maximum of 3.0 inches per week. The annual average hydraulic loading rate to the back-up rapid infiltration basin shall be limited to a maximum of 40.0 inches per week. The hydraulic loading rate shall not produce surface runoff or ponding of the applied reclaimed water. [62-610.423(3) and (4)]

- 4. The crops or vegetation shall be periodically harvested and removed from the project area. [62-610.310(3)(d) and 62-610.419(1)(b)]
- 5. Dairy cattle whose milk is intended for human consumption shall not be allowed on the project area for a period of 15 days after the last application of reclaimed water. No restrictions are imposed on the grazing of other cattle. [62-610.425]
- 6. Irrigation of edible food crops is prohibited. [62-610.426]
- 7. Overflows from emergency discharge facilities on storage ponds shall be reported as an abnormal event to the Department's Central 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 II, Class C facility and, at a minimum, operators with appropriate certification must be on the site as follows:

A Class C or higher operator 1/2 hour/day for 5 days/week and one visit each weekend. The lead operator must be a Class C operator, or higher.

[62-620.630(3)] [62-699.310] [62-610.462]

- 2. 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)]
- 3. The application to renew this permit shall include an updated capacity analysis report prepared in accordance with Rule 62-600.405, F.A.C. [62-600.405(5)]
- 4. The application to renew this permit shall include a detailed operation and maintenance performance report prepared in accordance with Rule 62-600.735, F.A.C. [62-600.735(1)]
- 5. The permittee shall maintain the following records and make them available for inspection on the site of the permitted facility:
 - a. Records of all compliance monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation and a copy of the laboratory certification showing the certification number of the laboratory, for at least three years from the date the sample or measurement was taken;
 - b. Copies of all reports required by the permit for at least three years from the date the report was prepared;
 - c. Records of all data, including reports and documents, used to complete the application for the permit for at least three years from the date the application was filed;
 - d. Monitoring information, including a copy of the laboratory certification showing the laboratory certification number, related to the residuals use and disposal activities for the time period set forth in Chapter 62-640, F.A.C., for at least three years from the date of sampling or measurement;
 - e. A copy of the current permit;
 - f. A copy of the current operation and maintenance manual as required by Chapter 62-600,. F.A.C.;

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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]

VI. SCHEDULES

Section VI is not applicable to this facility.

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. The permittee shall apply for renewal of this permit at least 180 days before the expiration date of the permit using the appropriate forms listed in Rule 62-620.910, F.A.C., including submittal of the appropriate processing fee set forth in Rule 62-4.050, F.A.C. The existing permit shall not expire until the Department has taken final action on the application renewal in accordance with the provisions of 62-620.335(3) and (4), F.A.C. [62-620.335(1)-(4)]
- 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
 - Which are solid or viscous and obstruct flow or otherwise interfere with wastewater facility operations or treatment;
 or
 - d. Which result in the wastewater temperature at the introduction of the treatment plant exceeding 40°C or otherwise inhibiting treatment; or

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PERMITTEE: Shangri-La By The Lake Utilities, Inc. EXPIRATION DATE: September 12, 2011

e. Which result in the presence of toxic gases, vapors, or fumes that may cause worker health or safety problems. [62-604.130(5)]

- 7. The treatment facility, storage ponds, rapid infiltration basins, and/or infiltration trenches shall be enclosed with a fence or otherwise provided with features to discourage the entry of animals and unauthorized persons. [62-610.418(1)] [and 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 verbal notice to the Department 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 in a written report within 7 days of the sinkhole discovery. [62-4.070(3)]
- 10. The permittee shall provide adequate notice to the Department of the following:
 - a. Any new introduction of pollutants into the facility from an industrial discharger which would be subject to Chapter 403, F.S., and the requirements of Chapter 62-620, F.A.C. if it were directly discharging those pollutants; and
 - b. Any substantial change in the volume or character of pollutants being introduced into that facility by a source which was identified in the permit application and known to be discharging at the time the permit was issued.

Adequate notice shall include information on the quality and quantity of effluent introduced into the facility and any anticipated impact of the change on the quantity or quality of effluent or reclaimed water to be discharged from the facility.

[62-620.625(2)]

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(7), 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)]

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Shangri-La By The Lake Utilities, Inc. PERMITTEE: **EXPIRATION DATE:** September 12, 2011

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)]

- 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)]
- 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)]
- 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:
 - 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;
 - Inspect the facilities, equipment, practices, or operations regulated or required under this permit; and
 - 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 and the Department of Environmental Protection Guide to Wastewater Permitting at least 90 days before construction of any planned substantial modifications to the permitted facility is to commence or with Rule 62-620.325(2) 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), or as specified elsewhere in the permit.
 - 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. Except as specifically provided in Rule 62-160.300, F.A.C., any laboratory test required by this permit shall be performed by a laboratory that has been certified by the Department of Health Environmental Laboratory Certification Program (DOH ELCP). Such certification shall be for the matrix, test method and analyte(s) being measured to comply with this permit. For domestic wastewater facilities, testing for parameters listed in Rule 62-160.300(4), F.A.C., shall be conducted under the direction of a certified operator.
 - e. Field activities including on-site tests and sample collection shall follow the applicable standard operating procedures described in DEP-SOP-001/01 adopted by reference in Chapter 62-160, F.A.C.
 - f. Alternate field procedures and laboratory methods may be used where they have been approved in accordance with 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)]
- 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:

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 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,
- 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:
 - 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
 - i) 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. 17., 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

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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;
 - 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 burden of proof for establishing the occurrence of an upset rests with the permittee.
- 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 Orlando, Florida.

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

Dennise Judy Program Manager Domestic Waste

DATE: September 19, 2006



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DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

PERMITTEE NAME: MAILING ADDRESS: Werner & Werner, Inc.

100 Shangri-La Boulevard

Leesburg, FL 34788

PERMIT NUMBER: FLA010521

LIMIT: CLASS SIZE Final N/A

REPORT: GROUP:

Monthly Domestic

FACILITY:

Shangri-La-By-The-Lake WWTF 100 Shangri-La Boulevard

LOCATION: Leesburg, FL MONITORING GROUP NUMBER:

NO DISCHARGE FROM SITE:

R-001 and Influent

COUNTY:

Lake

MONITORING PERIOD

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Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.		Sample Type
Flow, to sprayfield	Sample Measurement	0.008		mgd					0	5 days/week	meter
PARM Code 50050 Y	Permit Requirement	- 0.05 (An.Avg.)		mgd		- XX 11 X	14			5 days/week	meter
Flow, to sprayfield	Sample Measurement	0.007		mgd	10 (8)8				0	5 days/week	meter
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BOD, Carbonaceous 5 day, 20C	Sample Measurement				7.4			mg/l	0	monthly	grab
PARM Code 80082 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Permit Requirement	3			20.0 (An.Avg.)			mg/l		monthly	grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement				5.0	5.0	100	mg/l	٥	monthly	grab
PARM Code 80082 1 Mon.Site No. EFA-1	Permit:		THE PERSON NAMED IN		Report (Mo.Avg.)	60.0 (Max.)		mg/l	15 Apr.	monthly	grab
Solids, Total Suspended	Sample Measurement				4.2			mg/l	0	monthly	grab
PARM Code 00530 Y Mon.Site No. EFA-I	Permit Requirement			1 - 4 C	20.0 (An.Avg.)			mg/l		monthly	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 AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas M. Felton/Operator		3527872493	10/05/05

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attackment

Version 8/24/2001

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME:

Shangri-La-By-The-Lake WWTF

PERMIT NUMBER: FLA010521 MONITORING PERIOD From: MONITORING GROUP No.:

April
2

R-001 and Influent

2010

Through 30 April

Ouantity or Loading Units Quality or Concentration Units No. Frequency of Sample Type Parameter Analysis Ex. Solids, Total Suspended Sample monthly grab mg/l 2.8 2.8 Measurement Report 60.0 PARM Code 00530 Permit . mg/l monthly grab Mon.Site No. EFA-1-Requirement (Mo.Avg.) (Max.) Sample 5 days/week grab pH S.U. 0 7.2 7.4 Measurement 6.0 8.5 PARM Code 00400 - 1 Permit s.u. 5 days/week grab Mon.Site No. EFA-1 Requirement (Min.) (Max.) Coliform, Fecal #/100ml Sample monthly grab 41 Measurement PARM Code 74055 Y Permit 200 #/100ml monthly grab Mon.Site No. EFA-1 Requirement ? (An.Avg.) Coliform, Fecal Sample #/100ml monthly grab 41 41 Measurement PARM Code 74055 Permit. 800 Report #/100ml monthly grab Mon.Site No. EFA-1 Requirement (Mo.Geo.Mean) (Max.) Total Residual Chlorine (For Sample 5 days/week mg/l grab 0 1.0 Disinfection) Measurement 0.5 PARM Code 50060 A Permit mg/l 5 days/week grab Mon.Site No. EFA-1 Requirement (Min.) Percent Capacity, (TMADF/Permitted Sample % monthly calculated 0 18 Capacity) x 100 Measurement PARM Code 00180 1 Permit-Report % monthly calculated Mon Site No. EFF-1 Requirement BOD, Carbonaceous 5 day, 20C Sample MNR mg/l annually grab 0 Measurement PARM Code 80082 G Permit ... Report mg/l annually grab Mon.Site No. INF-1 Requirement Solids, Total Suspended Sample mg/l annually grab MNR 0 Measurement PARM Code 00530 G Permit -Report mg/l : annually grab Mon Site No. INF-1 Requirement Sample Measurement Permit Requirement Sample Measurement Permit Requirement

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010521 Facility: Shangri-La-By-The-Lake WWTF

Monitoring Period From: 1 2010 through 30 April 2010

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	Flow (x 1000) gallons Sprayfield	Flow (x1000) gallons percolation pond	CBOD5 (mg/l)	TSS (mg/l)	pH (s.u.)	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)					
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Total	331											\
Mo. Avg.	~	T										<u> </u>

PLANT STAFFING: Name: T Levi Certificate No: 012637 Day Shift Operator Class: Certificate No: 012240 Name: <u> G Митау</u> **Evening Shift Operator** Class: Name: 009314 J Bethea Night Shift Operator Class: Certificate No: Certificate No: 002817 Name: T Felton Lead Operator Class:

See us on the web at : http://www.tri-techlabs.com

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri-La

TTA Contact: T. Lal

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	TECH:
04/01/10	10-04-054-1	04/01/10 1230	CBOD TSS Effluent	5210B 160.2	5.0 2.8	mg/L mg/L	* 04/06/10 1300	DB DB
04/01/10	10-04-054-2	04/01/10 1230	Fecal Coliform Effluent	SM 9222D	ΙU	cfu's/100mls	04/01/10 1650	DB

*CBOD

Date & Time Setup: <u>04/02/10 0900</u>

Date & Time Read: 04/07/10 1030

U - Material was analyzed for but not detected;

The value reported is the minimum detection limit.

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By : Temera Las

Title : Quality Control Director

Date Reviewed: April 13, 2010

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DOH #E83294

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mai	this report to: Department of Environmental Protection, Centra	al District, 3319 Maguire Boulevard Su	ne 232, Orlando, FL, 32803-3767		
	: Shangri-La By The Lake Utilities, Inc. S: 100 Shangri-La Boulevard	PERMIT NUMBER	FLA010521	Expiration Date:	September 12, 2011
	Leesburg, FL 34788	LIMIT:	Final	REPORT:	Monthly
		CLASS SIZF	N/A	GROUP:	Domestic
FACILITY:	Shangri-La By The Lake WWTF				
LOCATION:	100 Shangri-La Boulevard	MONITORING GROUP	R-001		
		NUMBER:			
	Leesburg, FL 34788	MONITORING GROUP DESC:	Sprayfield, including Influent		

COUNTY:

Lake

NO DISCHARGE FROM

SITE:

				MONITOR	ING PERIOD	From. 1 Y Nu	2010 through	<u> </u>	1 Mg	2010	
Parameter		Quantity or	Loading	Units	Qua	lity or Concentr	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Total Flow) ^t	Sample Measurement	0.008		mgd					0	5 days/week	meter
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0.050 (An.Avg.)		mgd						5 days/week	meter
Flow (Total Flow)	Sample Measurement	0.007		mgd					0	5 days/week	meter
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)		mgd						5 days/week	meter
Flow (Backup RIB) ²	Sample Measurement	Ð		mgd					٥	5 days/week	meter
PARM Code 50050 P Mon.Site No. FLW-1	Permit Requirement	0.013 (An.Avg.)		mgd						5 days/week	meter
Flow (Backup RIB)	Sample Measurement	0		mgd					0	5 days/week	meter
PARM Code 50050 Q Mon.Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)		mgd						5 days/week	meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement				7.4			mg/l	0	monthly	grab
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement				20.0 (An.Avg.)			mg/l		monthly	grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement				8-0	8-0		mg/l	٥	monthly	grab
PARM Code 80082 A Mon.Site No. EFA-1	Permit Requirement		····		Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	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.

T.P. I.	NAME/TITLE OF AUTHORIZED AGENT	SIGNATURE OF AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
	T Felton/operator		352-787-2493	10/06/06

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

Total Flow (Sprayfield + Backup RIB)

² Backup RIB for wet weather conditions

DEP Form 62-620.910(10), Effective November 29, 1994

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Shangri-La By The Lake WWTF

MONITORING GROUP

PERMIT NUMBER: FLA010521

NUMBER:

NUMBER:
MONITORING PERIOD From 1 May 2010 through: 31 May 2010

Parameter	Quantity or Loading		Units	Quali	ality or Concentration		Units		Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			4.2			mg/l	0	monthly	Grab
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)			mg/l		monthly	Grab
Solids, Total Suspended	Sample Measurement			1.8	1.8		mg/l	0	monthly	Grab
PARM Code 00530 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	Grab
pH	Sample Measurement			7.3	7.4		su	0	5 days/week	Grab
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement			6.0 (Min.)	8.5 (Max.)		su		5 days/week	Grab
Coliform, Fecal	Sample Measurement			∠ (#/100ml	٥	monthly	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Requirement			200 (An.Avg.)			#/100ml		monthly	Grab
Coliform, Fecal	Sample Measurement			~ 1	<1		#/100ml	0	monthly	Grab
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Geo.Mean)	800 (Max.)		#/100ml		monthly	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.8			mg/l	٥	5 days/week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement			0.5 (Min.)			mg/l	<u> </u>	5 days/week	Grab
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement		78.06	17			%	٥	monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Requirement		-	Report			%		monthly	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement			mnr	,		mg/l	٥	annually	Grab
PARM Code 80082 Y Mon.Site No. INF-1	Permit Requirement		ļ	Report (An.Avg.)			mg/l		annually	Grab
Solids, Total Suspended	Sample Measurement			MNR			mg/l	δ	annually	Grab
PARM Code 00530 Y Mon.Site No. INF-1	Permit Requirement			Report (An.Avg.)			mg/i		annually	Grab
	Sample Measurement									
	Permit Requirement									

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010521
Monitoring Period from: 1 Facility: Shangri-La By The Lake WWTF 2010 through: 31 May 2010 TRC (For CBOD5 Fecal pH (SU) TSS (MG/L) Flow (MG/L) Coliform Disinfect.) X1000 Bacteria (MG/L) gallons (#/100ML) 74055 Code 80082 00400 00530 50060 50050 Mon. Site EFA-1 EFA-1 EFA-1 EFA-1 EFA-1 FLW-1 12 2 0٠١ 12 3 1. (4 1-8 (.) 8.0 41 9 5 79 1.2 6 1.3 10 7 8 9 1-6 10 1.3 9 11 1.2 12 1.6 7 13 2.2 14 2.2 6 1.5 9 16 9 [7 1.0 18 19 [.] 20 0.8 21 1.0 6 22 23 1.0 24 1.2 25 7.4 1.0 26 7.4 27 7.4 1.0 28 29 3 <u> 3</u> 30 1.0 7.4 31 1.1 Total 206 Mo. Avg. PLANT STAFFING: Day Shift Operator Class: Certificate No: 0012637 T Levi Name: **Evening Shift Operator** Class: 0014107 Certificate No: Name: D Harris Night Shift Operator Class: Certificate No: 0012240 Name: G Murray Lead Operator Class: 0002817 Certificate No: T Felton Name:

See us on the web at : http://www.tri-techlabs.com

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri-La

TTA Contact: T. Lal.

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	TECH:
05/04/10	10-05-047-1	05/04/10 1200	CBOD TSS Effluent	5210B 160.2	8.0 1.8	mg/L mg/L	* 05/06/10 0845	DB DB
05/04/10	10-05-047-2	05/04/10 1200	Fecal Coliform Effluent	SM 9222D	ΙŪ	cfu's/100mls	05/04/10 1150	DB

*CBOD

Date & Time Setup: 05/04/10 1545

Date & Time Read : $05/09/10 \ 1400$

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

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By : Tomara Lal

Title : Quality Control Director

Date Reviewed: May 10, 2010

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DOH #E83294

PAGE 1 OF 2

		DEPAI	RTMENT OF I	ENVIRONMEN	NTAL PRO	TECTION DE	SCHARGE MU	INTTORING R	EPOKI -	PAR	1 A	
When Completed mail	this report	to: Department	of Environmental I	rotection, Central I	District, 3319	Maguire Boulevard	Suite 232, Orlando,	FL, 32803-3767				
PERMITTEE NAME:	Shangri-I	a By The Lake	Utilities, Inc.		PERMIT N	UMBER	FLA010521		Expiratio	n Date:	Septemb	er 12, 2011
MAILING ADDRESS		gri-La Boulevard , FL 34788	d		LIMIT: CLASS SIZ	ZE:	Final N/A		REPORT: GROUP:		Monthly Domesti	
FACILITY: LOCATION:		La By The Lake gri-La Boulevar			MONITOR NUMBER	ING GROUP	R-001					•
	Leesburg	, FL 34788			· -	ING GROUP DESC	Sprayfield, in	cluding Influent				
COUNTY:	Lake				SITE:	IARGE FROM	From: 1 June	2010 through	30 C	Jone	• 2010	
Parameter			Quantity	or Loading	Units		lity or Concentra	ntion	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Total Flow)1		Sample Measurement	0.008		mgd					٥	5 days/week	meter
PARM Code 50050	Υ	Permit	0.050		mgd				1		5 days/week	meter

			MONITOR	ING PERIOD F	rom: 1 JUNE	<u>2010</u> through:	000		20.0	
Parameter		Quantity or Loading		Units Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
Flow (Total Flow) ¹	Sample Measurement	0.008	mgd					0	5 days/week	meter
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0.050 (An.Avg.)	mgd						5 days/week	meter
Flow (Total Flow)	Sample Measurement	0.006	mgd	' '				0	5 days/week	meter
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)	mgd				-		5 days/week	meter
Flow (Backup RIB) ²	Sample Measurement	0.008	mgd					0	5 days/week	meter
PARM Code 50050 P Mon.Site No. FLW-1	Permit Requirement	0.013 (An.Avg.)	mgd						5 days/week	meter
Flow (Backup RIB)	Sample Measurement	0.006	mgd	- 11 . 41 11 1				0	5 days/week	meter
PARM Code 50050 Q Mon.Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)	mgd						5 days/week	meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement	(Montes)		7.4			mg/i	٥	monthly	grab
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)			mg/l		monthly	grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			9.0	9.0		mg/l	0	monthly	grab
PARM Code 80082 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	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 unprisonment for knowing violations.

NAME/TITLE OF AUTHORIZED AGENT	SIGNATURE OF AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
T Felton/operator		352-787-2493	10/07/07

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

¹ Total Flow (Sprayfield + Backup RIB)

² Backup RIB for wet weather conditions DEP Form 62-620.910(10), Effective November 29, 1994

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Shangri-La By The Lake WWTF

MONITORING GROUP

R-001

PERMIT NUMBER: FLA010521

NUMBER.

MONITORING PERIOD

From: 1 June 2010 through: 30 June 2010

Parameter		Quantity or Loading Units			Quality or Concentration				Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			4.4			mg/l	٥	monthly	Grab
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)			mg/l		monthly	Grab
Solids, Total Suspended	Sample Measurement			30.6	30.6		mg/l	0	monthly •	Grab
PARM Code 00530 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	Grab
pH	Sample Measurement			7.3	7.4		su	Ò	5 days/week	Grab
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement			6.0 (Min.)	8.5 (Max.)	-	su		5 days/week	Grab
Coliform, Fecal	Sample Measurement			41			#/100ml	0	monthly	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Requirement			200 (An.Avg.)			#/100ml		monthly	Grab
Coliform, Fecal	Sample Measurement			<1	41		#/100ml	0	monthly	Grab
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Geo.Mean)	800 (Max.)		#/100ml		monthly	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.8			mg/l	0	5 days/week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement			0.5 (Min.)			mg/l		5 days/week	Grab
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement			13			%	0	monthly	Calculated
PARM Code 00180 1 Mon. Site No. FLW-1	Permit Requirement			Report			%		monthly	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement			MNR			mg/l	٥	annually	Grab
PARM Code 80082 Y Mon.Site No. INF-1	Permit Requirement			Report (An.Avg.)			mg/l		annually	Grab
Solids, Total Suspended	Sample Measurement			MNR			mg/l	0	annually	Grab
PARM Code 00530 Y Mon.Site No. INF-1	Permit Requirement			Report (An.Avg.)			mg/l		annually	Grab
	Sample Measurement									
	Permit Requirement									

DAILY SAMPLE RESULTS - PART B Facility: Shangri-La By The Lake WWTF Permit Number: FLA010521 _2010 through: 30 June 2010 Monitoring Period from: 1_ pH (SU) TSS (MG/L) TRC (For CBOD5 Fecal Flow Disinfect.) X1000 (MG/L) Coliform gallons (MG/L) Bacteria (#/100ML) 50060 50050 74055 00400 00530 Code 80082 EFA-I EFA-1 EFA-1 EFA-1 FLW-1 Mon. Site EFA-1 1.0 1 2 1.2 7 3 3 4 5 1.0 6 7. Y 7 1.1 9.0 8 41 30.6 2 16 9 1.0 10 1.1 3 11 12 13 1.0 14 1. (15 9 10 16 0.8 9 17 1.0 18 1.2 19 20 1. (ş 21 10 22 7.4 23 1.4 24 7. Y 1. 0 25 1.2 26 27 1.2 7.4 28 1.2 29 7.Y 1.0 30 ን. 4

PLANT STAFFING: Day Shift Operator	Class:	С	Certificate No:	0012637	Name:	T Levi
Evening Shift Operator	Class:	A	Certificate No:	0014107	Name:	D Harris
Night Shift Operator	Class:	_C	Certificate No:	0012240	Name:	G Мштау
Lead Operator	Class:	С	Certificate No:	0002817	Name:	T Felton

31 Total Mo. Avg

See us on the web at : http://www.tri-techlabs.com

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri-La

TTA Contact: T. Lal

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	TECH:
06/08/10	10-06-261-1	06/08/10 1130	CBOD TSS Effluent	5210B 160.2	9.0 30.6	mg/L mg/L	* 06/09/10 0900	DB DB
06/08/10	10-06-261-2	06/08/10 1130	Fecal Coliform Effluent	SM 9222D	1 U	cfu's/100mls	06/08/10 1620	DB

*CBOD

Date & Time Setup: <u>06/08/10 1630</u>

Date & Time Read: 06/13/10 1400

U - Material was analyzed for but not detected;

The value reported is the minimum detection limit.

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By : James Las

Title : Quality Control Director

Date Reviewed: June 24, 2010

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY! DOH #E83294

When Completed mail t	his report	to: Department	of Environmental P	rotection, Centra	al District, 3319	Maguire Boulevard	Suite 232, Orlando,	FL, 32803-3767				
PERMITTEE NAME: MAILING ADDRESS:					PERMIT N	UMBER	FLA010521		Expiration	n Date:	: Sept	ember 12, 2011
MANDE OF THE SEC.		FL 34788			LIMIT: CLASS SIZ	Œ:	Final N/A		REPORT: GROUP:		Mon Don	thly restic
FACILITY: LOCATION:		a By The Lake \ gri-La Boulevard			MONITOR NUMBER:	ING GROUP	R-001					
	Leesburg,	FL 34788	_			ING GROUP DESC	C: Sprayfield, in	cluding Influent				
COUNTY:	Lake				SITE:	ARGE FROM	From: 1 July	1 2010 through	31 (Tul.	9 2010	
Parameter			Quantity of	or Loading	Units		lity or Concentra		Units	No. Ex.	Frequency of Analysis	of Sample Type
Flow (Total Flow) ¹		Sample Measurement	800.0		mgd					٥	5 days/weel	k meter
	y . P	Permit Requirement	0.050 (An.Avg.)		mgd	· · · · · · ·					5 days/wee	k meter
Mon.Site No. FLW-I Flow (Total Flow)		Sample Measurement	6.007		mgd	***-				٥	5 days/wee	k meter
PARM Code 50050 Mon Site No. FLW-1	1	Permit Requirement	Report (Mo.Avg.)		mgd			:			5 days/wee	k meter
Flow (Backup RIB) ²		Sample Measurement	Ð		mgd					٥	5 days/wee	k meter
PARM Code 50050 Mon,Site No. FLW-1	P	Permit Requirement	0.013 (An.Avg.)		mgd						5 days/wee	k meter
Flow (Backup RIB)	<u> </u>	Sample Measurement	e -	_	mgd	·				٥	5 days/wee	k meter
PARM Code 50050 Mon.Site No. FLW-1	Q -	Permit Requirement	Report (Mo.Avg.)		mgd						5 days/wee	k meter
BOD, Carbonaceous 5 o	lay, 20C	Sample Measurement				٦.(mg/l	٥	monthly	grab
PARM Code 80082 Mon.Site No. EFA-1	Y	Permit Requirement				20.0 (An.Avg.)			mg/l		monthly	grab
BOD, Carbonaceous 5	day, 20C	Sample Measurement				6.0	6.0		mg/l	۵	monthly	grab
PARM Code 80082 Mon.Site No. EFA-1	A	Permit Requirement				Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	grab
l certify under penalty o the information submitte knowledge and belief, tr	ed. Based o	on my inquiry of	the person or perso	ons who manage	the system, or th	or supervision in a	y responsible for eat	bering the informat	ion, the info	rmation	submitted is,	to the best of my
NAME/TITLE OF AUTHO				-		AUTHORIZE AG						DATE (YY/MM/DD)
T Felton/operator	•									352	-787-2493	10/08/08
COMMENT AND EXP Total Flow (Sprayfield			LATIONS (Referen	nce all attachmen	nts							
² Backup RIB for wet w												

DEP Form 62-620.910(10), Effective November 29, 1994

FACILITY:

Shangri-La By The Lake WWTF

MONITORING GROUP

R-001

PERMIT NUMBER: FLA010521

NUMBER:
MONITORING PERIOD From: 1 July 2010 through: 31 July 2010

Parameter		Quantity or	Loading	Units	Qual	ity or Concentrat	ion	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement				6.5			mg/l	0	monthly	Grab
PARM Code 00530 Y	Permit Requirement				20.0 (An.Avg.)			mg/l		monthly	Grab
Mon.Site No. EFA-1 Solids, Total Suspended	Sample				2.2	2.2		mg/l	٥	monthly	Grab
PARM Code 00530 A	Measurement Permit				Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	Grab
Mon.Site No. EFA-1 DH	Requirement Sample				7.3	7, 4		su	0	5 days/week	Grab
PARM Code 00400 A Mon Site No. EFA-1	Measurement Permit Requirement		· · · · · · · · · · · · · · · · · · ·		6.0 (Min.)	8.5 (Max.)	······································	su	1	5 days/week	Grab
Coliform, Fecal	Sample Measurement				<1			#/100ml	0	monthly	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Requirement				200 (An.Avg.)			#/100ml		monthly	Grab
Coliform, Fecal	Sample Measurement				41	<		#/100ml	٥	monthly	Grab
PARM Code 74055 A Mon Site No. EFA-L	Permit Requirement				Report (Mo Geo Mean)	800 (Max.)		#/100ml		monthly	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.8			mg/l	٥	5 days/week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement			7	0.5 (Min.)			mg/l		5 days/week	Grab
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				13			%	٥	monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Requirement				Report	(14.17) 1		%		monthly	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement				MNR			mg/l	٥	annually	Grab
PARM Code 80082 Y Mon.Site No. INF-1	Permit Requirement				Report (An Avg.)			mg/l		annually	Grab
Solids, Total Suspended	Sample Measurement				MNR			mg/l	0	annually	Grab
PARM Code 00530 Y Mon.Site No. INF-1	Permit Requirement				Report (An Avg.)			mg/l		annually	Grab
	Sample Measurement										
	Permit Requirement										

Permit Number: FLA010521 Facility: Shangri-La By The Lake WWTF 2010 through: 31 July from: 1 Tul 2010 Monitoring Period CBOD5 pH (SU) TSS (MG/L) Fecal TRC (For Flow (MG/L) Coliform Disinfect.) X1000 Bacteria (MG/L) gallons (#/100ML) Code 80082 74055 00400 00530 50060 50050 Mon. Site EFA-1 EFA-1 EFA-1 EFA-1 EFA-1 FLW-1 1 1.0 Y 2 15 7.3 3 5 4 7.4 1.4 5 5 ገ.ሃ 1.6 6 ۷(2.2 6.0 1.4 7 1.0 8 1,0 9 ID 5 10 10 11 10 1.0 12 9 1.1 13 0.8 14 7.4 1.0 15 ገ.ሃ 1.3 16 7.Y 1.1 6 17 18 7.3 1.0 19 7.3 1.2 20 7.3 1.0 21 ን. Y 1.1 9 22 10 23 1.2 6 24 11 25 ገ.ሃ 10 12 26 1.1 27 7.4 10 1.0 28 1.2 29 ን.ሃ 1.0 30 31 Total Mo. Avg. PLANT STAFFING: Day Shift Operator Class: Certificate No: 0012637 T Levi Name: **Evening Shift Operator** Class: Α Certificate No: 0014107 Name: D Harris C Night Shift Operator Class: Certificate No: 0012240 Name: G Murray

0002817

T Felton

Name:

Class:

Lead Operator

C Certificate No:

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri-La

TTA Contact: T. Lal

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	TECH:
07/06/10	10-07-073-1	07/06/10 1130	CBOD TSS Effluent	5210B 160.2	6.0 2.2	mg/L mg/L	* 07/12/10 0900	DB DB
07/06/10	10-07-073-2	07/06/10 1130	Fecal Coliform Effluent	SM 9222D	ΙU	cfu's/100mls	07/06/10 1605	RP

*CBOD

Date & Time Setup: <u>07/07/10 1615</u>

Date & Time Read: 07/12/10 1400

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

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By : Jemana Zel

Title : Quality Control Director

Date Reviewed: July 14, 2010

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DOH #E83294

PAGE 1 OF 2

Final

REPORT:

Monthly

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, FL, 32803-3767 PERMITTEE NAME: Shangri-La By The Lake Utilities, Inc. PERMIT NUMBER FLA010521 **Expiration Date:** September 12, 2011 MAILING ADDRESS: 100 Shangri-La Boulevard

Leesburg, FL 34788 CLASS SIZE: N/A GROUP: Domestic Shangri-La By The Lake WWTF FACILITY:

NO DISCHARGE FROM

100 Shangri-La Boulevard MONITORING GROUP R-001 LOCATION:

NUMBER:

MONITORING GROUP DESC: Sprayfield, including Influent Leesburg, FL 34788

SITE:

LIMIT:

				MONITOR	RING PERIOD	From: 1 Aug	2010 through	: 31 £	w	7 . 2010	
Parameter		Quantity o	r Loading	Units	Qua	lity or Concentr		Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Total Flow) ¹	Sample Measurement	0-008		mgd					0	5 days/week	meter
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0:050 (An Avg.)	Section in a grant to the section of	mgđ	and the second of the second o		900 9			5 days/week	meter
Flow (Total Flow)	Sample Measurement	0-008		mgd					٥	5 days/week	meter
PARM Code 50050 1 Mon Site No. FLW-1	Permi Requirement	Report (Mo Avg.)	호텔(1997년 1997년 - 1997년) 1984년 1984년 - 1987년 -	mgd						5 days/week	meter
Flow (Backup RIB) ²	Sample Measurement	0.008		mgd					٥	5 days/week	meter
PARM Code 50050 P Mon Site No. ELW-1	Permit Requirement	0.013 (An.Avg.)		mgd	en de la companya de					5 days/week	ncter
Flow (Backup RIB)	Sample Measurement	0.008		mgd					٥	5 days/week	meter
PARM Code 50050 Q Mon.Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)		mgd						5 days/week	mcler
BOD, Carbonaceous 5 day, 20C	Sample Measurement				7.2			mg/l	0	monthly	grab
PARM Code 80082 Y Mon Site No. EFA-I	Pennit Requirement				20.0 (An.Avg.)		1	mg/l		monthly	grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement				8-0	8.0		mg/l	0	monthly	grab
PARM Code 80082 A Mon Site No. EPA-1	Permit Requirement				Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	grāb

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 AUTHORIZED AGENT	SIGNATURE OF AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
T Felton/operator		352-787-2493	10/09/4

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

COUNTY:

Lake

¹ Total Flow (Sprayfield + Backup RIB)

² Backup RIB for wet weather conditions DEP Form 62-620.910(10), Effective November 29, 1994

FACILITY:

Shangri-La By The Lake WWTF

. MONITORING GROUP

R-001

PERMIT NUMBER: FLA010521

NUMBER:

MONITORING PERIOD

From: 1 Aug. 2010 through: 31 Aug. 2010

Sonas, roam saspense	Sample								Ex.	Analysis	
l	Measurement				6.5			mg/l	0	monthly	Grab
	Permit Requirement				20.0 (An.Avg.)			mg/l	127	monthly	Grab
Solids, Total Suspended S	Sample Measurement				۷١.٥	Z1.0		mg/l	٥	monthly	Grab
PARM Code 00530 A	Permit Requirement				Report (Mo.Avg.)	60.0 (Max.)	Angle	mg/l		njonthly	Grab
pH	Sample Measurement				7.3	7.4		su	0	5 days/week	Grab
PARM Code 00400 A	Permit Requirement				6.0 (Min.)	8.5 (Max.)		su		S dâyş/week	Grab
Coliform, Fecal	Sample Measurement	<u> </u>		A 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	۷۱			#/100ml	0	monthly	Grab
PARM Code 74055. Y	Permit Requirement				.200 (An Avg.)			#/100ml		monthly	. Grab
Coliform, Fecal	Sample Measurement				41	21		#/100ml	0	monthly	Grab
PARM Code 74055 A	Permit Requirement	### 27 64 154 154 154 154 155 155 155 155 155 15	- 1985 - 1995 - 1995		Report (Mo Geo Mean)	800 (Max.)		#/100ml	149.9° 140.9°	monthly	Grab
Total Residual Chlorine (For	Sample Measurement	<u> </u>			0-8			mg/l	0	5 days/week	Grab
PARM Gode 50060 A	Permit Requirement				0.5 (Min.)		## ### #### ### ######################	mg/l		5 days/week	Grab
Percent Capacity, (TMADF/	Sample Measurement				15			%	0	monthly	Calculated
PARM Code 00180	Permit Requirement				Report			%		monthly	© Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement	, , , , , , , , , , , , , , , , , , , ,			MNR			mg/l	0	annually	Grab
PARM Code 80082 - Y	Permit Requirement				Report (An Avg.)			mg/l		annoally	Grab
Solids, Total Suspended	Sample Measurement				MNR			mg/l	0	annually	Grab
PARM Code 00530 Y Mon Site No. INF-1	Permit Requirement Sample				Report (An.Avg.)			mg/l		annually	Grab
	Measurement Permit Requirement			Narl-							

Permit Number: FLA010521

Monitoring Period from: 1 2010 through: 3 (Aug. 2010 Facility: Shangri-La By The Lake WWTF

_			1		1			 	
	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TSS (MG/L)	TRC (For Disinfect.) (MG/L)	Flow X1000 gallons			
Code	80082	74055	00400	00530	50060	50050		 	
Mon. Site	EFA-1	EFA-I	EFA-1	EFA-1	EFA-1	FLW-1			
1			7.4		1.6	10			
2			7.4		(.2	8		 	
3			7.4		1-0	ے م			
4			7.4		1.3	9			
5	8-0	<(7.4	<1.0	1.5	5			
6			7.4		1.2	5			
7						9			
8			7.4		0-8	10			
9			7.4		1-6	7		<u> </u>	
10			ገ. ያ		0.9	ي			
11			7, Ý		1.0	11			
12			7.4		0.8	5			
13			7.3		1.0	11		 	
14			_			8			
15			7.4		0.8	8			
16			7. 3		0.9	6			
17			7, 4		1.0	6		 	
18			7.4		1.2	(1		 <u> </u>	
19			J. Y		1.0	13			
20			7, 4		1.1	4			
21						9			
22			7.4		1.0	10			
23		,	ો.પ		1.2	3			
24			7.4		1.4	8		 	
25			ገ. ሃ		1.0	8		 	
26			7.4		1.2	8			
27			7.4		1.4	i			
28						ų			
29			7.4		1.0	5			
30			7,4		1.2	5			
31			7.4		1.0	11			
Total	****				1.0	236			
Mo. Avg.						8	91		

PLANT STAFFING: Day Shift Operator	Class:	_C	Certificate No:	0012637	Name:	T Levi
Evening Shift Operator	Class:	_A	Certificate No:	0014107	Name:	D Harris
Night Shift Operator	Class:	С	Certificate No:	0012240	Name:	G Murray
Lead Operator	Class:	С	Certificate No:	0002817	Name:	T Felton

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri-La

TTA Contact: T. Lal

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	ТЕСН:
08/05/10	10-08-173-1	08/05/10 1315	CBOD TSS Effluent	5210B 160.2	8.0 1.0 U	mg/L mg/L	* 08/08/10 1015	DB DB
08/05/10	10-08-173-2	08/05/10 1315	Fecal Coliform Effluent	SM 9222D	1 U	cfu's/100mls	08/05/10 1600	RP

*CBOD

Date & Time Setup: <u>08/05/10 1600</u>

Date & Time Read : 08/10/10 1430

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

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By : Jamere Las

Title : Quality Control Director

Date Reviewed: August 18, 2010

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DOH #E83294

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

PERMITTEE NAME: Shangri-La By The Lake Utilities, Inc. PERMIT NUMBER FLA010521 Expiration Date: September 12, 2011

MAILING ADDRESS: 100 Shangri-La Boulevard
Leesburg, FL 34788 LIMIT: Final REPORT: Monthly

Leesburg, FL 34788

LIMIT: Final REPORT: Monthly
CLASS SIZE: N/A GROUP: Domestic
FACILITY: Shangri-La By The Lake WWTF

100 Shangri-La Boulevard MONITORING GROUP R-001 NUMBER:

Leesburg, FL 34788 MONITORING GROUP DESC: Sprayfield, including Influent

COUNTY: Lake NO DISCHARGE FROM SITE:

Parameter		Ouantitus	- I andina				2010 through		-		C1- T
r arameter		Quantity o	or Loading	Units	Qua	lity or Concentr	ation	Units	No. Ex.	Frequency of	Sample Type
Flow (Total Flow) ¹	Sample Measurement	0.008		mgd					0	Analysis 5 days/week	meter
PARM Code 50050 Y Mon Site No. FLW-1	Permit Regunement	0.050 (An.Avg.)	in and a second	mgđ				- 1655		5 days/week	Bleier
Flow (Total Flow)	Sample Measurement	0.007		mgd		3			0	5 days/week	meter
PARM Code 50050 1 Mon Site No. FLW-1	Permits Requirements	Réport (Mø:Ayg:)		mgd						5 days/week	meter
Flow (Backup RIB) ²	Sample Measurement			mgd	· · · · · · · · · · · · · · · · · · ·				0	5 days/week	meter
PARM Code 50050 P Mon.Site No. FLW-1	Permu Recourrement	0,013 (An.Ayg.)		mgď			Y			5 days/week	nieleg
Flow (Backup RIB)	Sample Measurement			mgd					0	5 days/week	meter
PARM Code 50050 Q Mon Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)		mgd			Z.			5 days/week	mëler:
BOD, Carbonaceous 5 day, 20C	Sample Measurement				7.2			mg/l	6	monthly	grab
PARM Côde 80082 Y Môn Site No. EFA-1	Përmi Requirement	ing (S. 1995)		617.72765.75	20.0 (An.Avg.)			ng/l	Americani, Taking Maja	monthly	enb.
BOD, Carbonaceous 5 day, 20C	Sample Measurement			277. 2 1	8.0	0.8	ga sec	mg/l	ට	monthly	grab
PARM Code 80082 A. Mon Sile No. EFA-1	Permi			/	Report (Mo.Avg.)	66.0 (Max.)-		mg/l		monthly	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 AUTHORIZED AGENT	SIGNATURE OF AUTHORIZED AGENT	TELEPHONE NO	Diam and and and
T Felton/operator	JOHN TOWN AND AND AND AND AND AND AND AND AND AN	TELEPHONE NO	DATE (YY/MM/DD)
1 renon/operator		352-787-2493	10/11/10
		~	110//0//0
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all	l attachments here)		

¹ Total Flow (Sprayfield + Backup RIB)

LOCATION:

² Backup RIB for wet weather conditions DEP Form 62-620.910(10), Effective November 29, 1994

FACILITY:

Shangri-La By The Lake WWTF

MONITORING GROUP

R-001

PERMIT NUMBER: FLA010521

NUMBER:

MONITORING PERIOD

From: 1 Sept . 2010 through: 30 Sept . 2010

Parameter		Quantity o	r Loading	Units	Qua	lity or Concentra	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement				6.4			mg/l	0	monthly	Grab
PARM Code 00530 Y Mon Site No. EPAL	Permit Requirement				20.0 (An.Ayg.)			mg/l	4	positaly	Grab
Solids, Total Suspended	Sample Measurement				1.2			mg/l	6	monthly	Grab
PARM Code 00536 A: Mon Site No: BEA_1	Permit Requirement				Report (Mo.Avg.)	60.0 (Max.)		mg/l	42414	monthly	Grab
pН	Sample Measurement				7.3	7.5		su	0	5 days/week	Grab
PARM Code 01400 A Mgn Site Ng. EFA. F	Permit Requirement				60 - 3 (Min.)	8.5 (Max.)		SU.	*	S daysweek	Grab
Coliform, Fecal	Sample Measurement		_		۷۱			#/100ml	0	monthly	Grab
PARM Gode 74055 YC Mon. Site No. EEA-H	Permit Requirement				200 (Åñ Avg.)			#/100m1		monthly	Стаб
Coliform, Fecal	Sample Measurement				1	1		#/100ml	Ó	monthly	Grab
PARM Code 74055. A Mon Site No. 120556.	Permit Requirement				Report (Mo:Geo.Mean)	800 (Max.)		#/100ml		monthly	Grab.
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.7			mg/l	0	5 days/week	Grab
PARM Codescript A. Moif Site No. PRACES	Pennit Requirement				03 (Min.)			mg/l		5 days/week	Grab
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				15			%	0	monthly	Calculated
PARM Code Of Ris.* 1 Mon Sile No. 10 (20)	Permit Requirement				Report 7			%		monthly	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement				MNR			mg/l	O	annually	Grab
PARM Code 80682 Ve Mon Sue No. INE 1	Permit Requirement	efection and following and a second of the s			Report (An Avg.)			mg/l		annually	Grab
Solids, Total Suspended	Sample Measurement				MNR			mg/l	0	annually	Grab
PARM Code 00530 Y Mon Site No: Diffet	Permit Requirement Sample				Report (An Avg.)			mg/l	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	anneally	Grab
ing the state of the contract	Measurement Permit				and the state of t	Fareyers on a grown	in the state of the second	process, a tributation type	a programme		e sem jelov je knjelog i li regimeno se ka
	Requirement			2					\$ 3	reference	

Permit Number: FLA010521
Monitoring Period from: 1 2010 through: 30 Sept - 2010 Facility: Shangri-La By The Lake WWTF

F		****	9		<u> </u>				· · · · · · · · · · · · · · · · · · ·	
	CBOD5 (MG/L)	Fecal Coliform Bacteria	pH (SU)	TSS (MG/L)	TRC (For Disinfect.) (MG/L)	Flow X1000 gallons				
		(#/100ML)		-						
Code	80082	74055	00400	00530	50060	50050				
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-1				
1			7.4		1.3	9				
2			7.4		1.1	5				
3			7.4		1.4	4				
4		•				l I				
5	,		7.4		1.6	l l				
6			7. \$		1.3	4				
7	8.0	1	7,4	1.2	j. Y	1		T		
8			7.3		1. (9				
9			7.4		1.5	7				
10	· · · · · · · · · · · · · · · · · · ·		7.4		1.3	6		·	· · · · · · · · · · · · · · · · · · ·	
11			1/4			8		 		
12			7.4		1.2	8,				
13	<u> </u>		7.4							
14			7.4		1.0	10		 		
15					1.1	8 5				
16			7.4		1.0	2		-		
17			7.4		1.3	7	····	ļ		
			7.Ý		1.5	_5_		ļ		
18						8				
19			7.4		1.0	8				
20			7.4		0.7	7				
21			7.4		1. 2	4	•			
22			7.4		1. 0	ي				
23			7.4		1.2	5				
24						<i>5</i>				
25						8				
26			7.4		1.6	8				
27			7.4		1. Y	7	,			
28			7 7			'		 		-
29			7.2 7.9	-	1.0	•				
30					1,1	ر در				
31			7.5		0.8			ļ		
<u></u>								<u> </u>		
Total						209				
Mo. Avg.					`	7.0				

Day Shift Operator	Class:	C	Certificate No:	0012637	Name:	T Levi
Day Sint Operator	Class.		Certificate No.	0012037	Ivallie.) Levi
Evening Shift Operator	Class:	_A	Certificate No:	0014107	Name:	D Harris
Night Shift Operator	Class:	С	Certificate No:	0012240	Name:	G Мигтау
Lead Operator	Class:	С	Certificate No:	0002817	Name:	T Felton

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri-La

TTA Contact. T. Lal

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	ТЕСН:
09/07/10	10-09-134-1	09/07/10 1115	CBOD TSS Effluent	5210B 160.2	8.0 1.2	mg/L mg/L	* 09/10/10 1030	DB DB
09/07/10	10-09-134-2	09/07/10 1115	Fecal Coliform Effluent	SM 9222D	1	cfu's/100mls	09/07/10 1615	RP

*CBOD

Date & Time Setup: <u>09/07/10 1615</u> Date & Time Read: <u>09/12/10 1430</u>

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

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By : Temere Zel

Title : <u>Quality Control Director</u>
Date Reviewed: <u>September 30, 2010</u>

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DOH #E83294

PERMITTEE NAME: MAILING ADDRESS:					PERMIT N	IUMBER	FLA010521		Expiration	on Date:	Septem	ber 12, 2011
	Leesburg,				LIMIT: CLASS SE	ZE:	Final N/A		REPORT GROUP:		Monthly Domest	,
FACILITY: LOCATION:		a By The Lake ri-La Boulevar			MONITOR NUMBER:	ING GROUP	R-001					
	Leesburg,	FL 34788			MONITOR	ING GROUP DES	C: Sprayfield, i	ncluding Influent				
COUNTY:	Lake				SITE:	ARGE FROM	From: 1 Oct	2010 throu	1gh: 3(C	oct.	2010	
Parameter			Quantity	or Loading	Units	Qua	lity or Concentr		Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Total Flow)1		Sample Measurement	0.008		mgd					0	5 days/week	meter
PARM Code 50050 Y Mon Site No. FLW-1		Permit Requirement	0:050 (An Avg.)		mgđ				i engle jes		5 days/week	niele:
Flow (Total Flow)		Sample Measurement	0.006		mgd					0	5 days/week	meter
PARM Code 50050 1 Mon Site No. FLW-1		Pemil Requirement	Report (Mo Avg.)		mgd					8.1 L	5 days/week	meter
Flow (Backup RIB) ²		Sample Measurement	0.008		mgd					0	5 days/week	meter
PARM Code 50050 F Mon Site No. FLW-1		Permit Requirement -	0.013 (An.Avg.)	Active	mgd						5 days/week	meter
Flow (Backup RIB)		Sample Measurement	0.006		mgd					0	5 days/week	meter
Mon Site No. FLW-1		Permit Requirement	Report (Mo Avg.)		mgď						5 days/week 🦯	neter
BOD, Carbonaceous 5 da		Sample Measurement				6.8			mg/l	0	monthly	grab
PARM Codé 80082 Y Mort Site No EFA-1		Perinit Requirement		A STATE OF THE STA		20.0 (An Avg.)	ne n		mg/l		monthly	grab
BOD, Carbonaceous 5 da	- 1	Sample Measurement				5.0	5.0		mg/l	0	monthly	grab
PARM Gode 80082 A MonSite No. EFA-1		Permut Requirement				Report (Mo.Avg.)	(Max.)		mg/l		. monthly	grab

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 AUTHORIZED AGENT			
MAMESTITLE OF AUTHORIZED AGENT	SIGNATURE OF AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
T Felton/operator			
1 1 CROID OPEIALO		352-787-2493	10/11/15
			110//(/{2.
<u> </u>			120, ,, , =
GOV (1 477			
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference	ce all attachments here:		
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference	ce all attachments have		10/11/12

Total Flow (Sprayfield + Backup RIB)

² Backup RIB for wet weather conditions

DEP Form 62-620.910(10), Effective November 29, 1994

FACILITY:

Shangri-La By The Lake WWTF

MONITORING GROUP

R-001

PERMIT NUMBER: FLA010521

NUMBER:

MONITORING PERIOD From: 1 Oct. 2010 through: 31 Oct. 2010

Parameter		Quantity or Loa	ding	Units	Qua	lity or Concentr	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement				4.3			mg/l	٥	monthly	Grab
PARM Code 99539 Y Mon Site No. EFA 1	Permit Requirement				20:0 (An Avg.)			mg/l		monthly	Grab
Solids, Total Suspended	Sample Measurement				11.4	11.4		mg/l	0	monthly	Grab
PARM Code 00530 A Mon Site No. BFA-1	Permit Requirement	ing and the second of the seco			Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	Grab
pH	Sample Measurement				٦.(7.4		รบ	0	5 days/week	Grab
PARM Code 00400 A Mon Site No. BEASI	Permit Requirement				6.0 (Min.)	8.5 (Max.)		su		5 days/week	Grab
Coliform, Fecal	Sample Measurement				41			#/100ml	0	monthly	Grati
PARM Code 74055 Y Mon. Site No. 18PA 4	Permit Requirement				200 (An.Avg.)			#/100ml		inonthly	Grab
Coliform, Fecal	Sample Measurement				V	۷.		#/100ml	٥	monthly	Grab
PARM Code 74085 A Monssile No. BPN D	Permit Requirement				Report (Mo Creo Mean):	800 ≨∷ (Max.)		#/100ml		monthly	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				2-0	•		mg/l	٥	5 days/week	Grab
PARM Code SOMEU A Mon Site No. 189A-1	Permit Requirement				0.5 (Min.)			mg/l		S days/week	Greb
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				14			%	٥	monthly	Calculated
PARM Code 00 1802 Mon Sid No PCWS	Permit Requirement		- 12 (1) - 12 (1) - 12 (1)		Report			%		monthly	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement				MNR			mg/l	٥	annually	Grab
Mon Site No INFE	Permit Requirement		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Report (An.Avg.)		2. step	mg/l		annually	Grab
Solids, Total Suspended ARM Code 00330: Y	Sample Measurement	42		X. 8 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	MNR			mg/l	0	annually	Grab
ALEM Clode 1003 10. Y Mon Site No. INP.	Permit Requirement Sample Measurement				Report (An.Avg.)	東京等別で 1978年の 1		mg/l		animally	Grab
	Permit Requirement					ergy egy or Till og State og S			2M / 642		

Permit Number: FLA010521
Monitoring Period from: 1 0 through: 31 0 through: 2010 Facility: Shangri-La By The Lake WWTF

	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TSS (MG/L)	TRC (For Disinfect.) (MG/L)	Flow X1000 gallons				
Code	80082	74055	00400	00530	50060	50050	1	1		
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-1				
1			7.4		1-6	4				
2						3				
3			7.3		1.2	2				
4			7. 3		1.0	8				
5			7.4		1-8	4				
6			7.4		2.2	5				
7			7.4		2.0	5	<u> </u>		1	
8			7.4		2.2	3				
9			· · · · · · · · · · · · · · · · · · ·			(0		 		
10			69		1.2	10		1		
11			7.4		0.5	4				
12			7.4		0-8					
13			7.4		1-0	5 7		1		+
14			7.4		(- <u>{</u>	9				
15			7.4		2.2			-		
16					2.2	5		· ·-··		
17			7.4			5		ļ		<u> </u>
18					١- ٢	<u>6</u>				
19	~		7.4		1.1	<u> </u>		<u></u>		
20	5,0	3	7.4	11.4	1.6	3				
21			7.4		0.8			ļ		
			<u> ጉ.</u>		1.2	12		<u> </u>		
22			7.4		ا.5	ΙΥ				
23						5				
24			7.3		1.7	6				
25			7.3		1.5	12				
26			7.ሂ		1.3	10				
27			7.4		1.6	(0				
28			7.3		0.8	9				
29			7.3		1.0	4				· ·
30					•	9				
31			7.4		1-0	10				
Total			•			197				
Mo. Avg.										

		1,7			()				
28		7.3		0-8	9				
29		7.3		1.0	Ч				•
30					9				
31		7.4		1-0	10				
Total					197				
Mo. Avg.			T T		7			<u> </u>	
PLANT STAFFING: Day Shift Operator Evening Shift Operator Night Shift Operator	Class: Class:	C A C	Certificate No: Certificate No: Certificate No:	0012637 0014107 0012240		Name: Name: Name:	T Levi D Harris G Murray		
ead Operator	Class:	С	Certificate No:	0002817		Name:	T Felton		

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri-La

TTA Contact: T. Lal

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/ITME ANALYZED:	ТЕСН:
10/19/10	10-10-505-1	10/19/10 1300	CBOD TSS Effluent	5210B 160.2	5.0 11.4	mg/L mg/L	10/20/10 1230	DB DB
10/19/10	10-10-505-2	10/19/10 1300	Fecal Coliform Effluent	SM 9222D	3	cfu's/100mls	10/19/10 1615	RP

*CBOD Date & Time Setup: 10/19/10 1630

Date & Time Read: 10/24/10 1315

U - Material was analyzed for but not detected;

The value reported is the minimum detection limit.

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By: <u>Jemera Zal</u>

Title : Quality Control Director

Date Reviewed: October 30, 2010

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DOH #E83294

FLA010521

Expiration Date:

September 12, 2011

PERMIT NUMBER

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

MAILING ADDRESS	: 100 Shangi	i-La Boulevaro	d									
	Leesburg, l	FL 34788			LIMIT: CLASS SE	7F.	Final N/A		REPORT GROUP:	:	Monthly Domest	
FACILITY:	Shaperi-La	By The Lake	WWTF		02,100 51	32.	14/21		OKOOI.		Domest	
LOCATION:		ri-La Boulevaro			MONITOR NUMBER:	ING GROUP	R-001					
	Leesburg, l	FL 34788				ING GROUP DES	C: Sprayfield, in	cluding Influent				
COUNTY:	Lake				SITE:	ARGE FROM	From: 1 No J	2010_through	: 30 /	u oJ	2010	
Parameter			Quantity o	or Loading	Units		ality or Concentra		Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Total Flow)1		Sample Measurement	0.008		mgd					0	5 days/week	meter
PARM Code 50050 Mon,Site No. FLW-1		Permit Requirement	0.050 (An.Avg.)	18.	mgd			eveje v T			5 days/week	meter
Flow (Total Flow)		Sample Measurement	0.007		mgđ					Ď	5 days/week	meter
PARM Code 50050 Mon.Site No. FLW-1	1 4	ermit Requirement	Report (Ma.Avg.)		mgd	· · · · · · · · · · · · · · · · · · ·				(1)	5 days/week	meter
Flow (Backup RIB) ²		Sample Measurement	0.008		mgd	<u></u>				0	5 days/week	meter
PARM Code 50050 Mon.Site No. FLW-1		ermit Réquirement	0.013 (An.Avg.)		mgd	-					5 days/week	meter
Flow (Backup RIB)		Sample Measurement	0.007		mgd					0	5 days/week	meter
PARM Code 50050 Mon.Site No. FLW-1		ermit Requirement	Report (Mo.Avg.)		mgd			,			5 days/week	meter
BOD, Carbonaceous 5 d		Sample Measurement				7.0			mg/l	0	monthly	grab
PARM Code 80082 Mon.Site No. EFA-1		ermit Requirement				20.0 (An.Avg.)		C	mg/l	NO.	monthly	grab
BOD, Carbonaceous 5 d		Sample Measurement				10.0	10.0		mg/l	O	monthly	grab
PARM Code 80082 Mon.Site No. EFA-1	A [ermit Requirement		ranga Papulan		Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	grab

NAME/TITLE OF AUTHORIZED AGENT

TELEPHONE NO
DATE (YY/MM/DD)

T Felton/operator

TELEPHONE NO
352-787-2493

10//2/8

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.

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

PERMITTEE NAME: Shangri-La By The Lake Utilities, Inc.

¹ Total Flow (Sprayfield + Backup RIB)

² Backup RIB for wet weather conditions DEP Form 62-620.910(10), Effective November 29, 1994

FACILITY:

Shangri-La By The Lake WWTF

MONITORING GROUP

R-001

PERMIT NUMBER: FLA010521

NUMBER:

MONITORING PERIOD

From: 1 NOU 2010 through: 30 NOV

Parameter **Quantity or Loading** Units Quality or Concentration Units No. Frequency of Sample Type Analysis Ex. Solids, Total Suspended Sample mg/l monthly Grab Measurement 20.0 PARM Code 00530 Y Permit mg/l monthly Grab Mon.Site No. EFA-1 Requirement (An.Avg.) Solids, Total Suspended Sample mg/l monthly Grab Measurement PARM Code 00530 A Permit Report 60.0 mg/l monthly Grab Mon.Site No. EFA-1. Requirement (Max.) (Mo.Avg.) pН Sample 5 days/week Grab su 7.5 Measurement PARM Code 00400 8.5 5 days/week Permit 6.0 Grah Mon.Site No. EFA-1 Requirement (Min.) (Max.) #/100ml Coliform, Fecal Sample monthly Grab Measurement PARM Code 74055 200 Permit #/100mJ monthly Grab Mon.Site No. EFA-1 Requirement (An.Avg.) Coliform, Fecal Sample #/100ml monthly Grab Measurement PARM Code 74055 A Permit Report #/100ml monthly Grab Mon.Site No. EFA-1 Requirement (Mo.Geo.Mean) (Max.) Total Residual Chlorine (For Sample mg/l 5 days/week Grab Disinfection) Measurement PARM Code 50060 A Permit 0.5 5 days/week mg/l Grab Mon Site No. EFA-1 Requirement (Min.) Percent Capacity, (TMADF/ Sample % monthly Calculated Permitted Capacity) x 100 Measurement PARM Code 00180 = 1 Permit Report % monthly. Calculated Mon Site No. FLW-1 Requirement 整化化医有理 BOD, Carbonaceous 5 day, 20C Sample mg/l Grab annually Measurement PARM Code 80082 Y Permit Report mg/l annually Grab Mon Site No. INF-L Requirement (An.Avg.) Solids, Total Suspended Sample mg/l annually Grab Measurement PARM Code 00530 Y Permit-Report mg/l annually Grab. Mon.Site No. INF-1 Requirement (An.Avg.) Sample Measurement Permit Requirement

Permit Number: FLA010521 Permit Number: FLA010521 Facility: Shangri-La By The Lake WWTF Monitoring Period from: 1 NOV 2010 through: 30 NOV 2010

Code					1				·-, ·· · · · · · · · · · · · · · · · · ·		
Bacteria (B/100ML)		CBOD5	Fecal	pH (SU)	TSS (MG/L)	TRC (For	Flow		į		
Code 8002		(MG/L)									
Mon. Site EFA-1 EFA-1 EFA-1 EFA-1 EFA-1 FLW-1						(MG/L)	ganons				
1							50050				
2		EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-1				
3		ļ		7.4			10				
4		ļ		7.4		0.8					
4	i			7.4		1.4					
6 7 7 7.4 1.4 6 8 7.3 1.0 5 9 7.4 1.2 4 1.0 7.3 1.0 7 7 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						1.6	7				
6	5			7.4		1.2	6				
7	6										
8	7			7.4		1.4	6				
9	8]. D					
10						1.2					
11	10			7.3		1.0	·				
12	11					1.4	8				
13	12	,									
14	13						1				· .
15	14			7.4		1.0					
16	15								 		
17	16	10.0	21		6.8		5		 		
18	17										
19	18			24							1
20	19							·			
21	20									-	
22 7.5 0.5 3 23 7.4 0.9 5 24 7.4 1.2 6 25 7.4 1.4 6 26 7.4 1.8 6 27 7 7 7 28 7.4 1.7 7 29 7.4 1.0 5 30 7.4 1.1 7 31 7 7 7	21			7.4		0.7					
23	22										
24	23										
25 7.4 1.4 6 26 26 7.4 1.8 4 6 27 27 28 7.4 1.7 4 1.0 5 29 7.4 1.0 5 29 7.4 1.1 (7) 29 7.4 1.1 (7) 29 7.4 7.4 7.1 (7) 29 7.4 7.4 7.1 (7) 29 7.4 7.4 7.1 (7) 29 7.4 7.4 7.1 (7) 29 7.4 7.4 7.1 (7) 29 7.4 7.4 7.4 7.1 (7) 29 7.4 7.4 7.4 7.4 7.4 7.4 7.4 7.4 7.4 7.4	24				-	1 2	<u></u>		ļ	-	+
26	25							<u></u>		 	+
27	 			T							
28 7.4 1.7 () 29 7.4 1.0 5 30 7.4 1.1 () 31 Total 2.7	i					1 - 8	-				
29 7.4 1.0 5 30 7.4 1.1 () Total 2.7	11			711		17	}				
30 7.4 /.1 () 31						10					
31	<u> </u>					1.0	<u> </u>	, ,			
Total 2,7	1			1.4		1.1	- '				
										<u> </u>	
Mo. Avg. 10.0 21 6.8 7		10.0		<u> </u>	. 70						
	Mo. Avg.	10.0	21		6.8		_7	-V - 40			

			L (· 7	i i	1.1	-,	1		
29			7.4		1.0	<u>ح</u>			Ŧ
30			7.4		1.1	()			7
31						-			1
Total						2	7		7
Mo. Avg.	10.0	21		6.8		7			7
PLANT ST	A FFING:						,		
Day Shift O		Class:	С	Certificate No:	0012637	7	Name:	T Levi	
Evening Sh	ift Operator	Class:	Α	Certificate No:	0014107	<u> </u>	Name:	D Harris	
Night Shift	Operator	Class:	С	Certificate No:	0012240)	Name:	G Murray	
Lead Opera	tor	Class:	С	Certificate No:	0002817	<u>' </u>	Name:	T Felton	

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri La

TTA Contact: T. Lal

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	ТЕСН:
11/16/10	10-11-414-1	11/16/10 1030	CBOD TSS Effluent	5210B 160.2	10.0 6.8	mg/L mg/L	* 11/19/10 1330	DB DB
11/16/10	10-11-414-2	11/16/10 1030	Fecal Coliform Effluent	SM 9222D	1 U	cfu's/100mls	11/16/10 1630	DB

*CBOD

Date & Time Setup: <u>11/17/10 1700</u>

Date & Time Read: 11/22/10 1430

U - Material was analyzed for but not detected;

The value reported is the minimum detection limit.

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By: Jamera Lal

Title : <u>Quality Control Director</u>
Date Reviewed: November 30, 2010

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DOH #E83294

PERMITTEE NAME:					PERMIT N	UMBER	FLA010521		Expiratio	n Date:	Septem	ber 12, 2011
MAILING ADDRESS		gri-La Boulevan , FL 34788	1		LIMIT: CLASS SIZ	ZE:	Final N/A		REPORT:		Monthly Domest	
FACILITY: LOCATION:	100 Shan	a By The Lake gri-La Boulevard			MONITOR NUMBER:	LING GROUP	R-001	I Ji T (I 4				
	Leesburg	, FL 34788			MONITOR	ING GROUP DES	C: Sprayneid, ii	icluding Influent				
COUNTY:	Lake				SITE:	IARGE FROM	From: 1 Qe c	- 2010 through:	311	Sec	2010	
Parameter	•		Quantity of	or Loading	Units		lity or Concentr	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Total Flow)		Sample Measurement	0.008		mgd	-		,		0	5 days/week	meter
PARM Code 50050 Mon,Site No. FLW-1	Y	Permit Requirement	0.050 (An.Avg.)		mgd						5 days/week	meter
Flow (Total Flow)		Sample Measurement	0.008		mgd					0	5 days/week	meter
PARM Code 50050 Mon.Site No. FLW-1	1	Permit Requirement	Report (Mo.Avg.)		mgd						5 days/week	meter
Flow (Backup RIB) ²		Sample Measurement	8		mgd					0	5 days/week	meter
PARM Code 50050 Mon.Site No. FLW-1	P	Permit Requirement	0.013 (An.Avg.)		mgd						5 days/week	meter
Flow (Backup RIB)		Sample Measurement	8		mgd					0	5 days/week	meter
PARM Code 50050 Mon.Site No. FLW-1	Q	Permit Requirement	Report (Mo.Avg.)		mgd						5 days/week	meter
BOD, Carbonaceous 5	day, 20C	Sample Measurement				7.3			mg/l	0	monthly	grab
PARM Code 80082 Mon.Site No. EFA-1	Y	Permit Requirement				20.0 (An.Avg.)			mg/l		monthly	grab
3OD, Carbonaceous 5	day, 20C	Sample Measurement				8-0	8-0		mg/l	0	monthly	grab
PARM Code 80082 Mon.Site No. EFA-1	A	Permit Requirement				Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	grab
certify under penalty on formation submitted. and belief, true, accurate	Based on n	nis document and	person or persons w	ho manage the sys	tem, or those i	ersons directly rest	onsible for gathering	g the information, the	informatio	n subm	itted is, to the best	er and evaluate of my knowled
NAME/TITLE OF AUTH	ORIZED AG	ENT		S	IGNATURE OF	AUTHORIZED AGI	NT .			TELEPI	HONE NO DAT	E (YY/MM/DD)
T Felton/operator										352-	787-2493	101/01

¹ Total Flow (Sprayfield + Backup RIB)
² Backup RIB for wet weather conditions
DEP Form 62-620.910(10), Effective November 29, 1994

FACILITY:

Shangri-La By The Lake WWTF

MONITORING GROUP NUMBER: MONITORING PERIOD

R-001

PERMIT NUMBER: FLA010521

From: 1 <u>Oec</u>. 2010 through: 31 Dec. 2010

Parameter		Quantity or Loading	Units	Qual	ity or Concentra	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample			6.1			mg/l	0	monthly	Grab
PARM Code 00530 Y	Measurement Permit Requirement		<u> </u>	20.0 (An.Avg.)			mg/l		monthly	Grab
Mon.Site No. EFA-1 Solids, Total Suspended	Sample Measurement			2.0	2.0		mg/l	0	monthly	Grab
PARM Code 00530 A	Permit Requirement			Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	Grab
Mon.Site No. EFA-1 pH	Sample			7.1	7.5		SU	0	5 days/week	Grab
PARM Code 00400 A Mon.Site No. EFA-1	Measurement Permit Requirement			6.0 (Min.)	8.5 (Max.)		Su		5 days/week	Grab
Coliform, Fecal	Sample Measurement			41		1	#/100ml	0	monthly	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Requirement		-	200 (An.Avg.)			#/100ml		monthly	Grab
Coliform, Fecal	Sample Measurement		1	21	41		#/100ml	0	monthly	Grab
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Geo.Mean)	800 (Max.)		#/100ml		monthly	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			1.0			mg/l	0	5 days/week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement			0.5 (Min.)			mg/l	<u> </u>	5 days/week	Grab
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement			14			%_	0	monthly	Calculated
PARM Code 00180 1 Mon Site No. FLW-1	Permit Requirement			Report			%		monthly	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement			MNR			mg/l	0	annually	Grab
PARM Code 80082 Y Mon.Site No. INF-1	Permit Requirement			Report (An.Avg.)			mg/l		annually	Grab
Solids, Total Suspended	Sample Measurement			MNR			mg/l	0	annually	Grab
PARM Code 00530 Y Mon.Site No. INF-1	Permit Requirement			Report (An.Avg.)			mg/l		annually	Grab
	Sample Measurement									
	Permit Requirement									

Permit Number: FLA010521
Monitoring Period from: 1 Dec . 2010 through: 3 1 Dec . 2010 Facility: Shangri-La By The Lake WWTF

	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TSS (MG/L)	TRC (For Disinfect.) (MG/L)	Flow X1000 gallons				
Code	80082	74055	00400	00530	50060	50050				
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-I	FLW-1				
1			7.4		1.1	10				
2			7.5		1.2	_5_		ļ <u>.</u>		
3			2.4		1.8	5				
4						Ğ				
5	<u> </u>		7.3		2.0	10				1
6			7.4		1.4	5				
7			7.3		1.3	9				
8			7.4		1.4	8		†		
9	80	4(7.3	2.0	1.0	5		-		
10	<u> </u>	·	7, 3		1.6			 		
11			<u> </u>		175	<u>8</u> 7		1		
12			7.4		1.4	<u> </u>		·		
13			2-5		1.{	9		 		-
14			7.4							
15					1.0	_5			 	
16			1,)		1.3	9		<u> </u>	<u> </u>	
17			<u>7.}</u>		1-0			<u> </u>	<u> </u>	
18			7.3	<u></u> _	1.4	_5	} 	ļ		
						l l		<u> </u>	ļ	
19			7.3		1.2					
20			7.2		1.0	φ		<u> </u>	<u> </u>	
21			7.3		1.6	5_				
22			7.2		_ 1.5					
23			7.3		1.2	8				
24			7. 3		1.0	5				
25						7				
26			7.2		1.4	Ŕ				
27			7.1		1.0	8				_
28		<u> </u>	7.1		1.1	<u> </u>				
29			7.4		1.4	9				
30			7.3		1.5					
31			7.3			8				
Total			7. >		1.0	0 2/		<u> </u>	<u> </u> 	
						236 8		<u> </u>		
Mo. Avg.						X_			<u> </u>	

PLANT STAFFING:						
Day Shift Operator	Class:	<u>C</u>	Certificate No:	0012637	Name:	TLevi
Evening Shift Operator	Class:	_A	Certificate No:	0014107	Name:	D Harris
Night Shift Operator	Class:	<u>C</u>	Certificate No:	0012240	Name:	G Murray
Lead Operator	Class:	C	Certificate No:	0002817	Name:	T Felton

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri-La

TTA Contact: T. Lal

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/IIME ANALYZED:	ТЕСН:
12/09/10	10-12-298-1	12/09/10 1030	CBOD TSS Effluent	5210B 160.2	8.0 2.0	mg/L mg/L	* 12/15/10 0930	DB DB
12/09/10	10-12-298-2	12/09/10 1030	Fecal Coliform Effluent	SM 9222D	ΙŪ	cfu's/100mls	12/09/10 1615	DB

*CBOD

Date & Time Setup: <u>12/10/10 1030</u> Date & Time Read: <u>12/15/10 1115</u>

U - Material was analyzed for but not detected;

The value reported is the minimum detection limit.

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By : Tomore Les

Title <u>Quality Control Director</u>
Date Reviewed: <u>December 30, 2010</u>

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DOH #E83294

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

PERMITTEE NAME:	-	•	,		PERMIT N	UMBER		FLA010521		Expiration	on Date	: Sept	ember 12, 2011
MAILING ADDRESS:		igri-La Boulevan , FL 34788	1		LIMIT: CLASS SIZ	Œ:		Final N/A		REPORT GROUP:	:	Mon Dom	thly
FACILITY: LOCATION:		La By The Lake ' gri-La Boulevard			MONITOR NUMBER:	ING GROUP		R-001					
	Leesburg	, FL 34788				ING GROUP DES	iC:	Sprayfield, ir	cluding Influent				
COUNTY:	Lake				SITE:	ARGE FROM	From:	ı Tav	~2011 through:	31 J	un	- 2011	
Parameter			Quantity	or Loading	Units			Concentr		Units	No. Ex.	Frequency o Analysis	f Sample Type
Flow (Total Flow)		Sample Measurement	0.008		mgd		T^-				0	5 days/week	meter
PARM Code 50050 Mon.Site No. FLW-1	Y	Permit Requirement	0.050 (An.Avg.)		mgđ							5 days/week	meter
Flow (Total Flow)		Sample Measurement	0.008		mgd						0	5 days/week	meter
PARM Code 50050 Mon Site No. FLW-1	1	Permit Requirement	Report (Mo.Avg.)		mgd							5 days/week	
Flow (Backup RIB) ²		Sample Measurement	0.008		mgd						٥	5 days/week	meter
PARM Code 50050 Mon.Site No. FLW-1	P	Permit Requirement	0.013 (An.Avg.)		mgd							5 days/week	meter
Flow (Backup RIB)		Sample Measurement	800.0		mgd						0	5 days/week	meter
PARM Code 50050 Mon.Site No. FLW-1	Q	Permit Requirement	Report (Mo.Avg.)		mgd							5 days/week	meter
BOD, Carbonaceous 5 d	ay, 20C	Sample Measurement				7.4				mg/l	0	monthly	grab
PARM Code 80082 Mon.Site No. EFA-1	Y	Permit Requirement				20.0 (An.Avg.)				mg/l		monthly	grab
BOD, Carbonaceous 5 d	ay, 20C	Sample Measurement				9.0	1 4	9.0		mg/l	٥	monthly	grab
PARM Code 80082 Mon.Site No. EFA-1	Α	Permit Requirement				Report (Mo.Avg.)	<u> </u>	60.0 (Max.)		mg/l		monthly	grab
I certify under penalty of information submitted. I and belief, true, accurate	Based on m	ny inquiry of the	person or persons w	ho manage the s	ystem, or those p	ersons directly resp	ponsible	for gathering	g the information, the	informatio	n subm	itted is, to the be	ather and evaluate the est of my knowledge
NAME/TITLE OF AUTHO	RIZED AG	ENT	· · · · · · · · · · · · · · · · · · ·		SIGNATURE OF	AUTHORIZED AGI	ENT		$\rightarrow \overline{}$		TELEPI	HONE NO D	ATE (YY/MM/DD)
T Felton/operator					/						352-	787-2493	1/02/02
COMMENT AND EXPI	_ANATIO	N OF ANY VIO	LATIONS (Referen	ace all attachment	is here):								

¹ Total Flow (Sprayfield + Backup RIB)
² Backup RIB for wet weather conditions
DEP Form 62-620.910(10), Effective November 29, 1994

FACILITY:

Shangri-La By The Lake WWTF

MONITORING GROUP NUMBER:

R-001

PERMIT NUMBER: FLA010521

MONITORING PERIOD

From: 1 <u>Tan</u> 2011 through: 31 <u>Jan</u> 2011

Parameter		Quantity or Loading	Units	Quali	ty or Concentra	tion	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			6.4	-		mg/l	Ó	monthly	Grab
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)			mg/l		monthly	Grab
Solids, Total Suspended	Sample Measurement			8.4	8.4		mg/l	0	monthly	Grab
PARM Code 00530 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	Grab
pH	Sample Measurement			7.3	7.4		su	0	5 days/week	Grab
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement			6.0 (Min.)	8.5 (Max.)		Su		5 days/week	Grab
Coliform, Fecal	Sample Measurement			۷1			#/100ml	0	monthly	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Requirement			200 (An.Avg.)			#/100ml		monthly	Grab
Coliform, Fecal	Sample Measurement			2	2_		#/100ml	0	monthly	Grab
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Geo.Mean)	800 (Max.)		#/100ml		monthly	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			1.0		-	mg/l	0	5 days/week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement			0.5 (Min.)	` .	····	mg/l		5 days/week	Grab
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement			15			%	0	monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Requirement			Report			%		monthly	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement			252			mg/l	0	annually	Grab
PARM Code 80082 Y Mon.Site No. INF-1	Permit Requirement			Report (An.Avg.)			mg/l		annually	Grab
Solids, Total Suspended	Sample Measurement			260			mg/l	0	annually	Grab
PARM Code 00530 Y Mon.Site No. INF-1	Permit Requirement			Report (An.Avg.)			mg/l		annually	Grab
	Sample Measurement									
	Permit Requirement									

Permit Number: FLA010521
Monitoring Period from: I Jan. 2011 through: 31 Jan. 2011 Facility: Shangri-La By The Lake WWTF

	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TSS (MG/L)	TRC (For Disinfect.) (MG/L)	Flow X1000 gallons	cBOD	TSS		
Code	80082	74055	00400	00530	50060	50050				
Ion. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-1	INF	INF	<u> </u>	
1	,					13	<u> </u>			
2			ገ.ሃ		1-3	13				
3			ገ.ሃ		1.1	5				
4			ጋ. ሂ		1.2					
5			7.3		1.0	6				
6	ዓ.δ	2	7.4	8-Y	1.3	9	252	260		
7			7.4		1.5	6				
8						12				
9			7.4		1-6	12				
10			ገ. ሃ		1.8	4				
11			7.3		2.0	8			1	
12			7.4		1.4	8				
13			7.4		l. 5	5	<u> </u>			
14			7.4		1.8	ط ط	 			
15					1.0	9				
16	· ·		7.3		1.4	10	 			
17			7.4		1.2	3,				
18			7.4		1.0		<u> </u>			
19						<u>6</u>				
20			7.3 7.4		1.0	11				
21						ما	ļ	<u> </u>		
22			_ ን.ሂ		1.2	7	 	<u> </u>		
23			- · · ·		. >	10				
24			7.4		1-3	10				
25			7.3		1.0	7	ļ			
26			7.4		1,2	<u>(</u>				
			7.4		1.0	12	ļ		ļ	
27			ገ. ሃ		1.(11_				
28			ገ. ሃ		1.0	5				
29					<u> </u>	10				
30			7.3		1. (10				
31			7,4		1.2	5				
Total						5 255				
10. Avg.						8				

29			1		10						
30		7.3		1. (10						
31		7.4		1.2	5						\neg
Total					<i>ک55</i>		İ				
Mo. Avg.					8	<u> </u>					
Day Shift Operator	Class:	С	Certificate No:	0012637	Nai	me:	T Levi				
Day Shift Operator	Class: Class:	<u>C</u>	Certificate No:	0012637 0014107	<u> </u>		T Levi		····		
PLANT STAFFING: Day Shift Operator Evening Shift Operator Night Shift Operator					Nai	me:		ris			

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri-La

TTA Contact: T. Lal

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	TECH:
01/06/11	11-01-171-1	01/06/11 1120	CBOD TSS Effluent	5210B 160.2	9.0 8.4	mg/L mg/L	* 01/11/11 1215	DB DB
01/06/11	11-01-171-2	01/06/11 1123	CBOD TSS Influent	5210B 160.2	252.0 260.0	mg/L mg/L	* 01/11/11 1215	DB DB
01/06/11	11-01-171-3	01/06/11 1120	Fecal Coliform Effluent	SM 9222D	2	cfu's/100mls	01/06/11 1555	TL

Date & Time Setup: 01/07/11 1130 *CBOD

Date & Time Read: 01/12/11 1015

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

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By

: Tomara Zal

Title

: Quality Control Director

Date Reviewed : January 31, 2011

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY! DOH #E83294 PAGE 1 OF 2

PERMITTEE NAME: MAILING ADDRESS:					PERMIT N	IUMBER	FLA010521		Expirati	on Date	: Septen	ber 12, 2011
		FL 34788	"		LIMIT: CLASS SIZ	ZE:	Final N/A		REPORT GROUP:		Month! Domes	·
FACILITY: LOCATION:	100 Shan	a By The Lake gri-La Boulevan , FL 34788			MONITOR NUMBER:	UNG GROUP	R-001	ncluding Influent	GROOT.		Donies	ic.
COUNTY:	Lake				SITE:	IARGE FROM	From: 1 Feb	2011 through:	28	Feb	2011	
Parameter			Quantity of	or Loading	Units		lity or Concentr		Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Total Flow) ¹		Sample Measurement	0.008		mgd					0	5 days/week	meter
PARM Code 50050 Mon.Site No. FLW-1	Y	Permit Requirement	0.050 (An.Avg.)		mgd						5 days/week	meter
Flow (Total Flow)		Sample Measurement	0.008		mgd					0	5 days/week	meter
PARM Code 50050 1 Mon.Site No. FLW-1		Permit Requirement	Report (Mo.Avg.)		mgd						5 days/week	meter
Flow (Backup RIB) ²		Sample Measurement	Ø		mgd					6	5 days/week	meter
PARM Code 50050 F Mon.Site No. FLW-1	•	Permit Requirement	0.013 (An.Avg.)		mgđ						5 days/week	meter
Flow (Backup RIB)		Sample Measurement	Ø		mgd					0	5 days/week	meter
Mon.Site No. FLW-1	2	Permit Requirement	Report (Mo.Avg.)		mgd						5 days/week	meter
BOD, Carbonaceous 5 da	ay, 20C	Sample Measurement				7.5			mg/l	6	monthly	grab
PARM Code 80082 Y Mon.Site No. EFA-1		Permit Requirement				20.0 (An.Avg.)			mg/l		monthly	grab
BOD, Carbonaceous 5 da	ıy, 20C	Sample Measurement				8-0	8.0		mg/l	0	monthly	grab
PARM Code 80082 A Mon.Site No. EFA-1		Permit Requirement				Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	дгар
I certify under penalty of information submitted. B and belief, true, accurate,	ased on my	y inquiry of the p	person or persons wl	10 manage the sv	stem, or those p	ersons directly resp	onsible for gathering	the information the	informatio	n submit	ted is to the hest o	er and evaluate to f my knowledge
NAME/TITLE OF AUTHOR						AUTHORIZED AGE						(YY/MM/DD)
T Felton/operator										352-7	⁷⁸⁷⁻²⁴⁹³ 11	13/11
COMMENT AND EXPL			· · · · · · · · · · · · · · · · · · ·					-	 			<u> </u>

¹ Total Flow (Sprayfield + Backup RIB)
² Backup RIB for wet weather conditions
DEP Form 62-620.910(10), Effective November 29, 1994

FACILITY:

Shangri-La By The Lake WWTF

MONITORING GROUP NUMBER:

R-001

PERMIT NUMBER: FLA010521

MONITORING PERIOD

From: 1 <u>Feb</u> 2011 through: 28 Feb 2011

Parameter		Quantity or Loading	Units	Qua	lity or Concentra	ation	Units	No. Ex.		Sample Type
Solids, Total Suspended	Sample Measurement			6.4	1		mg/l	0	monthly	Grab
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)			mg/l	<u> </u>	monthly	Grab
Solids, Total Suspended	Sample Measurement			3.0	3.0		mg/l	O	monthly	Grab
PARM Code 00530 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	Grab
рН	Sample Measurement			7.3	7.4		su	0	5 days/week	Grab
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement			6.0 (Min.)	8.5 (Max.)		Su		5 days/week	Grab
Coliform, Fecal	Sample Measurement			21			#/100ml	0	monthly	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Requirement			200 (An.Avg.)			#/100ml		monthly	Grab
Coliform, Fecal	Sample Measurement			21	21		#/100mi	0	monthly	Grab
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Geo.Mean)	800 (Max.)		#/100ml		monthly	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.8			mg/l	0	5 days/week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement			0.5 (Min.)			mg/l		5 days/week	Grab
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement			16			%	٥	monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Requirement			Report			%		monthly	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement			MNR	- 11		mg/l	0	annually	Grab
PARM Code 80082 Y Mon.Site No. INF-1	Permit Requirement			Report (An.Avg.)			mg/l		annually	Grab
Solids, Total Suspended	Sample Measurement			MNR			mg/l	0	annually	Grab
PARM Code 00530 Y Mon.Site No. INF-1	Permit Requirement			Report (An.Avg.)			mg/l		annually	Grab
	Sample Measurement									
	Permit Requirement									

Permit Number: FLA010521 Facility: Shangri-La By The Lake WWTF Monitoring Period from: 1 Feb 2011 through: 28 Feb 2011

	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	pH (SU)	TSS (MG/L)	TRC (For Disinfect.) (MG/L)	Flow X1000 gallons			
Code	80082	74055	00400	00530	50060	50050			
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-1			
1			7.4		1.0	12			
2			.7.4		0.8	9			
3	8,0	21	7.3	3.0	1.4	5		, ,	
4			7.3		1.6	6			
5						13			
6			7.4		1-8	14			
7			7.4		1.7	4			
8			7.4		1.3	7			
9			7.4		1.0	1:0			
10			7.4		1.2	6			
11			7.4		1.0	6			
12			_			11			
13			7.4		1-3	12			
14			7,4		1.1	4			
15			7.4		1.0	10			
16			7.4		1.2	11			
17			7.4		1.1	6			
18			7,4		1.4	4			
19					· · · · · · · · · · · · · · · · · · ·	12			
20			7.4		1.2	12			
21			7.4		1.2	7			
22			7.4		1.0	, フ			
23			7.4		1.1	9			
24			7.4		1.0	7			
25		100 00	7.4		1.0	7			
26									
27			74		7.1	8 8	 	-	
28			7.4 7.3		1-3	7			
29'							 		
387									
N							 		 -
Total						2211	 1	-	
Mo. Avg.	8.0	41	. , , , , , ,	3-0		234 8			

<u> </u>					<u> </u>		 	
PLANT STAFFING:								
Day Shift Operator	Class:	<u>C</u>	Certificate No:	0012637	Name:	T Levi		
Evening Shift Operator	Class:	A	Certificate No:	0014107	Name:	D Harris		-
Night Shift Operator	Class:	<u>C</u>	Certificate No:	0012240	Name:	G Murray		
Lead Operator	Class;	_C	Certificate No;	0002817	Name:	T Felton		

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri-La

TTA Contact: T. Lal

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	ТЕСН:
02/03/11	11-02-203-1	02/03/11 1115	CBOD TSS Effluent	5210B 160.2	8.0 3.0	mg/L mg/L	* 02/06/11 1100	DB DB
02/03/11	11-02-203-2	02/03/11 1115	Fecal Coliform Effluent	SM 9222D	ΙU	cfu's/100mls	02/03/11 1600	TL

*CBOD

Date & Time Setup: 02/04/11 1030

Date & Time Read: 02/09/11 1200

U - Material was analyzed for but not detected;

The value reported is the minimum detection limit.

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By: Temera Zel

Title : Quality Control Director

Date Reviewed: February 14, 2011

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DOH #E83294

When Completed mail th	is report	to: Department	of Environmental	Protection, Centra	al District, 3319	Maguire Boulevard	Suite 232, Orlando,	FL, 32803-3767				
PERMITTEE NAME: MAILING ADDRESS:	100 Shan				PERMIT N LIMIT: CLASS SE		FLA010521 Final N/A		Expirati REPORT GROUP:	`:	Monthi	•
LOCATION:	100 Shan	La By The Lake gri-La Boulevar , FL 34788			MONITOR NUMBER	LING GROUP	R-001	acluding Influent	GROUP.		Domesi	nc
COUNTY:	Lake				SITE:	IARGE FROM	From: 1 Haro	2011 through	31 M	l arci	ر 2011	
Parameter	- **		Quantity	or Loading	Units		ality or Concentr	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Total Flow) ¹		Sample Measurement	0.007		mgd					0	5 days/week	meter
PARM Code 50050 Y Mon.Site No. FLW-1		Permit Requirement	0.050 (An.Avg.)		mgd						5 days/week	meter
Flow (Total Flow)	-w	Sample Measurement	0.009		mgd					6	5 days/week	meter
PARM Code 50050 1 Mon.Site No. FLW-1		Permit Requirement	Report (Mo.Avg.)		mgd						5 days/week	meter
Flow (Backup RIB) ²	·	Sample Measurement	Ø		mgd					0	5 days/week	meter
PARM Code 50050 P Mon.Site No. FLW-1		Permit Requirement	0.013 (An.Avg.)		mgd						5 days/week	meter
Flow (Backup RIB)		Sample Measurement	Ø		mgd					6	5 days/week	meter
PARM Code 50050 Q Mon.Site No. FLW-1	!	Permit Requirement	(Report (Mo.Avg.)		mgd						5 days/week	meter
BOD, Carbonaceous 5 day	y, 20C	Sample Measurement				7.6			mg/l	0	monthly	grab
PARM Code 80082 Y Mon.Site No. EFA-1		Permit Requirement				20.0 (An.Avg.)			mg/l		monthly	grab
BOD, Carbonaceous 5 day	y, 20C	Sample Measurement				7.0	7.0		mg/l	0	monthly	grab
PARM Code 80082 A Mon.Site No. EFA-1		Permit Requirement				Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	grab
I certify under penalty of la information submitted. Ba and belief, true, accurate, a	ised on my ind compl	y inquiry of the lete. I am aware	person or persons w	ho manage the sy	stem, or those n	supervision in according to the supervision in according to th	ordance with a system	the intornation the	e information	s submit	ted is to the best o	er and evaluate the of my knowledge
NAME/TITLE OF AUTHORI	IZED AGE	NT			SIGNATURE OF	HORIZED	NY	and the same of th		TELEPH	ONE NO DATE	(YY/MM/DD)
T Felton/operator									•	352-7	787-2493 11	<i> 4 11</i>
COMMENT AND EXPLA	ANATION	OF ANY VIO	LATIONS (Referen	ce all attachme	s here).							

Total Flow (Sprayfield + Backup RIB)
 Backup RIB for wet weather conditions
 DEP Form 62-620.910(10), Effective November 29, 1994

FACILITY:

Shangri-La By The Lake WWTF

MONITORING GROUP NUMBER:

R-001

PERMIT NUMBER: FLA010521

MONITORING PERIOD

From: 1 <u>March</u> 2011 through: 31 March 2011

Parameter		Quantity or Loading	Units	Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			6.0			mg/l	ь	monthly	Grab
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)			mg/l		monthly	Grab
Solids, Total Suspended	Sample Measurement			2.2	2.2		mg/l	6	monthly	Grab
PARM Code 00530 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	Grab
рН	Sample Measurement			7.3	7.5		su	0	5 days/week	Grab
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement			6.0 (Min.)	8.5 (Max.)		su		5 days/week	Grab
Coliform, Fecal	Sample Measurement			21			#/100ml	G	monthly	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Requirement			200 (An.Avg.)			#/100ml		monthly	Grab
Coliform, Fecal	Sample Measurement			21	21		#/100ml	0	monthly	Grab
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Geo.Mean)	800 (Max.)		#/100ml		monthly	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.5			mg/l	0	5 days/week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement			0.5 (Min.)			mg/l	1.	5 days/week	Grab
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement			17			%	0	monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Requirement			Report			%		monthly	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement			MNR			mg/l	0	annually	Grab
PARM Code 80082 Y Mon.Site No. INF-1	Permit Requirement			Report (An.Avg.)			mg/l		annually	Grab
Solids, Total Suspended	Sample Measurement			NNR			mg/l	0	annually	Grab
PARM Code 00530 Y Mon.Site No. INF-1	Permit Requirement			Report (An.Avg.)			mg/l		annually	Grab
	Sample Measurement									
	Permit Requirement									

Permit Number: FLA010511 Facility: Shangri-La By The Lake WWTF Monitoring Period from: 1 2011 through 31 March 2011

Code SNOR2 Coliforn Bacteria (NGI-L) Code SNOR2 Code	F								T	T	
Ractoria (H100ML) Ract		CBOD5	Fecal Coliform	pH (SU)	TSS (MG/L)	TRC (For	Flow				
Code	:	(MG/L)	Bacteria						i		
Mon. Size EFA-1 EFA-1 EFA-1 EFA-1 EFA-1 EFA-1 FLW-1 1			(#/100ML)				S				
1											
2	Mon. Site	EFA-1	EFA-1	EFA-1		EFA-1	FLW-1				
3		7.0	21		22	1.2				ļ	
4							8			ļ	,
10	3					1.1	6		ļ		
6 7.4 1.3 10 7.5 1.1 9 8 7.4 1.2 11 7.4 1.1 5 7.4 1.2 11 7.4 1.3 1.2 11 7.4 1.4 1.5 11 7.5 11 7	4			7,4		1.0	4				
7	5						0			<u> </u>	
8	6			7.4		1.3	0				
9	7			フン		1.1	9				
9	8			7.4		1.3	6				
10	9			7,4							
11	10			7.5							
17	11										
17	12						15				
17	13			7.4		0.9	15				
17	14						5				
17	15	-		7.4		0.5	5				
17	16			7.4		05	5				
19	17						6				
19	18						4				
20 7.3 1.7 15 21 7.3 1.3 14 22 7.4 3.4 7 23 7.3 1.2 15 24 7.4 1.0 8 25 7.4 1.1 13 26 10 10 27 7.4 1.2 1/ 28 7.4 1.4 1/ 29 7.4 1.8 7 30 7.4 1.4 12 31 7.4 0.8 7 Total 28%	19	•									
21	20			7.3		1.7					
22	21	,		2.3							
23	22						7				
25	23										
25	24						8				•
26	25						13				
7.4 1.2 // 28 7.4 1.4 //	26										
29	27			74		1.2					
29	28			74							
30 7.4 1.4 12 31 7.4 0.8 7 Total 288	29			74		1.8					
31 7.4 0.8 7 Total 288	30			711							
Total 288	31			74		0.8					
Mo Avg a a a c d d d d d d d d d d d d d d d d	Total			7, 1		<u> </u>	284				
	Mo. Avg.	7.0	21		2.2	<u> </u>	9	1	 		

PLANT STAFFING: Day Shift Operator	Class:	С	Certificate No:	0012637	Name:	T Levi
Evening Shift Operator	Class:	A	Certificate No:	0014107	_ Name:	D Harris
Night Shift Operator	Class:	С	Certificate No:	0012240	_ Name:	G Murray
Lead Operator	Class:	С	Certificate No:	0002817	Name:	T Felton

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri-La

TTA Contact: T. Lal

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	TECH:
03/01/11	11-03-027-1	03/01/11 1200	CBOD TSS Effluent	5210B 160.2	7.0 2.2	mg/L mg/L	* 03/02/11 1615	DB DB
03/01/11	11-03-027-2	03/01/11 1200	Fecal Coliform Effluent	SM 9222D	1 U	cfu's/100mls	03/01/11 1555	TL

*CBOD Date & Time Setup: <u>03/02/11 1630</u>

Date & Time Read: 03/07/11 1500

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

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By : Jamere Las

Title : Quality Control Director

Date Reviewed: March 16, 2011

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DOH #E83294

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, FL, 32803-3767											
PERMITTEE NAME:	Shangri-La By The Lake Utilities, Inc.	PERMIT NUMBER	FLA010521	Expiration Date:	September 12, 2011						
MAILING ADDRESS	: 100 Shangri-La Boulevard										
,	Leesburg, FL 34788	LIMIT:	Final	REPORT:	Monthly						
		CLASS SIZE:	N/A .	GROUP:	Domestic						
FACILITY:	Shangri-La By The Lake WWTF										

NO DISCHARGE FROM

MONITORING GROUP R-001 100 Shangri-La Boulevard NUMBER:

MONITORING GROUP DESC: Sprayfield, including Influent Leesburg, FL 34788

Ancil and an April SITE:

			MONITOR	ING PERIOD	From: 1 100		nits No		
Parameter		Quantity or Loa	ding Units	Qua	Quality or Concentration			Frequency of Analysis	Sample Type
Flow (Total Flow) ¹	Sample Measurement	0.007	mgd				و	5 days/week	meter
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0.050 (An.Avg.)	mgd _.					5 days/week	meter
Flow (Total Flow)	Sample Measurement	0.008	mgd	`			C	5 days/week	meter
PARM Code 50050 1 Mon Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)	mgd					5 days/week	meter
Flow (Backup RIB) ²	Sample Measurement	0	mgd				0	5 days/week	meter
PARM Code 50050 P Mon.Site No. FLW-1	Permit Requirement	0.013 (An.Avg.)	mgd					5 days/week	meter
Flow (Backup RIB)	Sample Measurement	Ø	mgd				0	5 days/week	meter
PARM Code 50050 Q Mon.Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)	mgd					5 days/week	meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement			7.7			ng/l	monthly	grab
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)		1	ng/l	monthly	grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			6.0	6.0	ï		monthly	grab
PARM Code 80082 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Avg.)	60.0 (Max.)		ng/l	monthly	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 AUTHORIZED AGENT	SIGNATURE OF AUTHORIZED	TELEPHONE NO DATE (YY/MM/DD)
T Felton/operator		352-787-2493 11/5//3

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachmen

LOCATION:

COUNTY:

Lake

¹ Total Flow (Sprayfield + Backup RIB)

² Backup RIB for wet weather conditions

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Shangri-La By The Lake WWTF

MONITORING GROUP

R-001

PERMIT NUMBER: FLA010521

NUMBER:

MONITORING PERIOD

From: 1 April 2011 through: 30 April

Parameter		Quantity or Loading	Units	Qual	ity or Concentra	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			6.1			mg/l	0	monthly	Grab
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)			mg/l		monthly	Grab
Solids, Total Suspended	Sample Measurement			3.4	3.4		mg/l	0	monthly	Grab
PARM Code 00530 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	Grab
pН	Sample Measurement			7.3	7.6		su	D	5 days/week	Grab
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement			6.0 (Min.)	8.5 (Max.)		su		5 days/week	Grab
Coliform, Fecal	Sample Measurement			41			#/100ml	0	monthly	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Requirement			200 (An.Avg.)			#/100ml		monthly	Grab
Coliform, Fecal	Sample Measurement			41	4		#/100ml	0	monthly	Grab
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Geo.Mean)	800 (Max.)		#/100ml		monthly	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			[,0			mg/l	0	5 days/week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement			0.5 (Min.)			mg/l		5 days/week	Grab
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement			17			%	0	monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Requirement			Report			%	Ī	monthly	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement			NNR			mg/l	٥	annually	Grab
PARM Code 80082 Y Mon.Site No. INF-1	Permit Requirement			Report (An.Avg.)			mg/l		annually	Grab
Solids, Total Suspended	Sample Measurement			UNR			mg/l	0	annually	Grab
PARM Code 00530 Y Mon.Site No. INF-1	Permit Requirement Sample			Report (An.Avg.)			mg/l		annually	Grab
	Measurement Permit									
	Requirement									

DAILY SAMPLE RESULTS - PART B

Facility: Shangri-La By The Lake WWTF 2011 through: 30 Apri Permit Number: 2011 Monitoring Period from: 1_ TRC (For TSS (MG/L) pH(SU) Flow CBOD5 Fecal Disinfect.) X1000 (MG/L) Coliform (MG/L) gallons Bacteria (#/100ML) 80082 74055 00400 00530 50060 50050 Code EFA-1 EFA-1 EFA-1 FLW-1 EFA-1 EFA-1 Mon. Site 7.4 1.0 2 3 7.4 4 5 75 ነ-3 5 6 7.6 1.0 6 7.6 1.4 // 7 7.5 1.0 9 8 7.4 9 " 10 1.0 11 1.1 7.4 12 7.3 1.0 10 3.4 13 9 6.0 1.3 14 7.4 1.0 7 15 16 17 7.3 12 18 7.4 4 1.0 19 7.4 3 1-2 20 10 21 7.4 8 22 2.0 23 11 24 8ء ا 12 25 1.4 5 26 18 27 /3 28 10 29 1.2 30 Total 244 Mo. Avg. 4 3.4 PLANT STAFFING: Day Shift Operator Class: Certificate No: 0011637 Name: T Levi **Evening Shift Operator** Class: Certificate No: 001-107 Name: D Harris C Night Shift Operator Class: Certificate No: 001. 240 Name: G Murray C Lead Operator Class: Certificate No: 000 317 Name: T Felton

See us on the web at : http://www.tri-techlabs.com

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri-La

TTA Contact: T Lal

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	TECH:
04/13/11	11-04-346-1	04/13/11 1300	CBOD TSS Effluent	5210B 160.2	6.0 3.4	mg/L mg/L	* 04/19/11 1045	DB DB
04/13/11	11-04-346-2	04/13/11 1300	Fecal Coliform Effluent	SM 9222D	1 U	cfu's/100mls	04/13/11 1630	TL

*CBOD

Date & Time Setup: <u>04/14/11 1545</u>

Date & Time Read: 04/19/11 1300

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

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By : James Las

Title : Quality Control Director

Date Reviewed: April 26, 2011

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DOH #E83294

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A When Completed mail this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, FL, 32803-3767 FLA010521 Expiration Date: September 12, 2011 PERMIT NUMBER PERMITTEE NAME: Shangri-La By The Lake Utilities, Inc. MAILING ADDRESS: 100 Shangri-La Boulevard Final REPORT: Monthly LIMIT: Leesburg, FL 34788 GROUP: Domestic CLASS SIZE: N/A Shangri-La By The Lake WWTF FACILITY: MONITORING GROUP R-001 LOCATION: 100 Shangri-La Boulevard NUMBER: Sprayfield, including Influent MONITORING GROUP DESC: Leesburg, FL 34788 NO DISCHARGE FROM COUNTY: Lake SITE: 2011 through: MONITORING PERIOD From: 1 Sample Type Frequency of Quality or Concentration Units **Quantity or Loading** Units Parameter Analysis 5 days/week meter Flow (Total Flow)1 Sample mgd 0 0-007 Measurement 5 days/week 0.050 mgd meter Y Permit PARM Code 50050 Mon.Site No. FLW-1 Requirement (An.Avg.) 5 days/week meter mgd Flow (Total Flow) Sample () 0.007 Measurement 5 days/week meter PARM Code 50050 Permit Report mgd Mon.Site No. FLW-1 Requirement (Mo.Avg.) 5 days/week meter Flow (Backup RIB)2 Sample mgd 6 Measurement Z 0.013 5 days/week meter PARM Code 50050 P Permit mgd Mon.Site No. FLW-1 Requirement (An.Avg.) 5 days/week Flow (Backup RIB) Sample mgd meter 0 Measurement Report 5 days/week metei mgđ PARM Code 50050 0 Permit Mon.Site No. FLW-1 Requirement (Mo.Avg.)

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.

28

20.0

(An.Avg.)

9.0

Report

(Mo.Avg.)

9.0

60.0

(Max.)

m g/1

mg/l

mg/l

mg/l

0

0

monthly

monthly

monthly

monthly

grab

grab

grab

grab

NAME/TITLE OF AUTHORIZED AGENT	SIGNATURE OF AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
T Felton/operator		352-787-2493	11/6/13

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

Sample

Permit

Sample

Permit

Measurement

Requirement

Measurement

Requirement

BOD, Carbonaceous 5 day, 20C

BOD, Carbonaceous 5 day, 20C

A

PARM Code 80082

PARM Code 80082

Mon.Site No. EFA-1

Mon.Site No. EFA-1

¹ Total Flow (Sprayfield + Backup RIB)

² Backup RIB for wet weather conditions DEP Form 62-620.910(10), Effective November 29, 1994

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Shangri-La By The Lake WWTF

MONITORING GROUP NUMBER:

R-001

PERMIT NUMBER: FLA010521

MONITORING PERIOD

From: 1 May 2011 through: 31 Nay 2011

Parameter		Quantity or Loading	Units	Qual	ity or Concent	ation	Units	No. Frequency of Ex. Analysis		Sample Type
Solids, Total Suspended	Sample Measurement			61	- · · · · · · · · · · · · · · · · · · ·		mg/l	0	monthly	Grab
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)			mg/l		monthly	Grab
Solids, Total Suspended	Sample Measurement			1.8	1.8		mg/l	0	monthly	Grab
PARM Code 00530 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Avg.)	60.0 (Max.)		mg/l		monthly	Grab
рН	Sample Measurement			7.3	7.6		su	ပ	5 days/week	Grab
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement			6.0 (Min.)	8.5 (Max.)		su		5 days/week	Grab
Coliform, Fecal	Sample Measurement			۷1			#/100ml	0	monthly	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Requirement			200 (An.Avg.)			#/100ml		monthly	Grab
Coliform, Fecal	Sample Measurement			21	41		#/100ml	0	monthly	Grab
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement			Report (Mo.Geo.Mean)	800 (Max.)		#/100ml		monthly	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.9			mg/l	0	5 days/week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement			0.5 (Min.)			mg/l		5 days/week	Grab
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement			16			%	0	monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Requirement			Report			%		monthly	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement			MNR			mg/l	0	annually	Grab
PARM Code 80082 Y Mon.Site No. INF-1	Permit Requirement			Report (An.Avg.)			mg/l		annually	Grab
Solids, Total Suspended	Sample Measurement			MNR			mg/l	0	annually	Grab
PARM Code 00530 Y Mon.Site No. INF-1	Permit Requirement Sample			Report (An.Avg.)			mg/l		annually	Grab
	Measurement Permit									
· · · · · · · · · · · · · · · · · · ·	Requirement						_ 1			

DAILY SAMPLE RESULTS - PART B

FLA010521 m: 1_______ Permit Number: Facility: Shangri-La By The Lake WWTF Monitoring Period from: 1 _2011 through: __**3**[low 2011 TSS (MG/L) CBOD5 Fecai pH (SU) TRC (For Flow (MG/L) Coliform Disinfect.) X1000 Bacteria (MG/L) gallons (#/100ML) Code 80082 74055 00400 00530 50060 50050 Mon. Site EFA-1 EFA-1 EFA-1 EFA-1 EFA-1 FLW-1 1 7.4 1.0 2 Š 7.4 1-1 3 7.4 10 1.3 4 7.3 8 1.0 5 9.0 41 7.4 1-8 1-7 4 6 1.2 7.4 7 11 8 12 7.3 1.0 9 24 1.1 10 10 1.3 4 7.4 11 7.4 1.0 12 0.9 ブリ 13 ブリ 1.0 6 14 10 15 7.4 11 1.0 16 7.4 1-2 5 17 4 1.1 18 1.0 フチ 19 1.3 20 7.4 4 1.1 21 22 9 7.4 1.3 23 7.4 1.0 24 7.3 11 25 0.9 7.4 26 7.4 1.0 27 1.2 5 7.5 28 5 29 1.4 8 7.6 30 7.5 1.1 31 1.0 Total 224 Mo. Avg. 9.0 41 1.8 PLANT STAFFING: Day Shift Operator Class: Certificate No: 0012637 Name: T Levi Α D Harris **Evening Shift Operator** 0014107 Name: Class: Certificate No: C 0012240 Night Shift Operator Class: Certificate No: Name: G Murray С Lead Operator Class: Certificate No: 0002817 T Felton Name:

See us on the web at : http://www.tri-techlabs.com

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME: Shangri-La

TTA Contact: T. Lal

	ituot. 1. Dui			-,				
DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	TECH:
05/05/11	11-05-135-1	05/05/11 1035	CBOD TSS Effluent	5210B 160.2		mg/L mg/L	* 05/06/11 1030	DB DB
05/05/11	11-05-135-2	05/05/11 1035	Fecal Coliform Effluent	SM 9222D	1 U	cfu's/100mls	05/05/11 1630	TL

*CBOD Date & Time Setup: <u>05/06/11 1015</u>

Date & Time Read: 05/11/11 0930

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

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable.

Reviewed By: James Zal

Title : Quality Control Director

Date Reviewed: May 15, 2011

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH" CALL TTA TODAY!
DOH #E83294





			2010		400							
A.	Public Water System (P											
	PWS Name: Shangri-la						PWS Identification Nu	umber: 3354028				
	PWS Type:	Community Non-Transient Non-	Community	Transier	nt Non-Community	/ Con	secutive					
	Number of Service Co	nnections at End of Month: 168			Total Population S	Served at Er	nd of Month: 328					
	PWS Owner: Shangri-	la by the Lake Utilities, 1214 West Rout	te 27, Leaf F	River, IL 61047								
	Contact Person: Thoma	as M. Felton			Contact Person's 7	Title: Operat	tor					
	Contact Person's Maili	ng Address: 7621 Frog Log			City: Leesburg		State: Fl	Zip Code: 34748				
	Contact Person's Telep	hone Number: 352-787-2493			Contact Person's F	Fax Number	: 352-326-8756					
	Contact Person's E-Mail Address: generalutilities@AOL.com											
B.	Water Treatment Plant	Information										
	Plant Name: Shangri-la	a					Plant Telephone Num	ber: 352-787-2493				
	Plant Address: 100 Sha	angri-La Blvd.			City: Leesburg		State: Fl	Zip Code: 34788				
	Type of Water Treated		Purch	nased Finished V	Vater							
	Permitted Maximum D	Day Operating Capacity of Plant, gallons	s per day: 18	30,000								
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): IV			Plant Class (per su	ubsection 62	2-699.310(4), F.A.C.):	С				
	Licensed Operators	Name	Title and the	License Class	License Number	20430	Däy(s)/Shift	(s) Worked				
	Lead/Chief Operator:	T. Felton		C	0002241		Vari	es				
	Other Operators:	K Ramsood		C	0015224		Vari	es				
		D Harris		С	0014540		Vari	es				
	4.24	G. Мигтау		С	0012419		Vari	es				
		T. Levi		C	0012911		Vari	ies				
	6 16 1 1 7	NO. 10	SECTION SECTION									
	. Certification by Lead			MANAGEMENT OF THE PARTY OF THE	Colonia Colonia		in the state of th	CARLON DONALD STREET				
		eatment plant operator licensed in Floric										
		is report is true and accurate to the best										
		d 60 or other applicable standards refere										
		day that a licensed operator staffed or vis										
		, appropriate treatment process performa				these addition	onal operations records	to the PWS owner so the PWS				
OW	ner can retain them, tog	ether with copies of this report, at a con	ivenient loca	ation for at least	ten years.							
	1		Thomas M	(Falson			0000041					
<u>_</u>	17	5/1/10					0002241					
Sig	epature and Date		Printed or	Typed Name			License Nu	ımber				
/												

PWS Identification Number: - 3354028 Plant Name: - Shangri - La by the Lake														
II. I	Daily Da	ta for th	e Month/Ye	ar of:	Annie	/2010				· · · · · · · · · · · · · · · · · · ·	<u> </u>			
Mean	s of Ach	ieving Fe	our-Log Vin	s Inactivation	on/Removal: *		Chlorine		Chlorine	Dioxide		zone	Combin	ed Chlorine (Chloramines)
Пи	traviole	t Radiatio		her (Describ			Cinorine	ـــــــا	Cinorine	DIOXIGC	L \	ZOIIC	сошош	ed Chiorme (Chioranimes)
					istribution Syst	em: 🔯	Free Chlo	orina		nbined C	hlomno (Chlorom	(22.00)	Chlada Diadia
Type	01 1013111	iccian K	CSIGUAL IVIALI		Calculations, or t				View Incess	nomed C	morule (Cmoram	mes) [Chlorine Dioxide
ł	Days			<u> </u>	Calculations, of C	CT Calcul	ations	our-Log	virus inactiv	ation, if A		Dose		•
	Plant		 		<u> </u>	CI Calcui	Lowest CT		 		UV	Duse	Lowest	
	Staffed		. *		Lowest Residual	Disinfectant	Provided						Residua!	
ł	or				Disinfectant	Contact Time	Before or						Disinfectant	
	Visited				Concentration	(T) at C	at First			Minimum	Lowest	Minimum	Concentratio	
	by		Net Quantity		(C) Before or at	Measurement	Customer	Temp	! 	СТ	Operating	UV Dose	n at Remote	Emergency or Abnormal Operating
1 '	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of	Required,	UV Dose,	Required,	Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	, Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation		Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C .	Applicable	min/L	sec/cm ²	sec/cm ²	System, mg/L	
1		24	A) 000					ļ					1.3	BT
3		24	22000 31000						ļ	ļ			0.8	
4		24	31 000 38 000	· · · · · · · · · · · · · · · · · · ·									1.6	
5		24	6X 000					 					1.0	
6		24	2 4 000										1.0	
7		24	÷ 43 000										1.0	:
8		24	19 000							-			0.)	
9		24	23 000										0.5	
10		24	45 000										<u> </u>	
11		24	×49 000					ļ					1-0	
12		24	33000					ļ					1.0	
13		24	3 000										1-0	
15		24	39 000					 					0.8	
16		24	30 000										1.0	
17		24	41000					 -				-	1.0	
18		24	42,000		1				 	1			0.)	· · · · · · · · · · · · · · · · · · ·
19		24	40000	•									1.0	
20		24	25000	-									1.0	
21		24	44 000					· · · · · · · · · · · · · · · · · · ·					1.1	
22		24	49 000										1.1	
23		24	29 000										0.7	
24		24	.5 7.000					ļ						
25		24	67000					ļ					0.8	
26		24	43 000										1.0	·
27		24	42.000 39.000			 							1 1	
29		24	48 000		-			 -		1			1.0	
30	-	24	47,000										1.1	
31			-11 000		 								0.7	
Total		L .	1154 000			l		L	L	F	L <u>-</u>	L	L	<u></u>
Averag	ze		1154 000 38 000											
Maxin			68 000											



See page 4 for instructions.

			/2010										
A.	Public Water System (I												
	PWS Name: Shangri-1						Identification Nu	mber: 3354028					
	PWS Type:	Community Non-Transient N	on-Community	y Transie	nt Non-Community	Consecutiv	ve						
	Number of Service Co	nnections at End of Month: 168			Total Population Se	erved at End of M	fonth: 328						
	PWS Owner: Shangri-	la by the Lake Utilities, 1214 West F	Route 27, Leaf	River, IL 61047									
	Contact Person: Thom				Contact Person's Ti	tle: Operator							
	Contact Person's Maili	ing Address: 7621 Frog Log			City: Leesburg		State: Fl	Zip Code: 34748					
	Contact Person's Telephone Number: 352-787-2493 Contact Person's Fax Number: 352-326-8756												
	Contact Person's E-Mail Address: generalutilities@AOL.com												
B.	B. Water Treatment Plant Information												
	Plant Name: Shangri-la Plant Telephone Number: 352-787-2493												
	Plant Address: 100 Sh	angri-La Blvd.			City: Leesburg	State:	Fl	Zip Code: 34788					
	Type of Water Treated	by Plant: Raw Ground Water	er Purc	chased Finished \	Water								
	Permitted Maximum I	Day Operating Capacity of Plant, gall	lons per day: 1	80,000									
	Plant Category (per subsection 62-699.310(4), F.A.C.): IV Plant Class (per subsection 62-699.310(4), F.A.C.): C												
	Licensed Operators	Name		License Class	License Number		Day(s)/Shift(s	s) Worked					
	Lead/Chief Operator:	T. Felton		С	0002241		Varie	es					
	Other Operators:	K Ramsood		С	0015224		Varie	es .					
		D Harris		C	0014540		Varie	es					
	The first of the f	G. Митау		C	0012419		Varie	es					
	A CONTRACTOR OF STREET	T. Levi		С	0012911		Varie	es					
777	C VC V L L	1/61:166											
	Certification by Lead			1/ Link	S. I			Company of the Compan					
		eatment plant operator licensed in Fl											
		is report is true and accurate to the b											
nla	nt ware proposed and d	d 60 or other applicable standards re	rerenced in suc	osection 62-555.	320(3), F.A.C. Talso	certify that the i	following additio	nal operations records for this					
pia	act and (2) if are capital	av that a licensed operator staffed or	visited this pi	ant during the m	onth indicated above	e: (1) records of a	imounts of chemi	icals used and chemical feed					
OW	rates; and (2) if a pricable, appropriate to atment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can claim them to getter with copies of this report, at a convenient location for at least ten years.												
OW.	ner can claim mem.	emer with coplete and report, at a	convenient loc	ation for at least	ten years.								
		61.11	O Thomas N	M. Felton			0002241						
Sig	nure and Date	7(1)		r Typed Name			License Nu	mber					
1				26223			2.55						

PWS Identification Number: - 3354028 Plant Name: - Shungri - la by the Calcu														
II. Daily Data for the Month/Year of: Why /2010														
Mean	s of Ach	ieving F	our-Log Viru		on/Removal: *		Chlorine	Ē	Chlorine	Dioxide		zone	Combin	ed Chlorine (Chloramines)
U	traviolet	t Radiatio	on 🔲 Otl	her (Describ	oe):									
Type	of Disin	fectant R	esidual Main	itained in Di	istribution Syst	em:	Free Chlo	orine	Cor	nbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
				СТ	Calculations, or C	JV Dose, to De	monstrate Fo	ur-Log	Virus Inactiv	ation, if A	pplicable*			
	Days					CT Calcul	ations		·		UV	Dose		
-	Plant						Lowest CT						Lowest	
1	Staffed				Lowest Residual	Disinfectant	Provided						Residual Disinfectant	
	or Visited				Disinfectant Concentration	Contact Time (T) at C	Before or at First		 	 Minimum	Lowest	Minimum	Concentratio	•
	by		Net Quantity		(C) Before or at	Measurement	Customer	Temp.	[CT		UV Dose	n at Remote	Emergency or Abnormal Operating
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of	pHof		UV Dose,		Point in	Conditions, Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow_mg/L	minutes	mg-min/L	°C_	Applicable	min/L	sec/cm²	sec/cm ²	System, mg/L	Out of Operation
1		24	10 000		ζ									
2		24	1 000								-		1.2	
3		24	58 000								 		1.0	
4		24 24	22000						<u> </u>				0.7	
6		24	2.6 000						 	 			1.0	BT
7		24	14 000								ļ . 		1.0	
8		24	2 000		-									
9		24	21 000										0.7	
10		. 24	19 000										9.6	
11		24	23000					<u> </u>	ļ	ļ	 	<u> </u>	<u> </u>	
12		24	23000						 	ļ	 	-	1.4	
13		24 24	20 000		 		<u> </u>		 	-	 	<u></u>	0.7	
15		24	27 000					 	 	-		 		
16		24	27000										1.0	
17		24	23 000									<u>. </u>	0-6	
18		24	000								L		0.4	
19		24	_000							<u> </u>	<u> </u>		0.3	
20		24	000			ļ	<u> </u>		ļ <u> </u>	 	ļ.——		0.2	
21		24	-000 -000		_		 	-	-		 		0.2	
23		24 24	-000			 	 -		 	 	 	-	0.2	
24		24	-000		 	1	 		 			 	0.2	
25		24	-000		 		<u> </u>		<u> </u>		†		0.4	
26		24	3000					<u></u>					1-0	
27		24	000						-				0.6	
28		24	-000						ļ				2.3	
29		24	100 0									 	2 2	
30		24	22000			· · · · · · · · · · · · · · · · · · ·							0.2	
Total		24	403 000				L	i	I	l	<u> </u>		1-1-0	
Avera			(3 000											
Maxin			5 8000	*										



I.	General Information	for the Month	Year of: June /	2010			
	Public Water System (F			Man out amount was			
	PWS Name: Shangri-la					PWS Identification N	umber: 3354028
		Community	Non-Transient Non-	Community Transi	ent Non-Community	Consecutive	
	Number of Service Co					ved at End of Month: 328	
				te 27, Leaf River, IL 6104			
	Contact Person: Thom				Contact Person's Titl	e: Operator	
	Contact Person's Maili	ng Address: 7	621 Frog Log	M	City: Leesburg	State: Fl	Zip Code: 34748
	Contact Person's Telep				Contact Person's Fax	Number: 352-326-8756	
	Contact Person's E-Ma	il Address: ge	neralutilities@AOL.com				
B.	Water Treatment Plant						
	Plant Name: Shangri-la	a				Plant Telephone Nun	nber: 352-787-2493
	Plant Address: 100 Sha				City: Leesburg	State: FI	Zip Code: 34788
	Type of Water Treated		Raw Ground Water	Purchased Finished	Water		
	Permitted Maximum D	Day Operating	Capacity of Plant, gallons	s per day: 180,000			
	Plant Category (per su	bsection 62-69	9.310(4), F.A.C.): IV		Plant Class (per subs	section 62-699.310(4), F.A.C.):	С
	Licensed Operators		Name	License Clas	s License Number	Day(s)/Shift	t(s) Worked
	Lead/Chief Operator:	T. Felton		С	0002241	Var	ries
	Other Operators:	K Ramsood		C	0015224	Var	ries
		D Harris		C	0014540	Var	ries
		G. Murray		С	0012419	Vai	ries
	11.60分别有基础的。 12.60分别	T. Levi		C	0012911	Va	ries
						*	
П	. Certification by Lead	I/Chief Oper	ton	PROBLEM REST DITTE STATES			
				do any the lead/shief an an	ton of the motor treatm	ent plant identified in Part I of	this remark. I soutify that the
info	ormation provided in the	is report is true	and accurate to the best	of my knowledge and hel	of I contifue that all dri	nking water treatment chemical	la used at this plant conform to
							ional operations records for this
						: (1) records of amounts of cher	
rate	es: and (2) if annlicable	annropriate tr	eatment process perform	ance records. Furthermore	Lagree to provide the	ese additional operations record	s to the PWS owner so the PWS
OW	ner can retain them along	ether with	ies of the report at a cor	ivenient location for at lea	et ten veers	ese additional operations record	s to the r ws owner so the r ws
O VV	Her can it and the the tog	Ctife! W Hareen	report, at a con	ivenient location for at lea	st tell years.		
			7-3-10	Thomas M. Felton		0002241	
Sie	nature and Date	Section of the last of the las		Printed or Typed Name		License N	lumber
500				z z z z z z z z z z z z z z z z z z z		Dicolise 14	

PWS	S Identification Number: - 3354028 Plant Name: - Shangi - Laby the Cake													
II. I	L. Daily Data for the Month/Year of: 72010 eans of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)													
Mean	s of Ach	ieving Fo	our-Log Viru	s Inactivation	on/Removal: *	Free	Chlorine		Chlorine	Dioxide		zone	Combin	ed Chlorine (Chloramines)
🗌 U	ltraviolet	t Radiatio	on 🔲 Otl	her (Describ	oe):									
Туре	of Disin	fectant R	esidual Main		istribution Syst		Free Chlo			nbined C		Chlorami	nes)	Chlorine Dioxide
				C1	Calculations, or U	JV Dose, to De	monstrate Fo	our-Log	Vurus Inactiv	ation, if A	pplicable*			
	Days					CT Calcul		,			UV	Dose		
	Plant						Lowesi CT	 					Lowest	
	Staffed				Lowest Residual	Disinfectant	Provided						Residual	
	or				Disinfectant	Contact Time	Before or				l ,	10.1	Disinfectant Concentratio	
	Visited by		Net Quantity		Concentration (C) Before or at	(T) at C Measurement	at First Customer	Temp		Mınimum CT	Lowest Operating	Minimum	n at Remote	Emergency or Abnormal Operating
Day of	Operator	Ношѕ	of Finished		First Customer	Point During	Dumng	of	pH of	Required,	UV Dose,		Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow			ing-	mW.	mW-	Distribution	Involves Taking Water System Components
Month	} `	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minules	ing-min L		Applicable		sec/cm1_	sec/cm ¹	System, mg/L	Out of Operation
- 1		24	2 V 000					.		· · · · · · · · · · · · · · · · · · ·			0.6	
2		24	3£ 000					· ·	· .— · —— · - -				0.3	
3		24	40 000						· •		-	ļ	0.8	
4		24	20 000 41 000		 		 	<u> </u>		 	 		0.5	
6		24 24	42000		 	<u> </u>	 	 -		 	-	<u> </u>	0.6	
7		24	42,000	<u> </u>	 	 	<u> </u>	 		 	 		0.8	
8		24	(9 000	·						}	 	 	1-0	<u> </u>
9		24	20 000					ļ		T	<u> </u>		0.6	BT
10		24	66 000										0-7	
11		24	<u> 6</u> 000					 		ļ <u>.</u>		<u> </u>	0-5	
12		24	45 000			 		 		ļ	ļ	 		
13	1	24	4 6 000 4 5 000						 	<u> </u>	 -	-	1-0	
15	-	24	23 000					 -	 	 	 	 	0.2	
16	/	24	23 000				<u> </u>	1			 	<u> </u>	0.6	
17		24	47 000		1			 					0-6	
18		24	22 000										0.4	
19		24	2 000					<u> </u>						
20		24	22 000		<u> </u>	ļ		ļ		_	<u> </u>	<u> </u>	م} - 0	
21	-	24	47 000		+			 -			 		0.7	
22	 	24	23 000 30 000	ļ		 		-			 	 	0-6	
2 <u>3</u>	-	24	30 000				 	<u> </u>		-	 		0.6	
25		24	12 000	 		ļ	 	-	 	-			0.4	
26		24	14 000			†				-,				
27		24	19 000										0.2	
28		24	35 000				1						0.3	
29		24	93 000			ļ						ļ	0.3	
30	/	24	32000			 			-		-		10.8	<u> </u>
31 Tatal	1	J	9/ / 000			<u> </u>	<u> </u>		·		<u> </u>	1		
	De		33 000	-										
			43000	1										
Total Avera Maxir			32 000			<u> </u>								



I. General Information for the Month/Year of: July /2010				
A. Public Water System (PWS) Information				
PWS Name: Shangri-la by the Lake			PWS Identification Nu	umber: 3354028
PWS Type:	y Transie	nt Non-Community	Consecutive	
Number of Service Connections at End of Month: 168		Total Population Served	at End of Month: 328	
PWS Owner: Shangri-la by the Lake Utilities, 1214 West Route 27, Leaf	River, IL 61047			
Contact Person: Thomas M. Felton		Contact Person's Title: 0		
Contact Person's Mailing Address: 7621 Frog Log		City: Leesburg	State: Fl	Zip Code: 34748
Contact Person's Telephone Number: 352-787-2493		Contact Person's Fax No	umber: 352-326-8756	
Contact Person's E-Mail Address: generalutilities@AOL.com			•	
B. Water Treatment Plant Information				
Plant Name: Shangri-la			Plant Telephone Numl	ber: 352-787-2493
Plant Address: 100 Shangri-La Blvd.		City: Leesburg	State: Fl	Zip Code: 34788
Type of Water Treated by Plant: Raw Ground Water Purc	hased Finished V	Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 18	80,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsect	ion 62-699.310(4), F.A.C.): 0	C
Licensed Operators Name	License Class	License Number	Day(s)/Shiti(s) Worked
Lead/Chief Operator: T. Felton	С	0002241	Vario	es
Other Operators: K Ramsood	С	0015224	Vario	es
D Harris	С	0014540	Vario	es
G. Murray	С	0012419	Vario	es
T. Levi	С	0012911	Vario	es
Book and the state of the state				Service and Service
H C CC C I I VOLCO				
II. Certification by Lead/Chief Operator	- 1/-1: C	C.I		THE RESERVE OF THE SECOND
I, the undersigned water treatment plant operator licensed in Florida, am the le	ead/cnier operato	or of the water treatment	plant identified in Part I of th	is report. I certify that the
information provided in this report is true and accurate to the best of my know	riedge and beller	1. I certify that all drinking	ig water treatment chemicals	used at this plant conform to
NSF International Standard 60 or other applicable standards referenced in sub plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared each day that a licensed operator staffed or visited this plant were prepared to the plant were prep	section 62-555.3	320(3), F.A.C. I also cert	ily that the following addition	nal operations records for this
rates; and (2) if applicable, appropriate treatment process performance records	ant during the m	onth indicated above: (1)	records of amounts of chem	icals used and chemical feed
owner can retain them, together with copies of this report, at a convenient local	s. ruitiermore,	tan veem	dditional operations records	to the PWS owner so the PWS
owner can ream them, the their with copies of this report, at a convenient local	ation for at least	ten years.		
8/1/10 Thomas M	/ Felton		0002241	
				1
Printed or	Typed Name		License Nui	mber
DEP Form 62-555 900(3) Atternate	Page 1			
DEP Form 62-555.900(3) Atternate	Typed Name Page 1		License Nu	mber .

PWS	PWS Identification Number: - 3354028 Plant Name: - Shangrila by the Lake													
II. Daily Data for the Month/Year of: July /2010														
					on/Removal: *		Chlorine		Chlorine	Dioxide	П	Dzone	Combin	ed Chlorine (Chloramines)
U	ltraviole	t Radiatio	on 🔲 Otl	her (Describ	pe):			_						()
Type	of Disin	fectant R	esidual Main	tained in D	istribution Syst	tem:	Free Chl	orine	Con	mbined C	hlorine (Chloram	ines)	Chlorine Dioxide
	-				Calculations, or									
	Days					CT Calcul	ations				UV	Dose		,
	Plant						Lowest CT						Lowest	
	Staffed				Lowest Residual	Disinfectant	Provided						Residual	
	or				Disinfectant	Contact Time	Before or				007		Disinfectant	
	Visited				Concentration	(T) at C	at First	_		Minimum		Minimum	Concentratio	
n 6	by	77	Net Quantity		(C) Before or at	Measurement	Customer	Temp.	** **		Operating	UV Dose	n at Remote	Emergency or Abnormal Operating
Day of		Hours	of Finished	D 1 E	First Customer	Point During	During	of	pH of	Required,		Required,	Point in Distribution	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-		Involves Taking Water System Components
Month	2000		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
2	-	24	12000									-	0.7	
3	/	24	25 000		1			 				-	0.1	
4	-	24	25 000		 								0.3	
5	-	24	41 000										0.6	×
6	/	24	. 16 000										1-0	
7	/	24	3 6 000										1.8	
8	1	24	22000										1.2	
9	/	24	1 000										0.7	
10		24	44 000											* 500
11	-	24	45 000										1-1	
12	/	24	22000	II.			,						0-8	
13	/	24	17 000										0.7	
14	-	24	36 000										1-0	
15		24	18 000					-					1.4	
16	/	24	21000									-	1-0	
17		24	38 000		-			-					1.0	ßТ
18	-	24	38 000 36 000			-		-					1.0	12.)
20	-	24	27 000			-		-					1.2	
21	-	24	40000		-								1.2	
22	-	24	23000										1.0	
23	1	24	23000										0.7	
24		24	33000										0.7	
25	-	24	17 000										1-1	
26	/	24	29000										1-0	
27	/	24	17000										0.8	
28	/	24	33 000										0.6	
29	1	24	28 000										0-8	
30	/	24	21 000										1.0	
31		24	3 6 000			•								,
Total			842 000											
Averag			27 000											
Maxim	um		45 000											



	General Information Public Water System (2010			
A.	PWS Name: Shangri-		on /			PWS Identification N	Jumph 2254028
		Community	DN-T	с : Пт :	4 N C		Number: 3334028
			Non-Transient Non-	Community	nt Non-Community	Consecutive	
	Number of Service C					rved at End of Month: 328	
			Utilities, 1214 West Rout	te 27, Leaf River, IL 61047			
	Contact Person: Thor			·	Contact Person's Tit		
	Contact Person's Mai				City: Leesburg	State: Fl	Zip Code: 34748
	Contact Person's Tele				Contact Person's Fax	k Number: 352-326-8756	
	Contact Person's E-M	Iail Address: ger	eralutilities@AOL.com				
B.	Water Treatment Plan						
	Plant Name: Shangri-	·la				Plant Telephone Nur	nber: 352-787-2493
	Plant Address: 100 Sl	hangri-La Blvd.			City: Leesburg	State: F1	Zip Code: 34788
	Type of Water Treate	ed by Plant:	X Raw Ground Water	Purchased Finished			
	Permitted Maximum	Day Operating (Capacity of Plant, gallons	per day: 180,000			
	Plant Category (per si	ubsection 62-699	9.310(4), F.A.C.): IV	,	Plant Class (per subs	section 62-699.310(4), F.A.C.)	: C
	Licensed Operators		Name	License Class			t(s) Worked
	Lead/Chief Operator.	T. Felton		С	0002241		ries
	Other Operators:	K Ramsood		C	0015224	Va	ries
	Calca o portanto	D Harris		C	0014540		ries
- 1		G. Murray		C	0012419		ries
					00.2.1.2		
		T. Levi		C	0012911	Va	ries
	articles that I	A Liver of the latest and the latest					
II	C	1/61.1.00					
	Certification by Lea				为有关。多别有关		Children Committee of the Committee of t
ı, tn	e undersigned water tr	eatment plant of	perator licensed in Florid	a, am the lead/chief operator	or of the water treatme	ent plant identified in Part I of	this report. I certify that the
MICE	rmation provided in th	is report is true	and accurate to the best of	of my knowledge and belief	f. I certify that all dri	nking water treatment chemical	ls used at this plant conform to
16/1	International Standar	d 60 or other ap	plicable standards referen	nced in subsection 62-555.3	320(3), F.A.C. I also	certify that the following additi	ional operations records for this
pian	it were prepared each	day that a licens	ed operator staffed or vis	ited this plant during the m	onth indicated above:	(1) records of amounts of cher	micals used and chemical feed
lates	s, and (2) if applicable	appropriate tre	atment process performa	nce records. Furthermore.	I agree to provide the	se additional operations record	s to the PWS owner so the PWS
own	ter can reason them, too	And the same of th	s of this report, at a conv	venient location for at least	ten years.		
-45	1		1 1				
1			91.110	Thomas M. Felton		0002241	
510,1	lature and Date			Printed or Typed Name		License N	umber

PWS	WS Identification Number: - 3354028 Plant Name: - Shangri - 1 a by the Cake													
П. 1	II. Daily Data for the Month/Year of: Aug. /2010													
							Chlorine	Г	Chlorine	Dioxide	П	zone	Combin	ned Chlorine (Chloramines)
		t Radiatio		her (Describ			Cincinic		cmorme	Diomide		Lone		(emeranae)
					istribution Syst	em: 🔯	Free Chl	orine	ПСо	mbined C	'hlorine (Chlorami	nes)	Chlorine Dioxide
Турс	OI DISH	Icciant iv	Coldual Wall		Calculations, or U							Cinoranii	iles)	Chiornic Bloxide
	ASS		}	CI	Calculations, or t	CT Calcul		our-Log	virus mach	vation, if A		Dose		
	Days Plant				Γ	CT Calcul	Lowest CT			Ι	UV	Dose	Lowest	
	Staffed				Lowest Residual	Disinfectant	Provided						Residual	
	OT .				Disinfectant	Contact Time	Before or						Disinfectant	
	Visited	1.0			Concentration	(T) at C	at First			Minimum	Lowest	Minimum	Concentratio	
	by		Net Quantity		(C) Before or at	Measurement	Customer	Temp.		CT	Operating	UV Dose	n at Remote	Emergency or Abnormal Operating
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of	Required,			Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-	Distribution	Involves Taking Water System Components
Month	2221	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1	/	24	30000										1.(
2	/	24	18000										0.8	
3	/	24	2000										1.1	
4		24	18 000			,							1-6	
5	/	24	1 4 000		-								1.2	
7		24	12000										0.7	
8		24	12000										1-0	13 T
9	-	24	26000						-				1.1	15.1
10	-	24	000								-		0-9	
11	/	24	2,3000										1.0	
12	/	24	18 000										1.0	
13	/	24	25 000 20 000										1.4	
14		24												
15	/	24	79 000										1-4	
16	/	24	19 000										1-6	
17	/	24	26 000										1.2	
18	-	24	19000										1.2	
19		24	20000										1.6	
20		24	13 000										1.4	
22		24	19 000											
23		24	20 000									-	1-0	
24		24	20 000										1.2	
25	/	24	19000							-			1.0	
26	/	24	20000										1-1	
27	/	24	20 000							-			1.0	· · · · · · · · · · · · · · · · · · ·
28		24	17000										1.0	
29	/	24	18 000										1.7.	
30	/	24	12000			,							1.3	
31	/	24	20000										14	
Total			564 000										1.7	
Average			8 000											
Maxim	ım		26 000											



1.0					
I. General Informa	tion for the Month/Year of: Sent . /2	010			
	em (PWS) Information				
PWS Name: Shan	ngri-la by the Lake			PWS Identification 1	Number: 3354028
PWS Type:	Community Non-Transient Non-	Community Trans	ient Non-Community	Consecutive	
Number of Service	e Connections at End of Month: 168		Total Population Serv	ed at End of Month: 328	
PWS Owner: Sha	ngri-la by the Lake Utilities, 1214 West Rout	e 27, Leaf River, IL 6104	7		
Contact Person: T	Thomas M. Felton		Contact Person's Title	: Operator	
Contact Person's l	Mailing Address: 7621 Frog Log		City: Leesburg	State: Fl	Zip Code: 34748
Contact Person's	Telephone Number: 352-787-2493		Contact Person's Fax	Number: 352-326-8756	
Contact Person's l	E-Mail Address: generalutilities@AOL.com				
3. Water Treatment P	Plant Information				
Plant Name: Shan	ngri-la			Plant Telephone Nur	mber: 352-787-2493
	0 Shangri-La Blvd.		City: Leesburg	State: F1	Zip Code: 34788
Type of Water Tr		Purchased Finished			
Permitted Maxim	um Day Operating Capacity of Plant, gallons	per day: 180,000			
	er subsection 62-699.310(4), F.A.C.): IV	A	Plant Class (per subse	ection 62-699.310(4), F.A.C.)	: C
Licensed Operat		License Clas			ft(s) Worked
Lead/Chief Opera	ttor: T. Felton	C	0002241	Va	uries
Other Operators:	K Ramsood	С	0015224	Va	uries
	D Harris	C	0014540	Va	uries
	G. Murray	C	0012419	Va	uries
		,			
	T. Levi	C	0012911	Va	uries
一种的人们的					
A CONTRACTOR OF THE PARTY OF TH					
	Lead/Chief Operator		公外主要等的		第 050位是是类似。1950年
the undersigned wat	ter treatment plant operator licensed in Florida	a, am the lead/chief opera	tor of the water treatmer	nt plant identified in Part I of	this report. I certify that the
nformation provided	in this report is true and accurate to the best of	of my knowledge and beli	ef. I certify that all drinl	king water treatment chemica	ls used at this plant conform to
SF International Star	ndard 60 or other applicable standards referen	nced in subsection 62-555	5.320(3), F.A.C. I also co	ertify that the following addit	ional operations records for the
lant were prepared ea	ach day that a licensed on later staffed or visi	ited this plant during the	month indicated above: (1) records of amounts of che	micals used and chemical feed
ates; and (2) if applic	able, appropriate to aument process performan	nce records. Furthermore	e, I agree to provide these	e additional operations record	ls to the PWS owner so the PW
wher can retain hem	dogsmer with copies of this report, at a conv	enient location for at least	st ten years.		
	. 11	TI			
11/	10/1/10	Thomas M. Felton		0002241	N)
Signature and Date		Printed or Typed Name		License N	fumber

PWS	PWS Identification Number: - 3354028 Plant Name: - Shangri - La													
II. Daily Data for the Month/Year of: Sevet. /2010														
					on/Removal: *		Chlorine		Chlorine	Dioxide)zone	Combin	ed Chlorine (Chloramines)
		t Radiatio		her (Describ			Cinorino	_	Cinorino	DIOXIGO		ZONC	сошон	ed emorme (emoranmes)
					istribution Syst	em. 🔯	Free Chl	orine	ПСо	mbined C	hlorine (Chlorami	ines)	Chlorine Dioxide
1770	01 2 1311		Coldular Ivian		Calculations, or I							CHIOIAIII	incs)	Chlorine Bloxide
-	Days			.	CHOMINION, OF	CT Calcul		our Dog	Thus much	vanon, m		Dose		
Plant Lowest CT Lowest														
Ī	Staffed				Lowest Residual	Disinfectant	Provided				}		Residual	
	or				Disinfectant	Contact Time	Before or						Disinfectant	
}	Visited	ļ			Concentration	(T) at C	at First	_		Minimum		Minimum	Concentratio	
Day of	by O	,,	Net Quantity of Finished		(C) Before or at	Measurement	Customer	Temp.	,,,,	CT	Operating		n at Remote Point in	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that
the	Operator (Place	Hours Plant in	Water	Peak Flow	First Customer During Peak	Point During Peak Flow,	During Peak Flow,	of Water,	pH of Water, if	mg-	UV Dose, mW-	Required, mW-	Distribution	Involves Taking Water System Components
Month	"X")	1	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	_	sec/cm ²	sec/cm ²	System, mg/L	
1		24	3) 000	raite, gpa	110w, mg L	inminutes	ing-time i	 ~	Application	THULE LO	300/011	300/0111	l. I	Out of Operation
2		24	56000					 						
3		24	30 000			-				T		·	0.7	
4		24	22,000										1	
5	_	24	52,000										1.3	
6		24	20 000								<u> </u>	<u> </u>	ع.ن	
7		24	Ø8 000									<u> </u>	1.2	
8 9		24	33 000					ļ	-				۵.6	
10		24	38 000		-			 	 	ļ.——			1.1	
11		24	59 000										1.0	
12		24	59 000										1.1	
13		24	42,000										10	
14		24	49 000										0.9	
15		24	15 000				ļ						0.7	
16		24	4 0 000		<u> </u>			ļ	<u> </u>	ļ			1.0	B+
17		24	28 000 4 4 000		_	 	 	<u> </u>					1.0	
19		24 24	55 000					 	 		 			
20		24	39 000					 		 			1.3	
21		24	3 0 000								<u> </u>	 	1.4	
22		24	40 000										1.0	
23		24	28 000										1,1	
24		24	3.3 000										0.7	
25		24	33 000				1	_						
26		24 24	34 000					-				ļ 	13	
28		24	29 000					 					1.0	
29	27 62 000													
30		24	28 000				 	1					1.2	
31	· · · · ·		2-1 000			,		<u> </u>	······································			 		
Total			1152000				4	<u></u>	1		1			J
Averag			38 000											
Maxim	um		68000											· ·

Page 1



See page 4 for instructions.

	~	and the second	/2010			
		for the Month/Year of:	/2010			
A.	Public Water System (PWS) Information			Table 1	
	PWS Name: Shangri-				PWS Identification N	Number: 3354028
		Community Non-Transient Nor	1-Community Transie	nt Non-Community	Consecutive	
		onnections at End of Month: 168			rved at End of Month: 328	
		-la by the Lake Utilities, 1214 West Ro	ute 27, Leaf River, IL 61047			
	Contact Person: Thon	nas M. Felton		Contact Person's Tit		
	Contact Person's Mail	ling Address: 7621 Frog Log		City: Leesburg	State: Fl	Zip Code: 34748
	Contact Person's Tele	phone Number: 352-787-2493		Contact Person's Fax	x Number: 352-326-8756	
	Contact Person's E-M	ail Address: generalutilities@AOL.com	1		1	
B.	Water Treatment Plant	Information				
	Plant Name: Shangri-				Plant Telephone Nur	mber: 352-787-2493
	Plant Address: 100 Sh	nangri-La Blvd.		City: Leesburg	State: F1	Zip Code: 34788
	Type of Water Treate	d by Plant: Raw Ground Water	Purchased Finished	Water		
	Permitted Maximum	Day Operating Capacity of Plant, gallor	ns per day: 180,000			
	Plant Category (per su	absection 62-699.310(4), F.A.C.): IV	parties and a second	Plant Class (per sub	section 62-699.310(4), F.A.C.)	: C
	Licensed Operators	Name	License Class	License Number	Day(s)/Shif	t(s) Worked
	Lead/Chief Operator:	T. Felton	C	0002241	Va	ries
	Other Operators:	K Ramsood	C	0015224	Va	ries
		D Harris	С	0014540	Va	ries
		G. Murray	С	0012419	Va	ries
		T. Levi	C	0012911	· Va	ries
		18 16 2				
**						
	. Certification by Lea		BEET STATE OF STREET			而 经企业从 在 1 年 2 5 1 0 A 1 5 8 B
1, 1	he undersigned water to	reatment plant operator licensed in Flor	ida, am the lead/chief operat	or of the water treatme	ent plant identified in Part I of	this report. I certify that the
ini	formation provided in the	nis report is true and accurate to the bes	t of my knowledge and belie	f. I certify that all dri	nking water treatment chemica	ls used at this plant conform to
N2	of International Standar	rd 60 or other applicable standards refer	renced in subsection 62-555.	320(3), F.A.C. I also	certify that the following addit	ional operations records for this
pia	ant were prepared each	day that a licensed operator staffed or v	isited this plant during the m	ionth indicated above:	(1) records of amounts of cher	nicals used and chemical feed
rat	es; and (2) if applicable	, appropriate treatment a cess perform	nance records. Furthermore,	I agree to provide the	se additional operations record	s to the PWS owner so the PWS
ON	mer demonstrate control or	complex of this ort, at a co	invenient location for at least	ten years.		
	1	11/1/2	Thomas M. Felton		0002241	
G:	7//	11/1/10			0002241	
515	mature and Date		Printed or Typed Name		License N	umber
/						

PWS	WS Identification Number: - 3354028 Plant Name: - Shangri-la by the Lake													
II. I	II. Daily Data for the Month/Year of: OCT /2010 Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)													
Mean	s of Ach	nieving F	our-Log Viru	s Inactivati	on/Removal: *	Free	Chlorine		Chlorine	Dioxide		Dzone	Combin	ned Chlorine (Chloramines)
		t Radiatio		her (Describ						9				
Type	of Disin	fectant R	Residual Main		istribution Syst		Free Chl			mbined C		Chloram	ines)	Chlorine Dioxide
				C	Calculations, or U			our-Log	Virus Inactiv	vation, if A				
	Days Plant	-				CT Calcul					UV	Dose		
	Saffed Lowest Residual Disinfectant Provided Residual													
	Staffed				Disinfectant	With the great and the second second	Before or						Disinfectant	
1.00	Service II				Concentration	Contact Time (T) at C	at First			Minimum	Lowest	Minimum	Concentratio	at the same of the
1	100	~ .	Net Quantity		(C) Before or at	Measurement	Customer	Temp.		CT		UV Dose	n at Remote	Emergency or Abnormal Operating
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of			Required,	Point in	Conditions; Repair or Maintenance Work that
the	Mace	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-	Distribution	Involves Taking Water System Components
Month	100	Operation		Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1		24	100 000											
2		24	000										10	
3	/	24	3 000										1.0.	
4	-	24	40 000					-					0.3	RT'
6	-	24	30 000 43 000							*			1.2	
7	1	24	31 000										1.4	
8	1	24	25 000						,				0.5	
9		24	53 000	· v		47.0							AND THE	
10		24	52 000										0.6	
11	1	24	36 000	4	v 1, 2								0.2	
12	1	24	44 000										1.0	
13	/,	24	42 000										0.3	
14	4	24	40 000		-								02	
15 16		24	37 000 32 000							-			1.0	
17	/	24	32 000						-				0.2	
18		24	22 000										2.0	
19	1	24	22 000										2.0	
20		24	15 000										1-8	
21	/	24	40 000										0.2	
22	/	24	30 000		- 181								08	
23		24	20 000										2 2	
24	/	24	45 000		-								2.0	
26	1	24	26 000		-								0.3	
27	1	24	24 000										1.1	
28	1	24	42 000										0.2	
29														
30	30 24 20 000													
31		24	37 000										0.6	
Total			1047000		7									
Average			34 000			•								
Maximu	ım		100 000											



See page 4 for instructions.

DEP Form 62-555.900(3)Atternate

I.	General Information	for the Month/Year of:	/2010				
A.	Public Water System ((PWS) Information					
	PWS Name: Shangri-	la by the Lake			PWS I	Identification Nu	umber: 3354028
	PWS Type:	Community Non-Transient Non-	n-Community Transie	ent Non-Community	☐ Consecutiv	ve	
	Number of Service C	onnections at End of Month: 168		Total Population Se	rved at End of M	Ionth: 328	
		i-la by the Lake Utilities, 1214 West Ro	ute 27, Leaf River, IL 61047				
	Contact Person: Thor			Contact Person's Tit	le: Operator		
		ling Address: 7621 Frog Log		City: Leesburg		State: Fl	Zip Code: 34748
	Contact Person's Tele	ephone Number: 352-787-2493		Contact Person's Far	x Number: 352-3	326-8756	4
	Contact Person's E-M	fail Address: generalutilities@AOL.com	n				,
B.	Water Treatment Plan	t Information					
	Plant Name: Shangri-	-la			Plant '	Telephone Num	ber: 352-787-2493
	Plant Address: 100 S	hangri-La Blvd.		City: Leesburg	State:	Fl	Zip Code: 34788
	Type of Water Treate	ed by Plant: Raw Ground Water	Purchased Finished	Water			
		Day Operating Capacity of Plant, gallor	ns per day: 180,000				
	Plant Category (per s	ubsection 62-699.310(4), F.A.C.): IV		Plant Class (per sub	section 62-699.3	10(4), F.A.C.):	C
	Licensed Operators	Name	License Class	License Number		Day(s)/Shift((s) Worked
	Lead/Chief Operator:	T. Felton	С С	0002241		Vari	es
	Other Operators:	K Ramsood	C	0015224		Vari	es
		D Harris	C	0014540		Vari	es
		G. Murray	C	0012419		Vari	es
	10000000000000000000000000000000000000						
		T. Levi	C	0012911		Vari	es
			La - S				5
TT	C CC C I I	NGI: 60					
	. Certification by Lea						
1, 1	ne undersigned water t	reatment plant operator licensed in Flor	ida, am the lead/chief operat	or of the water treatm	ent plant identifi	ed in Part I of th	is report. I certify that the
МС	E International Standar	his report is true and accurate to the bes	t of my knowledge and belie	f. I certify that all dri	nking water trea	tment chemicals	s used at this plant conform to
nlo	or international Standar	rd 60 or other applicable standards refer	renced in subsection 62-355.	320(3), F.A.C. I also	certify that the f	ollowing addition	onal operations records for this
pia	es: and (2) if annicable	day that a licensed operator staffed or v	risited this plant during the m	ionth indicated above	(1) records of a	mounts of chem	icals used and chemical feed
lau	ner can retain them. to	e, appropriate treatment process perform	nance records. Furthermore,	1 agree to provide the	se additional ope	erations records	to the PWS owner so the PWS
UW	iter can retail item.	gether with copies of this report, at a co	invenient location for at least	ten years.			
		12/1/10	Thomas M. Felton			0002241	
Sie	native and Date		Printed or Typed Name			License Nu	mher
-			Timed of Typed Name			License Nu	inoci
1							

PWS	WS Identification Number: - 3354028 Plant Name: - Shangri - la by the Lake													
П. І	II. Daily Data for the Month/Year of: \(\sum_O \sum_ \) /2010													
							Chlorine		Chlorine	Dioxide		zone	Combin	ed Chlorine (Chloramines)
U	traviole	t Radiatio	on Ot	her (Describ	e):					v				
Type	of Disin	fectant R	esidual Mair		istribution Syst		Free Chle			nbined C		Chlorami	ines)	Chlorine Dioxide
	40.000	,		СТ	Calculations, or U			our-Log	Virus Inactiv	ation, if Ap				
	Days					CT Calcul					UV	Dose	Y	
	Plant Lowest CT Lowest CT Lowest CT Lowest CT Residual													
	Staffed Lowest Residual Disinfectant Provided Residual Provided Residual Disinfectant Disinfectant Provided Residual Disinfectant Provided Disinfectant Disinf													
	Visited				Concentration	(T) at C	at First			Minimum	Lowest	Minimum	Concentratio	
	by	-	Net Quantity		(C) Before or at	Measurement	Customer	Temp.				UV Dose	n at Remote	Emergency or Abnormal Operating
Day of		Hours	of Finished		First Customer	Point During	During	of	pH of		UV Dose,		Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-	Distribution	Involves Taking Water System Components
Month	"X")		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1	1	24	142 000				-						1.0	
2	/	24	28 000										1.2	,
3	-	24	23 000					-					1.0	
5	/	24	26 000					-					1.0	
6		24	40 000										7.0	
7	1/	24	40 000										0.7	BT
8	/	24	22 000										1.0	
9	1	24	36 000										1.2	
10		24	30 000										1.2	
11		24	48 000										1.3	
12	/	24	24 000										0.7	
13		24	40 000										1.1	
15	/	24	27 000										1.2	
16		24	28 000										1.4	
17		24	35 000										1.0	
18		24	26 000										1.2	
19		24	24 000										0-7	
20		24	37 000											
21	/	24	37 000										0.7	
22		24	28 000					-					1.3	
24	/	24	37 000					-					1.4	
25	1	24	20 000										1.2	
26		24	28 000										0.8	
27	,	24	35 000											
28	/	24	35 000										1.2	
29	29 24 30 000 1.0													
30	30 \(\sqrt{24} \) 30 000 \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \													
31			/02/											
Total			7036 000 35 000											
Averag Maxim			142 000											
.viuniiii	MITT		000											



See page 4 for instructions.

	(PWS) Information			DIVIGITATION OF STREET	1 2254020
PWS Name: Shangri				PWS Identification N	umber: 3354028
	Community Non-Transient Non-C	Community	nt Non-Community	Consecutive	
	onnections at End of Month: 168	A	Total Population Served	at End of Month: 328	
	i-la by the Lake Utilities, 1214 West Rout	e 27, Leaf River, IL 61047			
Contact Person: Thor	V-135-00 11 - 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Contact Person's Title: (7: 0 1 24740
	ling Address: 7621 Frog Log		City: Leesburg	State: F1	Zip Code: 34748
	ephone Number: 352-787-2493		Contact Person's Fax Nu	umber: 352-326-8756	
	fail Address: generalutilities@AOL.com				
Water Treatment Plan	SO CONTROL OF THE PROPERTY OF				
Plant Name: Shangri				Plant Telephone Num	
Plant Address: 100 S			City: Leesburg	State: Fl	Zip Code: 34788
Type of Water Treate		Purchased Finished Y	Water		
	Day Operating Capacity of Plant, gallons	per day: 180,000	and the second	A CONTRACTOR OF THE CONTRACTOR	
	ubsection 62-699.310(4), F.A.C.): IV			ion 62-699.310(4), F.A.C.):	C
Licensed Operators		License Class	License Number	Day(s)/Shift	(s) Worked
Lead/Chief Operator	T. Felton	C	0002241	Var	ies
Other Operators:	K Ramsood	С	0015224	Var	ies
	D Harris	C	0014540	Var	ies
分为原生的	G. Murray	С	0012419	Var	ies
	T. Levi	C	0012911	Var	ies
	Tall and the same of the same				
				11 -1	AX
THE PROPERTY OF THE PROPERTY O					A STATE OF THE STA
Certification by Le					第158 多分字形式。
	reatment plant operator licensed in Florid				
	his report is true and accurate to the best of				
F International Standa	rd 60 or other applicable standards referen	aced in subsection 62-555.3	320(3), F.A.C. I also cert	tify that the following addition	onal operations records for t
nt were prepared each	day that a licensed operator staffed or vis-	ited this plant during the m	onth indicated above: (1)	records of amounts of chem	nicals used and chemical fee
es; and (2) if applicable	e, appropriate treatment process performa	nce records. Furthermore,	I agree to provide these a	additional operations records	to the PWS owner so the P
ner can retain them, to	gether with cores of this report, at a conv	venient location for at least	ten years.		
1.1					
	1/3/11	Thomas M. Felton		0002241	

			e Month/Ye		Dec on/Removal: *		Chlorine		Chlorine	Diovide	П	Dzone	Combin	ned Chlorine (Chloramines)
		t Radiatio		her (Descri		Ппсс	Chiornic		CHIOTHE	Dioxide		720HC	Comon	led Chlorine (Chloranimes)
			- Contract		istribution Syst	tem:	Free Chle	orine	Con	mbined C	Chlorine (Chlorami	nes)	Chlorine Dioxide
	W. L. T.			C	T Calculations, or	UV Dose, to De	monstrate Fo	our-Log	Virus Inactiv	vation, if A	pplicable*	1.1		
	Days					CT Calcul						Dose		
	Plant						Lowest CT				,		Lowest	
	Staffed				Lowest Residual	Disinfectant	Provided						Residual	
	01				Disinfectant	Contact Time	Before or						Disinfectant	
312	Visited	la la	192		Concentration	(T) at C	at First			Minimum		Minimum	Concentratio	15 Oct.
	DY.	Or and	Net Quantity		(C) Before or at	4	Customer	Temp.			Operating	UV Dose	n at Remote	Emergency or Abnormal Operating
	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of	-	UV Dose,	Required,	Point in	Conditions; Repair or Maintenance Work th
the	Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	mg-	mW-	mW-	Distribution	Involves Taking Water System Component
fonth	- EXM	-	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	min/L	sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1	-	24	19 000		-								0.9	
2	1	24	24 000		-								1.7	
3		24	28 000 19 000		-	-		-					0.7	
5	/	24	20 000		 	-							1.2	BT
6	-	24	22 000		 								1.0	01
7	1	24	17 000										1.2	
8	/	24	39 000										1.4	
9	1,	24	24 000								-	111	1.5	
10	1	24	20 000								·		0.7	
11		24	31 000											, , , , , , , , , , , , , , , , , , , ,
12	1	24	31 000										1.0	
13	/	24	19 000										1.0	
14	1	24	16 000									1377	1.1	
15	1	24	35 000		-								1.3	
16	-	24	28 000		-	-						1-1-1	0.8	
18	-	24	38 000		-								0.8	
19		24	38 000		 								1.2	
20	/	24	20 000										1.0	
21	/	24	21 000				-						1.1	
22		24	30 000	_									1.2	
23	1	24	16 000		-								1.0	
24		24	000 ا چ										1.1	
25	/	24	23 000											
26	/	24	24 000									*	1.4	
27	/	24	23 000							-		**	1.0	
28	-	24	18 000									-	1.0	
29	1	24	23 000		-								1.2	^
30	-	24	22 000										1.3	
31 otal		24	22 000 754 000		1								0.7	
verag	9		754 000 24 000	ĸ										
axim			39 000											

PWS	PWS Identification Number: - 3354028 Plant Name: - Shangri-laby the Lake													
IJ. T	II. Daily Data for the Month/Year of: /2011													
					n/Removal: *		Chlorine		Chlorine	Dioxide	По	zone	Combin	ed Chlorine (Chloramines)
Πu	traviole	t Radiatio	on Ot	her (Describ	e):	_							_	· ` `
					stribution Syst	em:	Free Chle	orine	☐ Coi	nbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
					Calculations, or									
	Days					CT Calcul					UV	Dose		
	Plant						Lowest CT						Lowest	
	Staffed				Lowest Residual Disinfectant	Disinfectant Contact Time	Provided Before or						Residual Disinfectant	
	or Visited				Concentration	(T) at C	at First	•			Lowest	Minimum		
	. by		Net Quantity		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating	UV Dose	at Remote	Emergency or Abnormal Operating
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of	CT ·	UV Dose,	Required,	Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if		mW-	mW- sec/cm ²	Distribution	Involves Taking Water System Components
Month	"X")	· · · · · · · · · · · · · · · · · · ·	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	mg-min/L	sec/cm ²	sec/cm	System, mg/L	Out of Operation
2		24 24	3,000						<u> </u>	<u> </u>			1,2	
3		24	20 000										1.3	
4		24	1 < 000					İ					1.	
5	1	24	19000										1. 0	
6		24	30000					ļ <u>.</u>			ļ.,		1.1	
7		24	000کـد										0.7	
8		24 24	2 4 000	· · · · · · · · · · · · · · · · · · ·		-		-			-	· · · · · · · · · · · · · · · · · · ·	1.8	
9		24	1 9 000 2 1 000					 					1.1	-
11		24	18 000									·	1.3	
12		24	18 000	-									1.0	
13		24	2 (000										1.0	
14		24	9 000									_	1.6	
15		24	.17000										ļ <u>.</u>	
16		24	25000						· · · · · · · · · · · · · · · · · · ·		-		1.2	
17		24 24	(7 000 (5 000										1.0	BT NN
19		24	22,000		<u> </u>								1.2	131 00
20		24	000 م2										1.1	
21		24	20 000										1.0	
22		24	25 000								_			
23		24	29000					ļ		ļ			1.0	
24	/	24	(9 000					 					0.2	
26		24 24	/ 6 ·000	•						<u> </u>			1.0	
27		24	27 000		-			-					1.3	
28	/	24	20 000										6.5	
29		24	20 000										4 ,7	
30	_	24	15 000										1.8	
31	/	24	20 000			<u> </u>	<u> </u>						0.9	
Total			(8) 000											
Averag			31 000											
Maxim	uni		3 000											



A. Public Water System (PWS) Information PWS Name: Shangri-la by the Lake PWS Type: \[\begin{array}{c} Community Non-Transient Non-Community Transient q Transient Transient Transient	I. General Information	for the Month/Year of: Jan.	/2011			
PWS Name: Shangri-la by the Lake PWS Type: Community Non-Transient Non-Community Transient Non-Community Consecutive Number of Service Connections at End of Month: 168 PWS Owner: Shangri-la by the Lake Utilities, 1214 West Route 27, Leaf River, IL 61047 Contact Person's Flangri-la by the Lake Utilities, 1214 West Route 27, Leaf River, IL 61047 Contact Person's Flangri-la by the Lake Utilities, 1214 West Route 27, Leaf River, IL 61047 Contact Person's Flangri-la by the Lake Utilities, 1214 West Route 27, Leaf River, IL 61047 Contact Person's Flangri-la By the Lake Utilities, 1214 West Route 27, Leaf River, IL 61047 Contact Person's Flangri-la State: Fl Zip Code: 34748 Contact Person's Telephone Number: 352-787-2493 Contact Person's E-Mail Address: generalutilities@AOL.com By Water Treatment Plant Information Plant Name: Shangri-la Plant Address: 100 Shangri-la Blvd. City: Leesburg State: Fl Zip Code: 34788 Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 180,000 Plant Category (per subsection 62-699.310(4), F.A.C.): IV 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: T. Felton C 0001241 Varies Other Operators: K Ramsood C 0015224 Varies D Harris C 0014540 Varies T. Levi C 0012419 Varies T. Levi C 0012419 Varies				7	1 0	
PWS Type: Community Non-Transient Non-Community Transient Non-Community Consecutive					PWS Identification N	umber: 3354028
Number of Service Connections at End of Month: 168 PWS Owner: Shangri-la by the Lake Utilities, 1214 West Route 27, Leaf River, IL 61047 Contact Person's Thomas M. Felton Contact Person's Mailing Address: 7621 Frog Log Contact Person's Telephone Number: 352-787-2493 Contact Person's E-Mail Address: generalutilities@AOL.com Water Treatment Plant Information Plant Name: Shangri-la Plant Address: 100 Shangri-La Blvd. Type of Water Treated by Plant: Saw Ground Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 180,000 Plant Category (per subsection 62-699,310(4), F.A.C.): IV Licensed Operators Lead/Chief Operators: K Ramsood Chief Operators: K Ramsood C 0012241 C 001241 C 0012911 Varies T. Levi C 0012911 Varies			-Community Transie	nt Non-Community		
PWS Owner: Shangri-la by the Lake Utilities, 1214 West Route 27, Leaf River, IL 61047 Contact Person: Thomas M. Felton Contact Person's Mailing Address: 7621 Frog Log Contact Person's Telephone Number: 352-787-2493 Contact Person's Telephone Number: 352-787-2493 Contact Person's Fax Number: 352-326-8756 Contact Person's E-Mail Address: generalutilities@AOL.com B. Water Treatment Plant Information Plant Mame: Shangri-la Plant Address: 100 Shangri-La Blvd. Type of Water Treated by Plant: Permitted Maximum Day Operating Capacity of Plant, gallons per day: 180,000 Plant Category (per subsection 62-699.310(4), F.A.C.): IV Licensed Operators Lead/Chief Operator: DHand Sampson Ramson Contact Person's Title: Operator Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's E-Mail Address: 206-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-36-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-36-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-36-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-36-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-36-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-36-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-36-8756 City: Leesburg Sax Number: 352-326-8756 City: Leesburg Sax Number: 352-326-8756 Plant Calegory Sax Number: 352-326-8756					Total Control of the	
Contact Person's Mailing Address: 7621 Frog Log City: Leesburg State: Fl Zip Code: 34748 Contact Person's Telephone Number: 352-787-2493 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Theelphone Number: 352-326-8756 Contact Person's Theelphone Number: 352-326-8756 Plant Address: 100 Shangri-la Blvd. Type of Water Treated by Plant: Saw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 180,000 Plant Category (per subsection 62-699.310(4), F.A.C.): IV 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: T. Felton C 0002241 Other Operators: R R amsood C 0015224 Other Operators: C 0011524 T. Levi C 0011524 T. Levi C 00115214 Varies T. Levi C 00115219 Varies T. Levi C 00115211 Varies			te 27. Leaf River, IL 61047			
Contact Person's Mailing Address: 7621 Frog Log Contact Person's Telephone Number: 352-787-2493 Contact Person's F-Mail Address: generalutilities@AOL.com B. Water Treatment Plant Information Plant Name: Shangri-la Plant Address: 100 Shangri-La Blvd. Type of Water Treated by Plant: Permitted Maximum Day Operating Capacity of Plant, gallons per day: 180,000 Plant Category (per subsection 62-699.310(4), F.A.C.): IV Licensed Operators Lead/Chief Operators: K Ramsood C 0001524 Varies T. Levi C 00012911 Varies City: Leesburg City: Leesburg City: Leesburg State: Fl Zip Code: 34748 Contact Person's Fax Number: 352-36-8756 City: Leesburg State: Fl Zip Code: 34748 Plant Telephone Number: 352-787-2493 Plant Telephone Number: 352-787-2493 Plant Address: 100 Shangri-La Blvd. City: Leesburg State: Fl Plant Telephone Number: 352-787-2493 Plant Address: 100 Shangri-La Blvd. City: Leesburg State: Fl Plant Telephone Number: 352-787-2493 Plant Address: 100 Shangri-La Blvd. City: Leesburg State: Fl Plant Telephone Number: 352-787-2493 Plant Address: 100 Shangri-La Blvd. City: Leesburg State: Fl Plant Telephone Number: 352-787-2493 Plant Address: 100 Shangri-La Blvd. City: Leesburg State: Fl Plant Telephone Number: 352-787-2493 Plant Address: 100 Shangri-La Blvd. City: Leesburg State: Fl Plant Telephone Number: 352-787-2493 Plant Address: 100 Shangri-La Blvd. City: Leesburg State: Fl Plant Telephone Number: 352-787-2493 Plant Address: 100 Shangri-La Blvd. City: Leesburg State: Fl Plant Address: 100 Shangri-La Blvd. Plant Class (per subsection 62-699.310(4), F.A.C.): C Day (S) Shifts (per subsection 62-699.310(4), F.A.C.): C Outer			, , , , , , , , , , , , , , , , , , , ,	Contact Person's Ti	itle: Operator	
Contact Person's Telephone Number: 352-787-2493 Contact Person's E-Mail Address: generalutilities@AOL.com B. Water Treatment Plant Information Plant Name: Shangri-la Plant Address: 100 Shangri-La Blvd. Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 180,000 Plant Category (per subsection 62-699.310(4), F.A.C.): IV Licensed Operators: Name License Class License Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 Contact Person's Fax Number: 352-326-8756 City: Leesburg State: Fl Zip Code: 34788 Tip Code: 34788 Type of Water Treated by Plant: Raw Ground Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 180,000 Plant Category (per subsection 62-699.310(4), F.A.C.): C License Number Day Code: 34788 License Number: 352-326-8756 City: Leesburg State: Fl Zip Code: 34788 Tip Code: 34788 Type of Water Treated by Plant Plant Category State: Fl Zip Code: 34788 Tip Code: 34788 Type of Water Treated by Plant Telephone Number: 352-326-8756 City: Leesburg State: Fl Zip Code: 34788 Tip Code: 34788 Type of Water Treated by Plant Telephone Number: 352-326-8756 City: Leesburg State: Fl Zip Code: 34788 Type of Water Treated by Plant Telephone Number: 352-787-2493 To City: Leesburg State: Fl Zip Code: 34788 To Code: 34788 Type of Water Treated by Plant Telephone Number: 352-787-2493 Plant Category State: Fl Zip Code: 34788 Type of Water Treated by Plant Telephone Number: 352-787-2493 Plant Category State: Fl Zip Code: 34788 Type of Water Treated by Plant Telephone Number: 352-787-2493 Plant Category State: Fl Zip Code: 34788 Type of Water Treated by Plant Telephone Number: 352-787-2493 Plant Category State: Fl Zip Code: 34788 To Code: 34788 To Code: 34788 To Code: 34788 To Code: 34788 To Code: 34788 To Code: 34788 To Code: 34788 To Cod						Zip Code: 34748
Contact Person's E-Mail Address: generalutilities@AOL.com B. Water Treatment Plant Information			_		ax Number: 352-326-8756	1
State City						1139
Plant Address: 100 Shangri-La Blvd. Type of Water Treated by Plant: Raw Ground Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 180,000 Plant Category (per subsection 62-699.310(4), F.A.C.): IV Licensed Operators Name License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operators: K Ramsood D Harris C 0015224 D Harris C 0014540 T. Levi C 0012911 Varies T. Levi C 0012911 Varies					400	
Plant Address: 100 Shangri-La Blvd. Type of Water Treated by Plant: Raw Ground Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 180,000 Plant Category (per subsection 62-699.310(4), F.A.C.): IV Licensed Operators Name License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operators: K Ramsood D Harris C 0015224 D Harris C 0014540 T. Levi C 0012911 Varies T. Levi C 0012911 Varies	Plant Name: Shangri-	a			Plant Telephone Num	ber: 352-787-2493
Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 180,000 Plant Category (per subsection 62-699.310(4), F.A.C.): IV 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: T. Felton C 0002241 Varies Other Operators: K Ramsood C 0015224 Varies D Harris C 0014540 Varies G. Murray C 0012419 Varies T. Levi C 0012911 Varies				City: Leesburg		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 180,000 Plant Category (per subsection 62-699.310(4), F.A.C.): IV Licensed Operators Name License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operator: T. Felton C 0002241 Varies Other Operators: K Ramsood D Harris C 0014540 Varies T. Levi C 0012419 Varies T. Levi C 0012911 Varies			Purchased Finished			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV 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: T. Felton C 0002241 Varies Other Operators: K Ramsood C 0015224 Varies D Harris C 0014540 Varies G. Murray C 0012419 Varies T. Levi C 0012911 Varies				1 7022		
Licensed Operators Name License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operator: T. Felton C 0002241 Varies Other Operators: K Ramsood C 0015224 Varies D Harris C 0014540 Varies G. Murray C 0012419 Varies T. Levi C 0012911 Varies				Plant Class (per sub	osection 62-699.310(4), F.A.C.):	C
Lead/Chief Operator: T. Felton C 0002241 Varies Other Operators: K Ramsood C 0015224 Varies D Harris C 0014540 Varies G. Murray C 0012419 Varies T. Levi C 0012911 Varies			License Class	'A		
Other Operators: K Ramsood C 0015224 Varies D Harris C 0014540 Varies G. Murray C 0012419 Varies T. Levi C 0012911 Varies				CONTRACTOR STATEMENT OF THE STATEMENT OF	THE STATE OF THE S	
D Harris C 0014540 Varies G. Murray C 0012419 Varies T. Levi C 0012911 Varies	CONTRACTOR OF THE SECRETARY AND DESCRIPTION OF THE SECRETARY AND D		C		Vari	es
T. Levi C 0012911 Varies	O PARTIE	D Harris	С	0014540	Vari	es ,
		G. Murray	С	0012419	Vari	es
		100 To 100				
		T. Levi	С	0012911	Vari	es
		188 cal	J			
		TOTAL OF THE PERSON OF THE PER	mana, Indian	ances let use a se	DEED TO US TO THE OWNER OF THE OWNER OW	
II. Certification by Lead/Chief Operator	THE CONTROL OF THE PARTY OF	MARKET ME THE CHARLES IN	the Process of Page Process of the Page	The fill and back,	the fine brogadus (no)	muse of a multiple people.
II. Certification by Lead/Chief Operator				DESCRIPTION OF THE PERSON OF T	Devil 100 to 100	SOUR PROPERTY OF THE PARTY OF THE PARTY.
, 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			and of the service of			
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 the						
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 the 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	ates; and (2) if applicable	, appropriate treatment process performa	ance records. Furthermore,	agree to provide the	ese additional operations records	to the PWS owner so the PW
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 the plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PVS.						
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 the 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, apprepriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PVS.	owner can retain them to	ether with copies of this report, at a con	venient location for at least t	en years.		
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 the plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years. 3-3-11 Thomas M. Felton 0002241	owner can retain them, to	ether with copies of this report, at a con		en years.	0002241	

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

PUBLIC WATER SYSTEM INFORMATION (to be completed by sampler – please type or print legibly)	
System Name: Shangri-La	PWS I.D. # 3354028
System Type (check one): Community Nontransient Noncommunity Address: Nontransient Noncommunity	Transient Noncommunity
City: Lesburg ZIP Code: 34	<u>4</u> 788
Phone # Fax #: E-Mail Addres	s:
SAMPLE INFORMATION (to be completed by sampler)	
Sample Number: 11-01-539 Sample Date: 01/18/11 Sample Time: 0840 AM PM (Circle On	e)
Sample Location (be specific): POE Location Code:	
Disinfectant Residual (Required when reporting results for trihalomethanes and haloacetic acids):mg/L	Field pH:
Sample Type (Check Only One) Reason(s) for Sample	e (Check all that apply)
☐Distribution ☐Routine Compliance with 62-550	Replacement (of invalidated Sample)
☐ Confirmation of MCL Exceedance*	☐Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550) Composite of Multiple Sites**	Clearance (permitting)
Raw (at well or intake)	
Max Residence Time Sampling Procedure Used or Other Comment	ds:
☐Ave Residence Time	
Near First Customer	
*See 62-550.500(6) for requirements and restrictions. And 62-550.512(3) for nitrate or nitrite exceedances.	**See 62-550.550(4) for requirements and attach a results page for each site.
SAMPLER CERTIFICATION	
1, D Harris Perator (Print Tame)	itle) , do HEREBY CERTIFY
that the above public water system and sample collection information is complete and correct.	,
	5 Feb 2011
	ampler's Fax #:
Sampler's E-mail:	

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

LABORATORY CERTIFICATION INFORMATION	(to be completed by la	b – please type or print legibly)
Lab Name: Tri-Tech Laboratories, Inc.		Florida DOH Certification #: E83294
Certification Expiration Date: June 30, 2011		
		ATTACH CURRENT DOH ANALYTE SHEET*
Address: 7240 Old Cheney Highway Orlando, FL	32807 Phone #	<u>407-275-8463</u>
Were any analyses subcontracted? Yes No	lf yes, please provi	de DOH certification number(s):
		ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB*
ANALYSIS INFORMATION (to be completed by lab)	Date Sa	mple(s) Received: 01/18/11
PWS ID (From Page 1): 3354028	Sample	Number (From Page 1):1
Lab Assigned Report # or Job ID: <u>11-01-539</u>		
Group(s) Analyzed & Results attached for complian	nce with Chapter 62	-550, F.A.C. (Check all that apply):
Inorganics Synthetic Organics All Except Asbestos All 30 Partial All Except Dioxin Nitrate Partial Nitrite Dioxin Only Asbestos	Volatile Organics ☐All 21 ☐Partial	Disinfection Byproducts Radionuclides Secondaries ☐ Trihalomethanes ☐ Single Sample ☐ All 14 ☐ Haloacetic Acids ☐ Qtrly Composite** ☐ Partial ☐ Bromate ☐ Bromate
5	LAB C	ERTIFICATION
1, Tamora (a)		GA Director, do HEREBY CERTIFY
(Print Name)	atod mant all requires	(Print Title) nents of the National Environmental Laboratory Accreditation Conference (NELAC).
that an attached alialytical data are correct and unless in	oteu meet an requiren	_ `
Signature:		Date:
report, possible enforcement against the public water ** Please provide radiological sample dates & locations t CONFIRMATION & NOTIFIC.	system for failure to s for each qu <mark>arte</mark> r. ATION IS REQUIRED	nd a current Analyte Sheet for the attached analysis results will result in rejection of the ample, and may result in notification of the DOH Bureau of Laboratory Services. WITHIN 24 HRS FOR NITRATE OR NITRITE MCL EXCEEDANCES H A "U" QUALIFIER. (Non-detects reported as "BDL" or with a "<" are not acceptable.)
COMPLIANCE DETERMINATION (to be completed	by DEP or DOH atta	ach notes as necessary)
Sample Collection & Analysis Satisfactory: Yes]No	Replacement Sample or Report Requested (circle or highlight group(s) above)
Person Notified:	Date Notified:	DEP/DOH Reviewing Official:
Reporting Format 62-550,730 Effective January 1995, Revised February 2010		Page 2 of 9

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

INORGANIC CONTAMINANT 62-550.310(1)

Report Number / Job ID: 11-01-539

PWS ID (From Page 1): 3354028

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification#
1040	Nitrate (as N)	10	Mg/L	0.10	U	353.2	0.10	01/19/11	1200	E83294
1041	Nitrite (as N)	1	Mg/L	0.10	U	353.2	0.10	01/19/11	1015	E83294
1005	Arsenic	0.010	Mg/L	NA						E
1010	Barium	2	mg/L	NA						E
1015	Cadmium	0.005	mg/L	NA						E
1020	Chromium	0.1	mg/L	NA						E
1024	Cyanide	0.2	mg/L	NA						E
1025	Fluoride	4.0	mg/L	NA						E
1030	Lead	0.015	mg/L	NA						E
1035	Mercury	0.002	mg/L	NA						E
1036	Nickel	0.1	mg/L	NA		,				E
1045	Selenium	0.05	mg/L	NA						E
1052	Sodium	160	mg/L	NA						E
1074	Antimony	0.006	mg/L	NA						E
1075	Beryllium	0.004	mg/L	NA						E
1085	Thallium	0.002	mg/L	NA						E
1094	Asbestos	7 MFL	MFL	NA						E

PWS	Identific	ation Nu	mber:	33	3540.	28	Plant Nan	ne: 51	1911	gri - 2	-9 6	y th	e La	Ke	
ти. г	aily Da	ta for th	e Mont	h/Yes	ar of:	Feb				<u></u>		<u>, </u>			
						n/Removal: *	Free	Chlorine		Chlorine	Dioxide	ПС	zone	Combin	ed Chlorine (Chloramines)
Πu	traviolet	Radiatio	on [Oth	ner (Describ	e):				,					one canorano (canoranames)
						stribution Syste	em: 🔯	Free Chlo	orine	Cor	nbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
						Calculations, or									
	Days		İ				CT Calcul	ations				UV:	Dose		
	Plant							Lowest CT						Lowest	
	Staffed					Lowest Residual	Disinfectant	Provided					ļ	Residual	
	or Visited			ļ		Disinfectant Concentration	Contact Time (T) at C	Before or at First				Lowest	Minimum	Disinfectant Concentration	
	by		Net Qua	ntity		(C) Before or at	Measurement	Customer	Temp.		Minimum			at Remote	Emergency or Abnormal Operating
Day of	Operator	Hours	of Finis	- 1		First Customer	Point During	During	of	pH of	CT	UV Dose,	Required,	Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Wate		Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,		Required,	mW-	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation			Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	mg-min/L	sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1		24	24	000					 					0.6	
3		24	32	000					<u> </u>					1.1	
4		24	14	000										06	
.5		24	27	000											
6	-	24	27	000										1-1	
7		24	19	000							ļ <u>.</u>			1-1	0
8		24	11	000										1.2	BT
9		24	31	000					1		 	 		1.0	
10		24 24	18	000		 				 	 			0.2	
12		24	30	000							+		 	<i>O</i>	
13		24	30	000					ļ				†	1.0	
14		24	12	000]		0-7	
15		24	27	000					ļ		<u> </u>	↓		1.0	
16		24	37	000					ļ .		ļ		 	1.0	
17		24	26	000			<u> </u>	 		•	 	 	1	1.0	
18	-	24	38	000				<u> </u>	 		<u> </u>	 	†	7.0	
20		24	39	000							!-			1.2	
21		24	21	000		<u> </u>								1.2	
22		24	18	000										1.3	
23		24	42	000					1			1		1.0	
24		24	30	000		ļ	ļ		1		ļ	-		1.0	
25		24	1.1.7	000		 	 	 	-		 	 		1.0	
26		24	38	000					-		+	1		0.3	
28	-	24	15	000								1	1	1.1	
29	† · · · · · · · ·		1												
30										Ţ	<u> </u>	ļ			
31						1		<u>L</u>			1	L		L	
Total			7/9	000	4										
Averag			26	000											
IAIGXIU	IANI		704	000	J										

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



			2011									
			2011									
A .]	Public Water System (P				TRATE ALL CONTROL	N 2254020						
	PWS Name: Shangri-la					n Number: 3354028						
		Community Non-Transient Non-	Community Transie	nt Non-Community	Consecutive							
	Number of Service Cor	nnections at End of Month: 168		Total Population S	erved at End of Month: 328							
	PWS Owner: Shangri-	a by the Lake Utilities, 1214 West Rout	te 27, Leaf River, IL 61047									
.	Contact Person: Thoma			Contact Person's T								
		ng Address: 7621 Frog Log		City: Leesburg	State: Fl	Zip Code: 34748						
	Contact Person's Telep	hone Number: 352-787-2493		Contact Person's Fa	ax Number: 352-326-8756							
	Contact Person's E-Ma	il Address: generalutilities@AOL.com				···						
В.	Water Treatment Plant											
	Plant Name: Shangri-la	a				Jumber: 352-787-2493						
	Plant Address: 100 Sha			City: Leesburg	State: Fl	Zip Code: 34788						
	Type of Water Treated		Purchased Finished V	Water								
		Day Operating Capacity of Plant, gallons	per day: 180,000									
	Plant Category (per subsection 62-699.310(4), F.A.C.): IV Plant Class (per subsection 62-699.310(4), F.A.C.): C											
	Licensed Operators	Name	License Class	License Number	Day(s)/S	hift(s) Worked						
	Lead/Chief Operator:	T. Felton		0002241		Varies						
	Other Operators:	K Ramsood	C	0015224		Varies						
	D Harris C 0014540 Varies											
		G. Murray	C	0012419		Varies						
		T. Levi	C	0012911		Varies						
٠,												
	Carlie d'anti-	I/Cli-COto-										
	Certification by Lead	eatment plant operator licensed in Florid	a and the lead/shief on sente	- of the	ant plant identified in Bort I o	Ethic report I contify that the						
		is report is true and accurate to the best										
		is report is true and accurate to the best of 160 or other applicable standards refere										
		ay that a licensed operator staffed or vis										
		apprendiate treatment process performa										
					ese adultional operations reco	rds to the PWS owner so the PWS						
	HEI CHI FEMIL MEIN, TOE	pies of this report, at a con-	venient location for at least	een years.								
_		3/1/1.	Thomas M. Felton		000224	1						
-		2/4111				,						
25	nator and Date		Printed or Typed Name		License	Number						

PWS	PWS Identification Number: - 335/335 Plant Name: - Ridge rest													
П. 1	Daily Da	ta for th	e Month/Ye	ar of:	March	/2011		<u>u</u>						
Mear	s of Ach	ieving Fo	our-Log Viru	s Inactivation	n/Removal: *		Chlorine		Chlorine	Dioxide)zone	Combin	ed Chlorine (Chloramines)
		t Radiatio		her (Describ					•		<u>—</u>		_	, , ,
Type	of Disin	fectant R	esidual Main	tained in Di	stribution Syst	em: 🖂	Free Chle	orine	Cor	mbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
				C	Calculations, or	UV Dose, to De	monstrate Fo	our-Log	Virus Inactiv	ation, if Ap				
	Days					CT Calcul					UV	Dose	_	1
	Plant						Lowest CT						Lowest Residual	
	Staffed or				Lowest Residual Disinfectant	Disinfectant Contact Time	Provided Before or						Disinfectant	
	Visited				Concentration	(T) at C	at First				Lowest	Minimum	Concentration	
	by		Net Quantity		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating	1	at Remote	Emergency or Abnormal Operating
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of	CT	UV Dose,		Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,		Required,	mW-	mW-,	Distribution	Involves Taking Water System Components
Month			Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	.°C	Applicable	mg-min/L	sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
2		24 24	37 000 34 000								-		69	
3		24	18 000							 	 		10	
4		24	2 中 000							•			7/7	
5	<u> </u>	24	35 000											
6		24	33 000										0.9	
7		24	30000											
8		24	1 9 000										18	
9		24	43 000						ļ					
10		24	22 000							-	ļ		1,0	
11		24 24	2D 000							-			1, 4	
12		24	37 000								· · · · · · · · · · · · · · · · · · ·	 	1,3	
14	_	24	28 000									 	1,0	
15		24	29 000										1.1	BT
16	_	24	45 000										0.2	
17	<i></i>	24	27000										10	
18		24	33 000					ļ			ļ		1,0	
19		24	42 000					ļ						
20		24	4 000							ļ <u></u>	ļ		0.2	
21		24 24	34 000 24 000										1.3	
23		24	52 000								 	· · · · · · · · · · · · · · · · · · ·		
24		24	28 000							t			1,5	
25	/	24	27 000	•							 	†	0.7	
26		24	47 000		<u> </u>								- •	
27		24	49 000					<u> </u>					0.4	
28		24	27 000										1.3	
29		24	24 000										12	
30		24	. 32 000										1.1	
31 Total		24	27 000			L			L	I			1.0	I
Total Avera	TP		32,000											
Maxim			52 000											

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See page 4 for instructions. I. General Information for the Month/Year of: A. Public Water System (PWS) Information PWS Identification Number: 3354028 PWS Name: Shangri-la by the Lake Transient Non-Community Consecutive Non-Transient Non-Community □ Community PWS Type: Total Population Served at End of Month: 328 Number of Service Connections at End of Month: 168 PWS Owner: Shangri-la by the Lake Utilities, 1214 West Route 27, Leaf River, IL 61047 Contact Person's Title: Operator Contact Person: Thomas M. Felton Zip Code: 34748 State: Fl City: Leesburg Contact Person's Mailing Address: 7621 Frog Log Contact Person's Telephone Number: 352-787-2493 Contact Person's Fax Number: 352-326-8756 Contact Person's E-Mail Address: generalutilities@AOL.com B. Water Treatment Plant Information Plant Telephone Number: 352-787-2493 Plant Name: Shangri-la Zip Code: 34788 State: Fl Plant Address: 100 Shangri-La Blvd. City: Leesburg Purchased Finished Water Raw Ground Water Type of Water Treated by Plant: Permitted Maximum Day Operating Capacity of Plant, gallons per day: 180,000 Plant Category (per subsection 62-699.310(4), F.A.C.): IV Plant Class (per subsection 62-699.310(4), F.A.C.): C Day(s)/Shift(s) Worked License Number License Class Licensed Operators Name 0002241 Varies Lead/Chief Operator: T. Felton Varies 0015224 C K Ramsood Other Operators: Varies C 0014540 D Harris Varies C 0012419 G. Murray 0012911 Varies C T. Levi H. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this seport, at a convenient location for at least ten years. 0002241 Thomas M. Felton

License Number

Printed or Typed Name

ionature and Date

PWS	Identific	ation Nu	mber: -	3	3540	28	Plant Nar	ne: - 🔰	har	gri	-la	by +	he L	ake	
П. І	Daily Da	ta for th	e Mont	h/Ye	ar of:	April	/2011			<u> </u>					
			our-Log	Viru	s Inactivatio	on/Removal: *		Chlorine		Chlorine	Dioxide)zone	Combin	ed Chlorine (Chloramines)
U	ltraviolet	Radiatio	on [OtI	her (Describ	œ):									
Type	of Disini	fectant R	esidual	Main	tained in Di	istribution Syst	em: 🛛	Free Chl	orine	Coi	mbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
			-		C	T Calculations, or	UV Dose, to De	monstrate F	our-Log	Virus Inactiv	ation, if A	pplicable*			·
	Days			[CT Calcul					UV	Dose	[
!	Plant			-				Lowest CT			ļ			Lowest Residual	
	Staffed					Lowest Residual	Disinfectant	Provided						Disinfectant	
į	or Visited			1		Disinfectant Concentration	Contact Time (T) at C	Before or at First				Lowest	Minimum		
	A 1218CET	·	Net Qua	ntity		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating	1	at Remote	Emergency or Abnormal Operating
Day of	Operator	Hours	of Finis			First Customer	Point During	During	of	pH of	CT	UV Dose,	Required,	Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Wate	•	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	Required,	mW-	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation		t, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	mg-min/L	sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1		24	23	000							<u> </u>			1.0	
2		24	25	000							<u> </u>	 	<u> </u>	1-3	
3		24	26	000				_				ļ		1.3	
4		24	29	000						ļ		 -	ļ	1.0	31
5		24	18	000		1		_		<u> </u>	 			1.2	
6		24 24	30	000			<u> </u>	 				 	<u> </u>	1.0	
8		24	24	000				-	-		 	 		0.7	
9		24	36	000		 	 	-	 			 			
10		24	36	000					 		 			1.1	
11		24	34	000						-				1.0	
12		24	23	000										1-1	
13		24	32	000									<u></u>	1.0	
14		24	23	000									ļ	1.1	
15		24	30	000										0.9	
16		24	39	000								 -		0.7	
17		24	39	000										0.6	
18		24 24	77 43	000			 		-		 			1.0	
19 20		24	45	000		 					 	 		1.7	
21		24	36	000							-			1.4	
22		24	14	000	,						-			0.9	
23		24	43	000	•				 -		 				
24	~	24	66	000	****									0.3	
25	'	24	30	000	1									0.8	
26	-	24	32	000										0.2	
27		24	46	000										1.1	
28		24	39	000										1.0	
29		24	34	000					ļ					0.8	
30		24	43	000											
Tatal	L		100/	,			1		l	L	L	L			
Total			100/	000											
Averag			77	000											
IVIAXIM	min		<u> </u>	000											

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

See page 4 for instructions.

172	C	Constitution of the section of	Lance Acit	/ 201 1					****		
	General Information in Public Water System (P		<i></i>	2011							
A.			II			· · · · · · · · · · · · · · · · · · ·		PWS Identification	N 2254020		
	PWS Name: Shangri-la		N T	<u></u>	[] T:	nt Non-Community		· · · · · · · · · · · · · · · · · · ·	Number: 3334028		
		Community [Non-Transient Non-	-Community	1 ransie			nsecutive			
	Number of Service Co				** ***	Total Population Ser	ved at E	nd of Month: 328			
	PWS Owner: Shangri-		tilities, 1214 West Rou	te 27, Leaf Rive	r, IL 61047	1					
	Contact Person: Thom					Contact Person's Tit	le: Opera		G. O. 1. 04540		
	Contact Person's Maili					City: Leesburg State: Fl Zip Code: 34748					
	Contact Person's Telep					Contact Person's Fax	<u>c Number</u>	r: 352-326-8756			
	Contact Person's E-Ma		ralutilities@AOL.com								
В.	Water Treatment Plant	Information									
	Plant Name: Shangri-la								mber: 352-787-2493		
	Plant Address: 100 Sh					City: Leesburg		State: Fl	Zip Code: 34788		
	Type of Water Treated	i by Plant:	Raw Ground Water	Purchase	d Finished	Water					
	Permitted Maximum I	Day Operating Ca	apacity of Plant, gallons	s per day: 180,00	00				<u> </u>		
	Plant Category (per su	Plant Category (per subsection 62-699.310(4), F.A.C.): IV Plant Class (per subsection 62-699.310(4), F.A.C.): C									
	Licensed Operators		Name	Li	cense Class	License Number		Day(s)/Shi	ft(s) Worked		
	Lead/Chief Operator:	T. Felton			С	0002241		V	aries		
	Other Operators:	K Ramsood			С	0015224			aries		
		D Harris			С	0014540	0014540 Varies				
		G. Murray			С	0012419 Varies			aries		
		T. Levi			С	0012911	aries				
									•		
		1									
	. Certification by Lead										
I, t	he undersigned water tro	eatment plant ope	erator licensed in Florid	da, am the lead/o	chief operate	or of the water treatme	nt plant i	dentified in Part I of i	this report. I certify that the		
									s used at this plant conform to		
									ional operations records for this		
pla	nt were prepared each d	lay that a license	d operator staffed or vis	sited this plant d	luring the m	onth indicated above:	(1) record	ds of amounts of cher	nicals used and chemical feed		
rat	es; and (2) if applicable	, appropriate trea	process performa	ance records. Fi	urthermore,	I agree to provide the	se additio	nal operations record	is to the PWS owner so the PWS		
OW	ner can retain them, toe	etl conie	ans report, at a con	venient location	for at least	ten years.					
			5/3/11	Thomas M. Fe	elton			0002241			
SH	natrie and Date			Printed or Tyr	oed Name		,	License N	Number		
	•										



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

See page 4 for instructions.

A. Public Water System (PWS) Information PWS Name: Shangri-la by the Lake PWS Type: Community Non-Transient Non-Community Number of Service Connections at End of Month: 168 Total Population Served	PWS Identification N Consecutive at End of Month: 328	umber: 3354028							
PWS Name: Shangri-la by the Lake PWS Type: Community Non-Transient Non-Community Transient Non-Community	Consecutive	umber: 3354028							
PWS Type: Community Non-Transient Non-Community Transient Non-Community	Consecutive	umber: 3354028							
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
Number of Commissions at End of Month, 169	at End of Month: 328								
	Total Population Served at End of Month: 328								
PWS Owner: Shangri-la by the Lake Utilities, 1214 West Route 27, Leaf River, IL 61047									
Contact Person: Thomas M. Felton Contact Person's Title: O									
	City: Leesburg State: Fl Zip Code: 34748								
Contact Person's Telephone Number: 352-787-2493 Contact Person's Fax Nu	mber: 352-326-8756								
Contact Person's E-Mail Address: generalutilities@AOL.com									
B. Water Treatment Plant Information									
Plant Name: Shangri-la	Plant Telephone Num	ber: 352-787-2493							
Plant Address: 100 Shangri-La Blvd. City: Leesburg	State: Fl	Zip Code: 34788							
Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water									
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 180,000									
Plant Category (per subsection 62-699.310(4), F.A.C.): IV Plant Class (per subsection 62-699.310(4), F.A.C.): C									
Licensed Operators Name License Class License Number	Day(s)/Shift								
Lead Chief Operator: T. Felton C 0002241	Vari	es							
Other Operators: K Ramsood C 0015224	Vari	es							
D Harris C 0014540	Vari	es							
G. Murray C 0012419	Varies								
T. Levi C 0012911	Varies								
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									
information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking									
NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certification of the control of the contro									
plant were prepared each day that a licensed oper or staffed or visited this plant during the month indicated above: (1) re	ecords of amounts of chemi-	cals used and chemical feed							
rates; and (2) if applicable, appropriate traument process priormance records. Furthermore, I agree to provide these ad-	ditional operations records	to the PWS owner so the PWS							
owner can retain them, together with copies of this report, at a convenient location for at least ten years.									
//a/// Thomas M. Folton	0002243								
Signature and Date Garage Thomas M. Felton Printed or Typed Name Prin	0002241								
Signature and Date Printed or Typed Name	License Nu	mber							

Page 1

PWS	Identific	ation Nu	mber: -	33 <i>5</i> 4	1028	Plant Nar	ne: - 🌫	ha	ngri.	-la	by -	the	Lake	
II. I	Daily Da	ta for th	e Month/Ye	ar of:	May	/2011	,				t			
					on/Removal: *		Chlorine		Chlorine	Dioxide		zone	Combin	ed Chlorine (Chloramines)
□บ	traviole	Radiatio	on 🗍 Otl	her (Describ	e):	_			-					-
Туре	of Disin	fectant R	esidual Main		stribution Syst		Free Chle				hlorine (Chlorami	nes)	Chlorine Dioxide
				C	Calculations, or			our-Log	Virus Inactiv	ation, if Ap				
	Days		, ,		·	CT Calcul		,		,	UV	Dose		
	Plant					5 0.11 6 1 1	Lowest CT	ĺ					Lowest Residual	
	Staffed			•	Lowest Residual Disinfectant	Disinfectant Contact Time	Provided Before or			ļ		,	Disinfectant	
	or Visited				Concentration	(T) at C	at First		ĺ		Lowest	Minimum	Concentration	
Ì	by		Net Quantity		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating		at Remote	Emergency or Abnormal Operating
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of	CT	UV Dose,	Required,	Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,		Required,	mW-	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	<u>°C</u>	Applicable	mg-min/L	sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1		24	38 000								 		1.0	
2		24	3 000		, ž					 	-		1,1	
3	-	24 24	26 000		 						·		1.1	
3	-/-	24											1.2	BT
6	/	24	27 000							· · · · · ·			65.8	
7		24	45 000											
8	./	24	45 000										1.0	
9	-	24	21 000										1.0	
10	1	24	43 000		1								0.7	
11		24	45 000										0.4	
12	1	24	37 000					<u></u>					0.6	
13	7	24	4/ 000					<u> </u>			<u> </u>		0.9	
14		24	42 000							ļ ,	ļ			
15	V	24	43 000).O	
16	7	24	27 000		 				<u> </u>		 		0.6	
17	<u> </u>	24	80 000 49 000	<u> </u>	_					 		 	0.2	
19	1	24	33 000		 						 		1-7	<u> </u>
20	//	24	30 000		 						 		1.0	
21		24	5/ 000	1.5										
22		24	5/ 000				<u> </u>						1.1	
23	1	24	29 000										1-0	
24		24	25 000					Ī					1.0	
25		24	39.000										1 - 1	
. 26	1,	24	4/ 000										0.7	
27		24	26 000										1.0	
28_		24	32 000											
29	/	24	<i>33</i> 000				ļ <u> </u>	<u> </u>		ļ <u>.</u>	1		0.5	
30	//	24	a7 000		 						-		0.8	
31 T-4-1		24	34 000		L		L	1	L		1	l	0.9	<u></u>
Total			//22 000 36 000											

Maximum

Satisfactory

nule Types see lestruction

ive Code Rule 62-160, Table 1.

Replacement Samples Required Incomplete Collection Information Repeat Samples Required

Date Reviewed by DEP/DOH: _____DEP/DOH Reviewing Official: ___



Annual Drinking Water Quality Report A Publication for Shangri-La by the Lake PWS ID 3354028 Report for year 2010 Prepared 2011

We are pleased to present you with this year's Annual Water Quality Report. This report is designed to inform you about the quality of water and services we have delivered to you every day. Our constant goal is to provide you with a safe and dependable supply of drinking water. We want you to understand the efforts we make to continually improve the water treatment process and protect our water resources. We are committed to ensuring the quality of your water.

Our water is produced by two (2) groundwater wells that draws water from the Floridan Aquifer, aerated for taste and odor control and is disinfected by chlorination.

If you have any questions concerning your water utility, please contact Shangri-La by the Lake Water Treatment Division

at (352-589-7744) between the hours of 8:00 a.m. and 5:00 p.m. We want our valued customers to be informed about their water utility.

Shangri-La by the Lake routinely monitors for contaminants in your drinking water according to Federal and State laws.

The state allows us to monitor for some contaminants less than once per year because the concentration for these contaminants do not change frequently. Except when indicated otherwise, this report is based on the results for the period January 1 to December 31, 2010. All water analyses are the most recent sampling in accordance with the Safe Water Drinking Act.

In this table, you will find many terms and abbreviations you might not be familiar with. To help you better understand these terms, we've provided the following definitions:

Parts per million (ppm) or Milligrams per liter (mg/L): One part by weight of analyte to 1 million parts by weight of water sample.

Parts per billion (ppb) or Micrograms per liter (ug/l): One part by weight of analyte to 1 billion parts by weight of water sample.

Picocurie per liter (pCi/L): Picocuries per liter is a measure of the radioactivity in water.

Action Level (AL): the concentration of a contaminant that, if exceeded, triggers treatment or other requirements that a water system must follow.

N/A: means not applicable.

Maximum Contaminant Level (MCL): The "Maximum Allowed" (MCL) is the highest level of a contaminant that is allowed in drinking water. MCL's are set as close to the MCLG's as feasible using the best available treatment technology.

Maximum Contaminant Level Goal (MCLG): The "Goal" (MCLG) is the level of a contaminant in drinking water below that there is no known or expected risk to health. MCLG's allow for a margin of safety.

Maximum Residual Disinfectant Level or MRDL: The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbial contaminants.

Maximum Residual Disinfectant Level Goal or MRDLG: The level of a drinking water disinfectant below that there is no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contaminants.

Range: Indicates the lowest and highest analysis result.

FDEP: Florida Department of Environmental Protection

USEPA: United States Environmental Protection Agency.

IDSE: Initial Distribution System Evaluation. The IDSE is a one-time study conducted by water systems to identify distribution system locations with high concentrations of trihalomethanes (THMs) and haloacetic acids (HAAs). Water systems will use results form the IDSE, in conjunction with their Stage 1 Disinfection Compliance Monitoring Data (DBPR), to select compliance monitoring locations for the Stage 2 DBPR.

TEST RESULTS TABLE

Results in the "Level Detected" column for Radiological and Inorganic contaminants are from individual samples.

Radioactive Contaminants

Contaminant and Unit of Measurement	Dates of Sampling	MCL Violation Y/N	Level Detected	Range of results	MCLG	MCL	Likely Source of Contamination
Alpha emitters (pCi/l)	8/2009	N	3.9	N/A	0	15	Erosion of natural deposits

Inorganic Contaminants

Contaminant and Unit of Measurement	Dates of Sampling	MCL Violation Y/N	Level Detected	Range of results	MCLG	MCL	Likely Source of Contamination
Barium (ppm)	4/2009	N	0.011	N/A	2	2	Discharge of drilling wastes; discharge from metal refineries; erosion of natural deposits
Fluoride (ppm)	4/2009	N	0.11	N/A	4	4.0	Lerosion of natural deposits; discharge from fertilizer and aluminum factories. Water additive which promotes strong teeth when at optimum levels between 0.7 and 1.2 ppm
Sodium (ppm)	4/2009	N	8.9	N/A	N/A	160	Salt water intrusion, leaching from soil

TTHMs and Stage 1 Disinfectant/Disinfection By-Product (D/DBP) Parameters

For bromate, chloramines, or chlorine, the level detected is the highest running annual average (RAA), computed quarterly, of monthly averages of all samples collected. For haloacetic acids or TTHM, the level detected is the highest RAA, computed quarterly, of quarterly averages of all samples collected if the system is monitoring quarterly or is the average of all samples taken during the year if the system monitors less frequently than quarterly. Range of results is the range of individual sample results (lowest to highest) for all monitoring locations, including Initial Distribution System Evaluation (IDSE) results as well as Stage 1 compliance results.

Contaminant and Unit of Measurement	Dates of Sampling (mo./yr.)	MCL Violation Y/N	Level Detected	Range of results	MCLG Or MRDLG	MCL Or MRDL	Likely Source of Contamination
Chlorine (ppm)	1-12/ 2010	N	1.0	0.6-1.2	MRDLG =4	MRDL =4.0	Water additive to control microbes
Haloacetic Acids (HAA5) (ppb)	8/2009	N	11	N/A	N/A	MCL= 60	By-product of drinking water disinfection
TTHM (total trihalomethanes (ppb)	8/2009	N	26.5	N/A	N/A	MCL= 80	By-product of drinking water disinfection

Lead and Copper (Tap Water)			<u></u>			T
Contaminant and Unit of Measurement	Dates of Sampling (mo./yr.)	AL Violation Y/N	90 th Percentile Results	No. of sampling sites exceeding the AL	MCLG	AL (action level)	Likely source of contamination
Copper (tap water) (ppm)	6/2008	N	0.15	0	1.3	1.3	Corrosion of household plumbing systems; erosion of natural deposits; leaching from wood preservative
Lead (tap water)	6/2008	N	0.8	0	0	15	Corrosion of household plumbing systems; erosion of natural deposits

The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs and wells. As water travels over the surface of the land and through the ground, it dissolves naturally occurring minerals and, in some cases, radioactive material, and can pick up substances resulting from the presence of animals or from human activity.

Contaminants that may be present in source water include:

- (A): Microbial contaminants, such as viruses and bacteria, which may come from sewage treatment plants, septic systems, agricultural livestock, and wildlife
- (B): Inorganic contaminants, such as salts and metals, which can be naturally occurring or result from urban storm water runoff, industrial or domestic wastewater discharges, oil and gas production, mining or farming.
- (C): Pesticides and herbicides, which may come from a variety of sources such as agriculture, urban storm water runoff and residential uses.
- (D): Organic chemical contaminants, including synthetic and volatile organic chemicals, which are by-products of industrial processes and petroleum production, and can also come from gas stations, urban storm water runoff and septic systems.
- (E): Radioactive contaminants, which can be naturally occurring or be the result of oil and gas production and mining activities.

In order to ensure that tap water is safe to drink, USEPA prescribes regulations, which limit the amount of certain contaminants in water provided by public water systems. Food and Drug Administration regulations establish limits for contaminants in bottled water, which must provide the same protection for public health.

Drinking water, including bottled water, may reasonably be expected to contain at least small amounts of contaminants. The presence of contaminants does not necessarily indicate that the water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the US Environmental Protection Agency's Safe Drinking Water Hotline at 1-800-426-4791.

MCL's are set at very stringent levels. To understand the possible health effects described for many regulated contaminants, a person would have to drink two (2) liters of water every day at the MCL level for a lifetime to have a one-in-a-million chance of having the described health effect.

In 2009 the department of Environmental Protection performed a Source Water Assessment. The assessments were conducted to provide information about any potential sources of contamination in the vicinity of our wells. A search of the data sources indicated no potential sources of contamination. The assessment data is available on the FDEP website link is www.dep.state.fl.us/swapp/.

Some people may be more vulnerable to contaminants in drinking water than the general population. Immune-compromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers. USEPA and the Center for Disease Control guidelines on appropriate means to lessen the risk of infection by cryptosporidium and other microbiological contaminants are available from the Safe Drinking Water Hotline (1-800-426-4791).

We at Shangri-La by the Lake work around the clock to provide top quality water to every tap. We ask that all our customers help us protect our water sources, which are the heart of our community, our way of life and our children's future.

If present, elevated levels of lead can cause serious health problems, especially for pregnant women and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. Shangri-La by the Lake is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline or at http://www.epa.gov/safewater/lead.

#4

FLORIDA RURAL WATER ASSOCIATION 2970 Wellington Circle West, Suite 101

Tallahassee, FL 32308

1-800-872-8207
WEIR OR FLUME CALIBRATION
Flow Values Obtained by Using a Weir or Flume

FACILITY NAME & ID: Shangri-La by the Lake / Fla#010521
FACILITY LOCATION: 100 Shangra-la Blvd. Leesburg, FL. Lake County

PRIMARY DEVICE

V-NOTCH WEIR	PARSHALL FLUME	RECTANGULAR WEIR		
DEGREE OF V-NOTCH	WIDTH OF THROAT (IN)	CREST LENGTH (FT)		
22.5*	N/A	N/A		

Gauge setting comparison using yardstick or corporters rule:

XIISatisfactory IIUnsatisfactory

Physical inspection of primary device approach, device and discharge:

X□Satisfactory □Unsatisfactory

SECONDARY DEVICE

TYPE: Ultrasonic

MAKE/MODEL/SERIAL: Greyline SLT 32 S#26993

DATE OF LAST CALIBRATION: 10/06/05

	LOW FLOW	MODERATE FLOW	HIGH FLOW	
STAFF GAGE READING (ft)	0	2 ¾"=.2292'	5 "=.4167°	
ACTUAL FLOW (gpm)	0	5.5 gpm	24.5 gpm	
TOTALIZER READING(gpm)	0	6.0	25	
PERCENT DIFFERENCE (%)	0	8.34%	2%	

X Satisfactory Unsatisfactory Satisfactory Unsatisfactory			

FLORIDA RUTAL WATER ASSOCIATION 2970 Wellington Circle West, Suite 101

Wallahassee, FL 32368 1-900-872-8207

WEIR OR FLUME CALIBRATION
Flow Values Obtained by Using a Weir or Flume

PACILITY NAME & ID: Shangra-Le by the Lake/Fig010521/0.05 mgd FACILITY LOCATION: 166 Shangra-Le Bivd. Leesburg, FL Lake County CONTACT PERSON: Andrew Warner 352-589-7744

PRIMARY DEVICE

V-NOTCH WEIR	Parshall flum e	rectangular weir
DECREE OF V-NOTCH	WIDTH OF THROAT (IN)	CREST LENGTH (FT)
22.5*	NA	IVA

Cauge setting comparison using yardstick or curpenters rule:

X Satisfactory Dunsatisfactory

Physical inspection of primary device approach, device and discharge:

X Sutisfactory Clussesisfactory

XUSatisfactory DUnsatisfactory

SECONDARY DÉVICE

TYPE: Ultrasonic

MAKE/MODEL/SERIAL: Graytine SLT 32, Su#26993

DATE OF LAST CALIBRATION: 03/13/06

Physical Inspection of Secondary Device:

	LOW FLOW	MODERATE FLOW	HIGH FLOW
STAFF GAGE READING (ft)	0	.2083	.7292
ACTUAL PLOW (gpm)	. 0	3.99	98.14
METERED FLOW (gptn)	0	4.5	93
PERCENT DIFFERENCE (%)	. 0	11.34 %	5.2 %

Totalizer Accuracy Check Using Stopwatch:	XUSatisfactory Unsatisfactory
COMMENTS:	
I hereby certify that the above test was performed in accordance	is with the best available technology.
TECHNICIAN SIGNATURE:	DATE: 03/09/07 TIME: 8:30 am
Fred Bravo FRW	A 1-800-872-8207

FLORIDA RURAL WATER ASSOCIATION 2970 Wellington Circle West, Suite 101

Tallahassee, FL 32308

1-800-872-8207 WEIR OR FLUME CALIBRATION Flow Values Obtained by Using a Weir or Flume

FACILITY NAME & ID: S'hangei - La/FLA 010531
FACILITY LOCATION: 100 Shanger-La Bleb. Leesaurg, FL 34788

PRIMARY DEVICE					
V-NOTCH WEIR	PARSHALL FLUME	RECTANGULAR WEIR			
DEGREE OF V-NOTCH	WIDTH OF THROAT (IN)	CREST LENGTH (FT)			
2250					

Gauge setting comparison using yardstick or carpenters rule:

>□Satisfactory □Unsatisfactory

Physical inspection of primary device approach, device and discharge:

X□Satisfactory □Ussatisfactory

SECONDARY DEVICE

TYPE: Ultrasonic

MAKE/MODEL/SERIAL: Greyone/SiT32/26993 DATE OF LAST CALIBRATION UNK

	LOW FLOW	MODERATE FLOW	HIGH FLOW
STAFF GAGE READING (ft)	16	,33	: 43
ACTUAL FLOW (High)	2.284	13.95	27.04
TOTALIZER OR RECORDER READING(*****)	2.390	12.89	24.72
PERCENT DIFFERENCE (%)	4.5%	7.6%	8.6%

Totalizer Accuracy Check Using Stopwatch: COMMENTS:	X□Satisfactory □Unsatisfactory X□Satisfactory □Unsatisfactory
TECHNICIAN SIGNATURE: Ron Fhomas FRWA 1-5	

FAX NO.: 352-589-7744

FROM : Shangritta By The Lake

FLORIDA RURAL WATER ASSOCIATION 2970 Wellington Circle West, Suite 101 Tallabassee, FL 32308

1-800-872-8207 WRIR OR FLUME CALEBRATION Flow Values Obtained by Using a Weir or Hume

FACILITY NAME & ID: Shangri-La by the Lake/Fiel19521/0.95 mgd FACILITY LOCATION: 100 Shangri-La Bivd. Leonburg, Ft Lake County

THE PATENTAL PROPERTY.						
Y-NOTCH WEIR	PARSHALL TLUME	RECTANGULAR WEIR				
DEGREE OF V-NOTCH	(M) TAOASIT TO REFORM	Creet Length (PT)				
23,8*	N/A	N/A				

Gauge setting comparison units yardstick or carponiers rule:

XII Sathfactory Dinestisfactory

Faysical inspection of primary device approach, device and discharge:

XII Batisfactory II Uzsatisfactory

SECONDARY DEVICE

MAKEMODEL REPIAL: Graying SUT 72, 88/76993 DATE OF LAST CALIBRATION: 03/13/04

	LOWFLOW	MODERATE FLOW	HIGH PLOW
BTAFF GAGE READING (10)	.23	.27 .	.29
ACTUAL FLOW (gpm)	5.659	9.323	10.10
METERIO FLOW(spec)	5,380	8.449	11.10
PERCENT DIFFERENCE (%)	4.9%	9.37%	9.9%

Physical Inspection of Senondary Devices	XII Satisfactory [] Unsettisfactory
COMMENTS	
I hereby certify that the above test was participated in accordance	with the best available technology.
I heroby certify that the above test was participaed in accordance TROHNICIAN SIGNATURE: Roy Thomas FRE	DATE: 8/10/10 /A 1-800-872-8207

#6

STATEMENT OF BASIS FOR STATE OF FLORIDA DOMESTIC WASTEWATER FACILITY PERMIT

PERMIT NUMBER:

FLA010521

FACILITY NAME:

Shangri-La By The Lake WWTF

FACILITY LOCATION:

Leesburg Lake County

NAME OF PERMITTEE:

Shangri-La By The Lake Utilities, Inc.

PERMIT WRITER:

Arthur E. Torvela, P.E.

1. <u>BASIS FOR EFFLUENT AND RECLAIMED WATER LIMITS AND MONITORING REQUIREMENTS (INCLUDING EFFLUENT MONITORING REQUIREMENTS)</u>

The following table provides the basis for Part I. A. provisions.

Land Application System R-001(Sprayfield) slow-rate restricted public access (except subsurface):

Parameter	Limit	Basis	Rationale
Flow (Total Flow) (MGD) ¹	0.050	Annual Average	62-600.400(3)(b) FAC
Flow (Backup RIB) (MGD) ²	0.013	Annual Average	62-600.400(3)(b) FAC
BOD, Carbonaceous	20.0	Annual Average	62-610.410 & 62-600.740(1)(b)1.a. FAC
5 day, 20C (MG/L)	30.0	Monthly Average	62-600.740(1)(b)1.b. FAC
	45.0	Weekly Average	62-600.740(1)(b)1.c. FAC
	60.0	Single Sample Max.	62-600.740(1)(b)1.d. FAC
Solids, Total	20.0	Annual Average	62-610.410 & 62-600.740(1)(b)1.a. FAC
Suspended (MG/L)	30.0	Monthly Average	62-600.740(1)(b)1.b. FAC
	45,0	Weekly Average	62-600.740(1)(b)1.c. FAC
	60.0	Single Sample Max.	62-600.740(1)(b)1.d. FAC
pH (SU)	6.0 to 8.5	Minimum and Maximum	62-600.445 FAC
Coliform, Fecal	200	Annual Average	62-610.410 & 62-600.440(4)(c)1. FAC
(#/100ML)	200	Monthly Geo. Mean	62-600.440(4)(c)2. FAC
()	400	90th Percentile	62-600.440(4)(c)3. FAC
	800	Single Sample Max.	62-600.440(4)(c)4. FAC
Total Residual	0.5	Minimum	62-610.410 & 62-600.440(4)(b) FAC
Chlorine (For			
Disinfection)			
(MG/L)			

^{1. 1.} Total Flow (Sprayfield + Backup RIB)

4.

^{2. 2.} Backup RIB for wet weather conditions

^{3.} Secondary treatment and basic disinfection required pursuant to Rule 62-610.510(1) 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	Annual Average	62-601.300(1) FAC
Solids, Total Suspended (MG/L)	Report	Annual 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

Influent monitoring reduced to annually in accordance with Rule 62-601.300(6) FAC

2. RESIDUALS MANAGEMENT

The method of residuals use or disposal by this facility is transport to Central Process Residuals Management Facility (RMF), 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 Chapter 62-601, F.A.C.

4. SCHEDULES FOR IMPROVEMENT ACTIONS, CONSTRUCTION, AND ENGINEERING STUDIES

This section is not applicable to this facility

5. 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.

6. ADMINISTRIATIVE ORDERS (AO) AND CONSENT ORDERS (CO)

This permit is not accompanied by an AO, and there are no unresolved compliance issues for this facility.

7. EFFECTS OF SURFACE WATER DISCHARGE ON THREATENED OR ENDANGERED SPECIES

The Department does not anticipate adverse impacts on threatened or endangered species as a result of permit issuance.

8. 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	05-01-03			
ŧ	62-160	04-09-02			
	62-302	05-15-02			
	62-520	12-09-96			
•	62-522	08-27-01			
	62-550	05-28-03			
	62-600	12-24-96			
	62-601	12-24-96			
	62-602	02-06-02			
	62-610	08-08-99			
	62-620	08-25-03			
	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				

9. PROPOSED SCHEDULE FOR PERMIT ISSUANCE

Proposed Issuance Date of Permit:

September 13, 2006



Florida Department of Environmental Protection

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

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

January 14, 2009

SHANGRI-LA BY THE LAKE UTILITIES INC 100 SHANGRI-LA BOULEVARD LEESBURBURG FL 34788 OCD-C-WW-09-0035

ATTENTION ANDREW R WERNER MANAGER

Lake County - DW
Shangri-La By The Lake WWTF
Wastewater Facility - Permit No. FLA010521
Noncompliance Letter

Dear Mr. Werner:

On December 10, 2008, Department personnel conducted a compliance sampling inspection of your wastewater facility. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from records on file in this office, the following deficiencies were noted:

- 1. The traveling sludge return was not functioning properly.
- 2. The catwalks/handrails were very rusty and unsafe.
- 3. The last calibration date on the flow meter was March 9, 2007. Flow measuring devices must be calibrated at least annually.

Items number 1 and 2 above, were also noted in the noncompliance letter number OCD-C-WW-08-0142, dated February 15, 2008 and the noncompliance letter number OCD-C-WW-07-0168, dated February 19, 2007.

Please respond to these items, in writing, with a schedule of corrective action. Pursuant to Rule 62-4.100(2), F.A.C., failure to comply with pollution control rules shall be grounds for permit suspension or revocation and initiation of formal enforcement action. Your reply is requested within 14 days from the date of this letter. Your reply and any questions should be addressed to Blake Vahlsing at (407) 893-3313.

Sincerely,

Kalina Warren Supervisor

Wastewater Compliance/Enforcement

KW/by/ar

Enclosure: Inspection Report

cc: Lake County Water Resource Management, scatasus@co.lake.fl.us

General Utilities, generalutilities@aol.com

Wicks Consulting, RLewis@wicksconsulting.com

"More Protection, Less Process"

www.dep.state.fl.us

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

WASTEWATER COMPLIANCE INSPECTION REPORT

FAC	CILITY AND INSPECT	ION INFO	RMATION	(a) =	Optional	
Name and Physical Location of Facility	WAFR ID:		County	Entry	Date/Time	
Shangri-La By The Lakes WWTF FLA010521			Lake 12/10/2008 @ 11:30:0		2008 @ 11:30:00 AM	
100 Shangri-La Blvd.			Phone	@ Exi	t Date/Time	
Leesburg, FL 34788				12/10/2	2008 @ 12:05:00 PM	
Name(s) of Field Representatives(s)	Title			Phone		
Gawaine Murray	General Utilities operat	tor		(352)	235-0191	
Name and Address of Permittee or Desi	ignated Representative Title	e	Phone	@ O _I	perator Certification #	
Andrew Werner	Mar	nager	(352) 589-7744			
Shangri-La By The Lakes Utilities Inc.						
100 Shangri-La Blvd.						
Leesburg, FL 34788						
Inspection Type C S I	Samples Taken(Y/N): N	@ Sample ID#:		Sample	s Split (Y/N):	
Domestic Ind	lustrial Were Photos Taken(Y/N): N	@ Log book Volume	e: VII	@ Page 157-158	
IC: In Compliance; NC: Or Significant Non-Compliance PERMITS/ORDERS	ut of Compliance; SC: Significant out be Criteria Should be Reviewed when SELF MONITORING PROGRAM	of Compliance; Out of Complian FACILITY	NA: Not Applicablice Ratings Are Giv	e; NE or Bl en in Areas EFFL		
IC 1. ♦ Permit	NE 3. Laboratory		y Site Review IC 9. • Effluent Quality			
NA 2.♦Compliance Schedules	NE 4. Sampling		Measurement		Effluent Disposal Residuals/Sludge	
13. Other:	NC 5. ♦ Records & Reports	SC 8. ♦ Operat	ion & Maintenance		Groundwater	
15. Other.				1471 12.	Sioundwater	
Facility and/or Order Compliance State	us: In-Compliance Out-	Of-Compliance	Significant-	Out-Of-Compli	ance	
Recommended Actions: Noncompliance	e letter					
Name(s) and Signature(s) of Inspector(s	s)		District Office/Phone	Number	Date	
Blake W Vahlsing	11/10		Central District	Office	January 9, 2009	
Blake W. Vahlsing			407 – 893-	3313		
© Signature of Reviewer Central District Office Kalina Warren Date January 12, 2009 Annuary 12, 2009						
Fill Out This Section For All Surface Water Discharger Inspections (CEI, CSI, CBI, PAI, XSI, RI, ASI, ANI) Transaction Code NPDES Number YR/MO/DA Insp Type Inspector Fac Type						
Transaction Code NPDES Number YR/MO/DA Insp Type Inspector Fac Type N 5						
	I, B:CBI, C:CEI, S:CSI, X:XSI, R:RI,					
	ate, J: Joint EPA/State-EPA Lead, T:					
Facility Type (Field 3): 1: Muni Every other field is self explanat	icipal (Publicly Owned), 2: Industrial atory	and Privately Ov	vned Domestic, 3: A	Agricultural,	4: Federal	

INSPECTION FINDINGS

Facility Name: Shangri-La by the Lake WWTF

Facility ID: FLA010521 Inspection Type: CSI

Date: 12/10/2008 11:30:00 AM

FACILITY BACKGROUND:

Address: 100 Shangri-La Blvd, Leesburg, FL 34788, LAKE COUNTY

Permit Information: Wastewater Permit issued: 9/22/2006, and expires: 9/12/2011.

Treatment Summary: Extended aeration treatment plant with effluent to a percolation pond and sprayfield.

Permitted Capacity: 0.05 MGD

1. Permit: IN COMPLIANCE

1.1 Observation: A copy of the permit was on-site. It expires September 12, 2011.

2. Compliance Schedules: NOT APPLICABLE

3. Laboratory: NOT EVALUATED4. Sampling: NOT EVALUATED

5. Records and Reports: OUT OF COMPLIANCE

- 5.1 Observation: Entries in the operator log were clear, concise, informative, and relevant.
- 5.2 Observation: The logbook was bound. The pages were not numbered pages.
- 5.3 Observation: A copy of the current laboratory certification was on-site (Tri Tech Laboratories). It expires June 30, 2009.
- 5.4 Observation: Copies of the operator certification were on-site. They expire April 30, 2009.
- 5.5 Observation: A copy of the Operation & Maintenance manual was on-site.
- 5.6 Observation: The RPZ was last inspected on September 8, 2008.
- 5.7 DMR review: December 2007 November 2008: All DMRs were received by the Department on time.
- 5.8 <u>DMR review</u>: No major discrepancies or transcription errors were noted during the period reviewed.
- 5.9 DMR review: Annual influent TSS and influent CBOD samples were last collected in January 2008.
- 6. Facility Site Review: OUT OF COMPLIANCE
 - 6.1 Observation: The facility grounds were clean and well maintained.
 - 6.2 Observation: The facility grounds were secured properly.
 - 6.3 Observation: AerationBasins/Act.Sludge The contents in the aeration chambers appeared to be adequately mixed. The bays were receiving sufficient air.
 - 6.4 Observation: Blowers/Motors Working well. The motor had a belt guards.
 - 6.5 Observation: Clarifiers The clarifier was extremely murky and had debris on the surface. There was rusted pieces of metal had fallen into the weir.
 - 6.6 Observation: Clarifiers The traveling bridge was not functioning as intended. The cogs were rusted out or broken off, and the traveling bridge could barely move. The surface of the clarifier clear, and the weir appeared in good condition.
 - 6.7 Observation: Disinfection The chlorine contact chamber was clean, and the effluent leaving the plant was clear. The chlorine pump was working and the weir was receiving a steady drip of liquid chlorine.
 - 6.8 Observation: Digester- The digester appeared in good condition. The contents of the digester appeared to be mostly liquids.
- 7. Flow Measurement: OUT OF COMPLIANCE
 - 7.1 Observation: The effluent flow meter was last calibrated on March 9, 2007. Flow measuring devices must be calibrated at least annually.

8. Operation and Maintenance: SIGNIFICANT OUT OF COMPLIANCE

- 8.1 <u>Observation</u>: The facility is extremely rusty and the structural safety of the plant is questionable. The catwalks are very rusty and unsafe.
- 8.2 Observation: This deficiency was listed in Noncompliance Letter OCD-C-WW-08-0142, dated February 15, 2008. In the response received April 16, 2008, the operator stated that Wicks Consulting Services was preparing a permit application to address the catwalk and handrail safety issue. The Department does not have records of receiving a permit application from the facility.
- 9. Effluent Quality: IN COMPLIANCE

9.1 DMR review: No violations were reported during the review period.

9.2 Field sample: TRC: 1.05 mg/L

9.3 Field sample: pH: 6.85

9.4 Field sample: TSS: 6 mg/L

9.5 Field sample: Nitrate: 3.1 mg/L

9.6 Field sample: Fecal Coliform: <1 fcc/100mL

9.7 Field sample: CBOD: 0.20 mg/L

10. Effluent Disposal: IN COMPLIANCE

10.1 Observation: The percolation pond was well cut. The pond had some water inside.

10.2 Observation: The sprayfield was mostly covered with growth. All sprayheads appeared to be working properly.

10.3 Observation: Advisory signs were posted around the percolation pond and sprayfield. The area was completely fenced.

11. Residuals/Sludge: IN COMPLIANCE

11.1 Observation: The facility has a hauling contract with American Pipe & Tank. The last haul from the facility was November 17, 2008 of 7,100 gallons.

12. Groundwater Quality: NOT APPLICABLE



Florida Department of Environmental Protection

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

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

February 15, 2008

SHANGRI-LA BY THE LAKE UTILITIES INC 100 SHANGRI-LA BOULEVARD LEESBURBURG FL 34788 OCD-C-WW-08-0142

ATTENTION

ANDREW R WERNER MANAGER

Lake County - DW
Shangri-La By The Lake WWTF
Wastewater Facility - Permit No. FLA010521
Noncompliance Letter

Dear Mr. Werner:

On January 16, 2008, Department personnel conducted a routine inspection of your wastewater facility. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from records on file in this office, the following deficiencies were noted:

- 1. The traveling sludge return was not functional.
- 2. The hyperchlorinator was running but no chlorine was being delivered to the clarifier weir.
- 3. At the time of the inspection, the Total Residual Chlorine (TRC) was 0.04 milligrams per Liter (mg/L), which is less than the minimum of 0.5 mg/L as required.
- 4. The catwalks/handrails were very rusty and unsafe.
- The sprayfield did not have a cover crop in some areas. As a result, ponding was noted.

Items number 1, 2, 4, and 5, above, were also noted in the Noncompliance Letter Number OCD-C-WW-07-0168, dated February 19, 2007, which is enclosed. According to a response letter from Thomas Felton with General Utilities Corporation on April 23, 2007, all repairs had been completed.

Please respond to these items, in writing, with a schedule of corrective action. Pursuant to Rule 62-4.100(2), F.A.C., failure to comply with pollution control rules shall be grounds for permit suspension or revocation and initiation of formal enforcement action. Your reply is requested within 14 days from the date of this letter. Your reply and any questions should be addressed to Blake Vahlsing at (407) 893-3313.

Sincerely,

Kalina Warren Supervisor

de anen

Wastewater Compliance/Enforcement

KW/bv/ar

Enclosures: Inspection Report

Noncompliance Letter Number OCD-C-WW-07-0168

cc: Lake County Water Resource Management, scatasus@co.lake.fl.us

General Utilities, generalutilities@aol.com

Wicks Consulting, RLewis@wicksconsulting.com

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

WASTEWATER COMPLIANCE INSPECTION REPORT

FAC	ILITY AN	D INSPECT	101	NINFO	RMATION		@ =	Optional		
Name and Physical Location of Facility		County Ent			Entry Date/Time					
Shangri-La By The Lakes WWTF FLA010521					Lake 01/16/2			08 @ 11:15:00	AM	
100 Shangri-La Blvd.		Phone		@ Exit D	Date/Time					
Leesburg, FL 34788				01/16/200	08 @ 12:05:00	PM				
Name(s) of Field Representatives(s)				Phone						
Tom Felton		General Utilities opera	ator				(352) 26	7-1358		
Name and Address of Permittee or Design	gnated Representative	e Ti	tle		Phone		@ Oper	ator Certificat	tion #	
Andrew Werner		Ma	nager		(352) 589-7744	(352) 589-7744				
Shangri-La By The Lakes Utilities Inc.										
100 Shangri-La Blvd.										
Leesburg, FL 34788										
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: VI @ Page 246-247										
FACILITY COMPLIANCE AREAS EVALUATED IC: In Compliance; NC: Out of Compliance; SC: Significant out of Compliance; NA: Not Applicable; NE or Blank: Not Evaluated Significant Non-Compliance Criteria Should be Reviewed when Out of Compliance Ratings Are Given in Areas Marked by a "♦" PERMITS/ORDERS SELF MONITORING FACILITY OPERATIONS EFFLUENT/DISPOSAL										
IC 1.♦Permit	PROGRAM C 1.◆Permit NE 3. Laboratory NC 6. Facility Site Review						9. ♦Effluent Quality			
NA 2. Compliance Schedules	NE 4. Samplir	ng	IC	7. Flow M	feasurement NC 10. ♦ Effluent Disposal				al	
	NC 5. ♦ Records	s & Reports	NC	8.♦Operati	ion & Maintenance IC 11. Residuals/Sludge				e	
13. Other:						NA	12. Gr	oundwater		
Facility and/or Order Compliance Status: In-Compliance Out-Of-Compliance Significant-Out-Of-Compliance										
Recommended Actions: Noncompliance letter										
Name(s) and Signature(s) of Inspector(s) District Office/Phone Number Date										
BALL		Central District Office February 11,			11, 2008					
Blake W. Vahlsing Central District Office 407 – 893-3313 February 11, 200										
@ Signature of Reviewer District Office/Phone Number Date										
Kalina Warren Central District Office 407 – 893-3313							2, 2008			
Fill Out This Section For All Surface Water Discharger Inspections (CEI, CSI, CBI, PAI, XSI, RI, ASI, ANI)										
Transaction Code NPDES Number YR/MO/DA Insp Type Inspector Fac Type										
N 5 ADDITIONAL NPDES COMMENTS 1 2 3										
Inspection Type (Field 1) A:PAI, B:CBI, C:CEI, S:CSI, X:XSI, R:RI, \: ASI, =: ANI										
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										

INSPECTION FINDINGS

Facility Name: Shangri-La By The Lake WWTF

Facility ID: FLA010521 Inspection Type: CEI

Date: 1/16/2008 11:15:00 AM

FACILITY BACKGROUND:

Address: 100 Shangri-La Blvd, Leesburg, FL 34788, LAKE COUNTY

Permit Information: Wastewater Permit issued: 9/22/2006, and expires: 9/12/2011.

Treatment Summary: Extended aeration treatment plant with effluent to a percolation pond and sprayfield.

Permitted Capacity: 0.05 MGD

1. Permit: IN COMPLIANCE

1.1 Observation: A copy of the permit was on-site. It expires September 12, 2011.

2. Compliance Schedules: NOT APPLICABLE

3. Laboratory: NOT EVALUATED4. Sampling: NOT EVALUATED

5. Records and Reports: OUT OF COMPLIANCE

- 5.1 Observation: Entries in the operator log were clear, concise, informative, and relevant.
- 5.2 Observation: The logbook was bound. The pages were not numbered pages.
- 5.3 Observation: A copy of the current laboratory certification was on-site (Tri Tech Laboratories). It expires June 30, 2008.
- 5.4 Observation: Copies of the operator certification were on-site. They expire April 30, 2009.
- 5.5 Observation: A copy of the Operation & Maintenance manual was on-site.
- 5.6 Observation: The RPZ was last inspected on September 4, 2007.
- 5.7 DMR review: December 2006 November 2007: All DMRs were received by the Department on time.
- 5.8 <u>DMR review</u>: No major discrepancies or transcription errors were noted during the period reviewed.

6. Facility Site Review: OUT OF COMPLIANCE

- 6.1 Observation: The facility grounds were clean and well maintained.
- 6.2 Observation: The facility grounds were secured properly.
- 6.3 Observation: AerationBasins/Act.Sludge The contents in the aeration chambers appeared to be adequately mixed. The bays were receiving sufficient air.
- 6.4 Observation: Blowers/Motors Working well. The motor had a belt guards.
- 6.5 Observation: Clarifiers The clarifier was extremely murky and had debris on the surface. There was rusted pieces of metal had fallen into the weir.
- 6.6 Observation: Clarifiers The traveling bridge was not functioning as intended. The cogs were rusted out or broken off, and the traveling bridge could not move.
- 6.7 Observation: Disinfection The chlorine contact chamber was slightly murky. The chlorine pump was working and liquid chlorine was on-site. However, chlorine was not dripping from the feed tube.
- 6.8 Observation: Digester- The digester appeared in good condition. The facility was wasting or returning at the time of the inspection.

7. Flow Measurement: IN COMPLIANCE

7.1 Observation: The effluent flow meter was last calibrated on March 9, 2007.

8. Operation and Maintenance: OUT OF COMPLIANCE

- 8.1 Observation: No problems or deficiencies were observed.
- 8.2 Observation: It was noted numerous times in the logbook that the traveling bridge was broken.
- 8.3 Observation: The facility is extremely rusty and the structural safety of the plant is questionable. The catwalks are very rusty and unsafe.

9. Effluent Quality: OUT OF COMPLIANCE

- 9.1 <u>DMR review</u>: No violations were reported during the review period.
- 9.2 Field sample: TRC: 0.04 mg/L

10. Effluent Disposal: OUT OF COMPLIANCE

- 10.1 Observation: The percolation pond was well cut. The pond was completely dry.
- 10.2 Observation: The sprayfield was not in use at the time of inspection. There were multiple bare spots on the sprayfield, and noted ponding in some areas. The sprayfield is used to store logs and piles of brush.
- 10.3 Observation: Advisory signs were posted around the percolation pond and sprayfield.

11. Residuals/Sludge: IN COMPLIANCE

- 11.1 Observation: The facility has a hauling contract with American Pipe & Tank. The last haul from the facility was February 28, 2007.
- 12. Groundwater Quality: NOT APPLICABLE



Florida Department of Environmental Protection

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

Charlie Crist Governor

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

February 19, 2007

SHANGRI-LA BY THE LAKE UTILITIES INC 100 SHANGRI-LA BOULEVARD LEESBURG FL 34788 OCD-C-WW-07-0168

ATTENTION ANDREW R WERNER MANAGER

Lake County - DW
Shangri-La By The Lake WWTF
Wastewater Facility - Permit No. FLA010521
Noncompliance Letter

Dear Mr. Werner:

On January 30, 2007, Department personnel conducted a routine inspection of your wastewater facility. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from records on file in this office, the following deficiencies were noted:

- 1. A copy of the current laboratory certification was not on-site.
- 2. A broken coupling was causing an air leak in the lines.
- 3. Traveling bridge track teeth were missing and/or broken. Traveling bridge was not set in the track. As a result the traveling bridge was not functioning as intended. In addition, the hose on the skimmer arm was held in place with electrical tape.
- 4. The Return Activated Sludge (RAS)/Waste Activated Sludge (WAS) line gate was missing, as a result the facility was wasting and returning at the same time.
- 5. The hypochlorinator was running but no chlorine was being delivered to the clarifier weir.
- 6. The tank contents in the aerobic digestor were not well mixed. There were broken and /or missing air lines in the digestor.
- 7. The effluent pipe coupling was cracked.
- 8. Hand rails and catwalks were in disrepair providing for unsafe conditions.
- 9. The sprayfield did not have a cover crop in some areas, as a result effluent ponding was noted. In addition, the vegetation is not being harvested and removed from the sprayfield. Also, advisory signs were not posted around the sprayfield to designate the nature of the project area.

The plant is very rusty. Structural integrity is questionable in some areas. Please have your consulting engineer evaluate the plant's condition.

Please respond to these items, in writing, with a schedule of corrective action. Pursuant to Rule 62-4.100(2), F.A.C., failure to comply with pollution control rules shall be grounds for permit suspension or revocation and initiation of formal enforcement action. Your reply is requested within 14 days from the date of this letter. Your reply and any questions should be addressed to Michael J. Eckoff at (407) 893-3313.

Sincerely,

Mh anen

Kalina Warren Supervisor Wastewater Compliance/Enforcement

KW/mje/ar

Enclosure: Inspection Report

DEP Form 62-620.910(10)

cc: Lake County Water Resource Management, scatasus@co.lake.fl.us General Utilities, generalutilities@aol.com

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			
Shangri-La By The Lake WWTF				FLA010521			Lake	1/30/2	1/30/2007 1:19:00 PM			
100 Shangri-La Boulevard								Phone	@ Exit	Date/Time		
Leesburg, FL 34788									1/30/2007 2:35:00 PM			
Name(s	of Field Rep	esentativ	es(s)		Title				P	hone		
Andrew Werner Manager												
Name and Address of Permittee or Designated Representative Title Phone @ Op-								Operator Certification #				
Andre	ew Werner				Mana	ger		(352) 589-7744				
Shang	gri-La By T	The Lal	ke Utili	ties Inc								
100 Shangri-La Boulevard												
Leesburg, FL 34788												
Inspect	ion Type	С	Е	I	Samples Taken(Y/N): N	@ Sam	ple ID#	#:	Samples Split (Y/N): N			
<u>X</u> D	omestic	_ In	dustri	al	Were Photos Taken(Y/N): N		@ L	log book Volume :	(@ Page		
FACILITY COMPLIANCE AREAS EVALUATED IC: In Compliance; NC: Out of Compliance; SC: Significant out of Compliance; NA: Not Applicable; NE: Not Evaluated												
S	ignificant N	on-Com			Should be Reviewed when Out		plianc	e Ratings Are Given in		Marked by a "♦"		
	PERMITS/C	ORDERS	<u> </u>		SELF MONITORING PROGRAM		f	ILITY OPERATIONS	IC	EFFLUENT/DISPOSAL		
	IC 1. ♦Permit NE 3. Laboratory			3. Laboratory	NC		acility Site Review	9. ♦Effluent Quality				
NA	2. ♦Compli	iance Sch	edules	NE	4. Sampling	IC 7. Flow Measurement 8. Operation &		NC	10. ♦Effluent Disposal			
NC NC			5. ♦ Records & Reports	NC	NC Maintenance			11. Residuals/Sludge				
NE	13. Other:								NA	12. Groundwater		
Facility and/or Order Compliance _ In-Compliance _ X Out-Of-Compliance _ Significant-Out-Of-Compliance Status:												
Recomi	nended Action	s: Nonco	mpliance I	.etter								
Name(s) and Signatur		-					District Office/Phone Num	Date			
Michael Eckoff CD/(407)894-7555 February 6, 2007												
@ Sign	nature of Revi							District Office/Phone Num	ber	Date February 16, 2007		
Kalina Warren (407) 893-7875 February 16, 2007												
Fill Out This Section For All Surface Water Discharger Inspections (CEI, CSI, CBI, PAI, XSI, RI, ASI, ANI)												
Transaction NPDES Number YR/MO/DA Insp. Fac. Code Type Type												
N		F L	, A	0	1 0 5 2 1	0 7			1	2 S 3		
Inspection Type (Field 1): A:PAI, B:CBI, C:CEI, S:CSI, X:XSI, R:RI, \:ASI, =:ANI 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

INSPECTION FINDINGS

Facility Name: Shangri-La By The Lake

Facility ID: FLA010521 Inspection Type: CEI

Date: 1/30/2007 2:35:00 PM

FACILITY BACKGROUND:

Address: 100 Shangri-La Bolevard, Leesburg, FL 34788, Lake County

Permit Information: Wastewater Permit issued: 9/22/2006, and expires: 9/12/2011

Treatment Summary: Step Aeration Stp W/Effluent To A Percolation Pond And A Sprayfield

Permitted Capacity: 0.05 MGD

1. Permit: IN COMPLIANCE

1.1 Observation: A copy of the permit was onsite and available to plant personnel.

2. Compliance Schedules: NOT APPLICABLE

3. Laboratory: NOT EVALUATED

3.1 Observation: The laboratory is certified by the Department of Health.

Additional Comments: Tri-Tech Laboratory analyzes samples.

4. Sampling: NOT EVALUATED

5. Records and Reports: OUT OF COMPLIANCE

5.1 Observation: General - A review of the Discharge Monitoring Reports revealed the following.

Additional Comments: DMR Review Period: 11/05-11/06.

Not original signature: 11/05, 2/06, 7/06, and 8/06.

5.2 Observation: General - There were a few transcription errors found in the Discharge Monitoring Reports.

Additional Comments: TRC: 0.6 mg/L on Part A and 0.5 mg/L on Part B 11/05.

TSS: 2.9 mg/L on Part A and 8.0 mg/L on Part B 11/06.

pH: 7.3 SU (min.) on Part A and 7.2 SU (min.) on Part B 11/06.

5.3 Observation: General - Monitoring results were not submitted on the proper Discharge Monitoring Report form.

Additional Comments: 11/06.

- 5.4 Observation: General Entries in the operator log were clear, concise, informative, and relevant.
- 5.5 Observation: General A copy of the current laboratory certification was not available at the time of the inspection (62-620.350(1) F.A.C.).
- 5.6 Observation: General Operators' certification(s) were current and available on-site.
- 6. Facility Site Review: OUT OF COMPLIANCE
 - 6.1 Observation: General The facility grounds were secured properly.
 - 6.2 <u>Observation</u>: Backflow Prevention A reduced pressure zone backflow prevention device was in place on the potable water supply line.
 - 6.3 Observation: AerationBasins/Act.Sludge The contents in the aeration chambers appeared to be adequately mixed.
 - 6.4 Observation: AerationBasins/Act.Sludge Please see specific comment

Additional Comments: A broken coupling was causing an air leak in the lines.

6.5 Observation: Clarifiers - Please see specific comment

Additional Comments: Turbid with some grease balls.

Skimmer arm: hose being held with electrical tape.

Traveling bridge track teeth were missing/broken. Traveling bridge was not set in the track. As a result the traveling bridge was not functioning as intended.

RAS/WAS line gate was missing, as a result the facility was wasting and returning at the same time.

6.6 Observation: Disinfection - Please see specific comment

Additional Comments: The hypochlorinator was running but no chlorine was being delivered to the clarifier weir.

6.7 Observation: Digestors - The tank contents in the aerobic digestor were not well mixed.

Additional Comments: There were broken/missing air lines in the digestor.

7. Flow Measurement: IN COMPLIANCE

7.1 Observation: The copy of the flow calibration report is current and satisfactory.

Additional Comments: FRWA 3/13/2006.

8. Operation and Maintenance: OUT OF COMPLIANCE

8.1 Observation: General - Please see specific comment

<u>Additional Comments</u>: The plant is very rusty. Structural integrity is questionable in some areas. Please have your consulting engineer evaluate the plant's structural integrity.

Effluent pipe coupling was cracked.

8.2 Observation: General - Hand rails/Catwalks were in disrepair providing for unsafe conditions.

Additional Comments: Rusted through catwalk. Some hand rails not secure.

9. Effluent Quality: IN COMPLIANCE

9.1 Observation: Discharge monitoring reports reviewed during the inspection revealed no effluent violations.

Additional Comments: DMR Review Period: 11/05-11/06.

10. Effluent Disposal: OUT OF COMPLIANCE

10.1 Observation: The disposal ponds were overgrown with vegetation.

10.2 Observation: Please see specific comment

Additional Comments: Sprayfield did not have a cover crop in some areas.

The vegetation is not being harvested and removed from the sprayfield.

Effluent ponding was noted on the sprayfield.

10.3 Observation: Advisory signs were not posted around the disposal site indicating the nature of the project area.

11. Residuals/Sludge: IN COMPLIANCE

11.1 Observation: General - No problems or deficiencies were observed.

Additional Comments: The facility has an agreement with Central Process RMF.

12. Groundwater Quality: NOT APPLICABLE

12.1 Observation: The facility is exempt from ground water monitoring in accordance with Rule 62-522.600, F.A.C.

13. Other: NOT EVALUATED

General Utilities Corporation 7621 Frog Log Leesburg, FL 34748

Tele: 352-787-2493 FAX: 352-326-8756

19 February 2009

Department of Environmental Protection 3319 Maguire Blvd., Suite 232 Orlando, FL 32803

Attn: Blake Vahlsing

Wastewater Compliance

Re: Letter #OCD-C-WW-09-0035

Shangri-la WWTF Permit #FLA010521

Dear Mr. Vahlsing:

Thank you for your most recent inspection of 10 December 2008.

The following is a response to the concerns noted:

- 1. The traveling bridge is not repairable due to the deteriorated condition of the steel tank superstructure. A DEP permit application is being drafted by Wicks Consulting Services to replace the existing clarifier with new. In the interim, we will move the bridge as often as possible by hand. A contract has been signed with Mack Concrete to replace the clarifier.
- 2. Catwalks and handrails will be addressed with the new construction.
- 3. The calibration of the meter was done by FRWA on 16 December 2008.

Thank you for your help with these issues.

Sincerely,

Thomas M. Felton

CC: Shangri-la



Florida Department of Environmental Protection

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

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

SENT VIA CERTIFIED MAIL: 91 7108 2133 3936 6363 8691

September 14, 2010

SHANGRI-LA BY THE LAKE UTILITIES INC 100 SHANGRI-LA BOULEVARD LEESBURG FL 34788 OCD-C-WW-10-0676

ATTENTION ANDREW R WERNER
MANAGER

Lake County - DW
Shangri-La By The Lake WWTF
Wastewater Facility - Permit No. FLA010521
Noncompliance Letter

Dear Mr. Werner:

On June 17, 2010, you were forwarded a noncompliance letter listing certain deficiencies that were found during a routine inspection on May 13, 2010. A copy of the noncompliance letter is enclosed.

You were requested to respond, in writing, within 14 days of the date of the letter with a schedule of action(s) to correct the deficiencies noted. As of this date, no reply has been received.

In order to avoid enforcement action, you are requested to respond within 7 days from receipt of this letter as to your intentions in correcting the deficiencies noted in the noncompliance letter.

Sincerely,

David Smokete

David Smicherko Supervisor Wastewater Compliance/Enforcement

DS/jf/ar

Enclosure: Non-Compliance Letter, OCD-C-WW-10-0455

cc: Lake County Water Resource Management, <u>scatasus@lakecountyfl.gov</u> General Utilities, generalutilities@aol.com



Florida Department of Environmental Protection

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

Charlie Crist

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

June 17, 2010

SHANGRI-LA BY THE LAKE UTILITIES INC 100 SHANGRI-LA BOULEVARD LEESBURG FL 34788

OCD-C-WW-10-0455

ATTENTION ANDREW R WERNER MANAGER

Lake County - DW
Shangri-La By The Lake WWTF
Wastewater Facility - Permit No. FLA010521
Noncompliance Letter

Dear Mr. Werner:

On May 13, 2010, Department personnel conducted a routine inspection of the abovereferenced facility. A copy of the inspection report is attached for your review. Please note the items listed below which need to be addressed:

- 1. The current Discharge Monitoring Report (DMR) form is not being submitted. As a result, the flow to the backup Rapid Infiltration Basin (RIB) has not been reported. Please see the enclosed DMR form that was issued with your permit.
- 2. The Department has not received "Notification of Completion of Construction" for the addition of two clarifiers and chlorine contact chambers. Prior to placing the new facilities into operation or any individual unit processes into operation, for any purpose other than testing for leaks and equipment operations, the permittee shall complete and submit to the Department DEP Form 62-620.910(12). A copy of DEP Form 62-620.910(12) is enclosed.
- 3. The traveling sludge return was not functioning properly.
- 4. The ladder and catwalk supports were rusty and unsafe.

Items #3 and 4 above, were also noted in the noncompliance letter #OCD-C-WW-09-0035, dated January 14, 2009, noncompliance letter number OCD-C-WW-08-0142, dated February 15, 2008, and noncompliance letter OCD-C-WW-07-0168, dated February 19, 2007.

The Department requests a written response addressing the items listed above within 14 days from the date of this letter. Your response should include an explanation of any corrective actions that have either been taken or that you plan to take. Please note that this letter and report, being part of the Department's investigation, is preliminary to agency action in

Shangri-La By The Lake Utilities Inc. OCD-C-WW-10-0455 Page 2

accordance with Section 120.57(5), Florida Statutes. Please direct your response and any questions to Jenny Farrell at (407) 893-3313, or via e-mail: jenny.e.farrell@dep.state.fl.us.

Sincerely,

David Smilete

David Smicherko Supervisor Wastewater Compliance/Enforcement

DS/jf/ar

Enclosures: Inspection Report

Current DMR Form

DEP Form 62-620.910(12)

cc: Lake County Water Resource Management, scatasus@lakecountyfl.gov
Tom Felton, General Utilities, generalutilities@aol.com
Wicks Consulting, RLewis@wicksconsulting.com

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				
Shangri-La By The Lake			FLA010521		Lake	5/13/2	5/13/2010 12:26:00 PM			
100 Shangri-La Bolevard			rd			Phone	@ Exit	Date/Time		
Leesburg, FL 34788								5/13/2	2010 12:58:00 PM	
Name(s) of Field Representatives(s)				,	Title Email			Phone		
Donald Harris General Utilities Operator										
Name and Address of Permittee or Designated Representative Title Phone								@ (Operator Certification #	
Andrew Werner Manager										
Shan	gri-La-By-	The-Lal	ke Util	ities Inc	o.					
100 S	Shangri-La	Blvd			Email					
Leesburg, FL 34788										
Inspection Type C E			Е	I	Samples Taken(Y/N): N @ Sample ID#: N		ple ID#: N	Samples Split (Y/N): N		
X Domestic Industrial		l	Were Photos Taken(Y/N): Y	@ Log book Volume : II		@ Page 109				
FACILITY COMPLIANCE AREAS EVALUATED IC = In Compliance; NC = Out of Compliance; SC = Significant out of Compliance; NA = Not Applicable; NE = Not Evaluated Significant Non-Compliance Criteria Should be Reviewed when Out of Compliance Ratings Are Given in Areas Marked by a " " " " " " " " " " " " "										
PERMITS/ORDERS			SELF MONITORING PROGRAM	FACILITY OPERATIONS			EFFLUENT/DISPOSAL			
IC 1. • Permit			NE	3. Laboratory	NC	6. Facility Site Review	IC	9. ◆Effluent Quality		
NA 2. Compliance Schedules		NE	4. Sampling	IC	7. Flow Measurement		10. ◆Effluent Disposal			
		NC	5. ♦ Records & Reports	SC 8. • Operation & Maintenance		IC	11. Residuals/Sludge			
NA								NA	12. Groundwater	
Facility and/or Order Compliance In-Compliance Out-Of-Compliance X Significant-Out-Of-Compliance Status:										
Recommended Actions: Noncompliance Letter										
Name(s) and Signature(s) of Inspector(s) Jenny Farrell Date CD/ (407)893-3313 District Office/Phone Number CD/ (407)893-3313								1		
© Signature of Reviewer David Smicherko District Office/Phone Number Date							Date			

INSPECTION SUMMARY

Facility Name: Shangri-La By The Lake

Facility ID: FLA010521 Inspection Type: CEI

Date: 5/13/2010 12:58:00 PM

FACILITY BACKGROUND:

Address: 100 Shangri-La Bolevard, Leesburg, FL 34788, Lake County

Permit Information: Wastewater Permit issued: 9/22/2006, and expires: 9/12/2011

Treatment Summary: Step Aeration Stp W/Effluent To A Percolation Pond And A Sprayfield

Permitted Capacity: 0.05

1. Permit: IN COMPLIANCE

1.1 Observation: A copy of the permit was onsite and available to plant personnel.

1.2 Observation: Please see specific comment

<u>Additional Comments</u>: A permit revision was issued by the Department on May 22, 2009, which granted permission to add two new concrete clarifiers and chlorine contact chambers (CCCs). Please see the Records and Reports Section of the inspection report.

- 2. Compliance Schedules: NOT APPLICABLE
 - 2.1 Observation: No observations were recorded.
- 3. **Laboratory:** NOT EVALUATED
 - 3.1 Observation: No observations were recorded.
- 4. Sampling: NOT EVALUATED
 - 4.1 Observation: No observations were recorded.
- 5. Records and Reports: OUT OF COMPLIANCE
 - 5.1 Observation: General A copy of the current laboratory certification was available at the time of the inspection (62-620.350(1) F.A.C.).

Additional Comments: Samples are analyzed by Tri-Tech Laboratory.

- 5.2 Observation: General Operators' certifications were current and available on-site.
- 5.3 Observation: General The certified operator's daily logbook was complete.

Additional Comments: The logbook was pre-numbered, bound, and sufficient operation/maintenance entries were recorded.

- 5.4 Observation: General A copy of the Operation and Maintenance Manual as required by Chapter 62-600, F.A.C. was available to plant personnel.
- 5.5 Observation: General Please see specific comment

<u>Additional Comments</u>: DMR paperwork review (exceedances noted under EFFLUENT), December 2008 to March 2010 were not all submitted in a timely manner:

The January 2009 DMR was received by the Department on 03/02/2009; this DMR was due on or before 02/28/2009.

For the entire review period the current DMR has not been in use, therefore the flow to the backup RIB has never been reported. A copy of the current DMR has been attached.

5.6 Observation: General - Please see specific comment

Additional Comments: The annual influent samples were collected and reported in January 2009 and 2010.

5.7 Observation: General - Please see specific comment

Additional Comments: According to documentation available onsite at the facility the RPZ was last inspected and tested on September 21, 2009.

INSPECTION FINDINGS

5.8 Observation: General - Please see specific comment

Additional Comments: On the day of inspection the clarifiers and CCC's tank addition appeared to be complete. Treated effluent was flowing through these tanks at the time of inspection. According to Department records the DEP Form 62-620.910(12), "Notification for Completion of Construction for Domestic Wastewater Facilities has not been received. Prior to placing the new facilities into operation or any individual unit processes into operation, for any purpose other than testing for leaks and equipment operation, the permittee shall complete and submit DEP Form 62-620.910(12) to the Department.

6. Facility Site Review: OUT OF COMPLIANCE

- 6.1 Observation; General The facility grounds were secured properly.
- 6.2 Observation: Backflow Prevention A reduced pressure zone backflow prevention device was in place on the potable water supply line.

Additional Comments: No leaks or other problems were noted.

- 6.3 Observation: AerationBasins/Act.Sludge The contents in the aeration chambers appeared to be adequately mixed.
- 6.4 Observation: Blowers/Motors The blowers were operational at the time of the inspection.

Additional Comments: Two blowers with belt guards were onsite.

6.5 Observation: Clarifiers - Please see specific comment

<u>Additional Comments</u>: The clarifier contained a few sludge pop-ups, the weir appeared level and clean. No flow was entering the weir at the time of inspection.

6.6 Observation: Clarifiers - Please see specific comment

Additional Comments: The traveling bridge sludge return system is no longer able to travel due to excessive rust and the deterioration of the track.

6.7 Observation: Disinfection - Please see specific comment

<u>Additional Comments</u>: The sodium hypochlorite pump was operating on the day of inspection. Sodium hypochlorite is added at the beginning of the new CCC's.

6.8 Observation: Digestors - Please see specific comment

Additional Comments: Was able to be aerated and contained room for wasting.

7. Flow Measurement: IN COMPLIANCE

7.1 Observation: The copy of the flow calibration report is current and satisfactory.

Additional Comments: A sticker on the flow meter was dated July 8, 2009 for the last calibration date.

8. Operation and Maintenance: SIGNIFICANT OUT-OF-COMPLIANCE

8.1 Observation: General - Please see specific comment

Additional Comments: Excessive rust was noted in and around the former CCC/ladder area and catwalk supports. Previous inspection reports have noted these rust issues also.

9. Effluent Quality: IN COMPLIANCE

9.1 Observation: The final effluent chlorine residual was within the acceptable range.

Additional Comments: Field TRC->2.20 mg/L

9.2 Observation: A review of the Discharge Monitoring Reports did not reveal any effluent exceedances.

Additional Comments: Review period from December 2008 through March 2010.

10. Effluent Disposal: IN COMPLIANCE

10.1 Observation: General - The back-up Rapid Infiltration Basin (RIB) appeared to be maintained.

Additional Comments: Moderate vegetation was located in the back-up RIB, no standing water was observed.

10.2 Observation: General - Advisory signs were posted around the disposal site indicating the nature of the project area.

INSPECTION FINDINGS

- 10.3 Observation: General The fence surrounding the effluent disposal site provided adequate access control (62-610.518(10) F.A.C.)
- 10.4 Observation: General Please see specific comment

Additional Comments: The sprayfield was well maintained. On the day of inspection the sprayfield contained grass clippings. According to the permit in section IV.9 "vegetation shall be periodically harvested and removed from the project area." Please ensure that this is done at the frequency listed in the permit.

- 11. Residuals/Sludge: IN COMPLIANCE
 - 11.1 Observation: General Please see specific comment

<u>Additional Comments</u>: Residuals for this facility are currently hauled to 412 Biosolids RMF. Sludge hauling tickets were located onsite on the day of inspection.

- 12. Groundwater Quality: NOT APPLICABLE
 - 12.1 Observation: No observations were recorded.
- 13. Other: NOT APPLICABLE
 - 13.1 Observation: No observations were recorded.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - P

PERMITTEE NAME: MAILING ADDRESS:					PERMIT N	IUMBER	FLA010521	l	Expiration D
MAILING ADDRESS:		, FL 34788			LIMIT: CLASS SI	ZE:	Final N/A		REPORT: GROUP:
FACILITY: LOCATION:	100 Shar	La By The Lake V gri-La Boulevard g, FL 34788			MONITORING GROUP NUMBER: R-001 MONITORING GROUP DESC: Sprayfield, including Influent				
COUNTY: Lake			NO DISCHARGE FROM SITE: MONITORING PERIOD From: To						
Parameter			Quantity	or Loading	Units	Qual	ity or Concent	ration	Units N
Flow (Total Flow)		Sample Measurement		Ţ]	
PARM Code 50050 Mon.Site No. FLW-1	Y	Permit Requirement	0.050 (An.Avg.)		MGD				
Flow (Total Flow)		Sample Measurement							
PARM Code 50050 I Mon.Site No. FLW-1	l 	Permit Requirement	Report (Mo.Avg.)		MGD				
Flow (Backup RIB) ²		Sample Measurement	***************************************						
PARM Code 50050 I Mon.Site No. FLW-1	P	Permit Requirement	0.013 (An.Avg.)		MGD			<u> </u>	<u> </u>
Flow (Backup RIB)		Sample Measurement			1400				
Mon.Site No. FLW-1	Q	Permit Requirement	Report (Mo.Avg.)		MGD				
BOD, Carbonaceous 5 da	• /	Sample Measurement				20.0			MG/L
Mon.Site No. EFA-1	Y	Permit Requirement				(An.Avg.)			MC#2
BOD, Carbonaceous 5 de	•	Sample Measurement				Report	60.0		MG/L
PARM Code 80082 Mon.Site No. EFA-1	A.	Permit Requirement		<u> </u>		(Mo.Avg.)	(Max.)		
l certify under penalty of information submitted. B and belief, true, accurate,	lased on m	ny inquiry of the r	erson or persons v	vho manage the	system, or those p	ersons directly respo	nsible for gatherin	g the information, th	e information sul
NAME/TITLE OF PRINCIP	AL EXEC	UTIVE OFFICER C	R AUTHORIZED A	GENT	SIGNATURE OF	PRINCIPAL EXECUT	TIVE OFFICER OR	AUTHORIZED AGEN	T TEI
							····		
COMMENT AND EXPL	.ANATIO	N OF ANY VIOI	ATIONS (Referen	nce all attachme	nts here):				
1 Total Flow (Sprayfield									

DEP Form 62-620.910(10), Effective November 29, 1994

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Shangri-La By The Lake WWTF

MONITORING GROUP NUMBER: R-001 PERMIT NUMONITORING PERIOD From: To

Parameter		Quantity or Loading	Units	Qual	ity or Concentration		N E
Solids, Total Suspended	Sample					<u> </u>	느
	Measurement						
PARM Code 00530 Y	Permit			20.0		MG/L	
Mon.Site No. EFA-1	Requirement			(An.Avg.)			
Solids, Total Suspended	Sample]			
	Measurement			1			
PARM Code 00530 A	Permit		ļ	Report	60.0	MG/L	_
Mon.Site No. EFA-1	Requirement			(Mo.Avg.)	(Max.)		
pH	Sample			1			_
	Measurement			ļ			
PARM Code 00400 A	Permit			6.0	8.5	SU	
Mon.Site No. EFA-1	Requirement			(Min.)	(Max.)		_
Coliform, Fecal	Sample				ſ		
	Measurement						
PARM Code 74055 Y	Permit			200		#/100ML	
Mon.Site No. EFA-I	Requirement			(An.Avg.)			_
Coliform, Fecal	Sample						
	Measurement						_
PARM Code 74055 A	Permit			Report	800	#/100ML	
Mon.Site No. EFA-1	Requirement			(Mo.Geo.Mean)	(Max.)		_
Total Residual Chlorine (For	Sample					i l	
Disinfection)	Measurement					1.55	_
PARM Code 50060 A	Permit			0.5		MG/L	
Mon.Site No. EFA-1	Requirement			(Min.)			_
Percent Capacity, (TMADF/	Sample						
Permitted Capacity) x 100	Measurement		_				_
PARM Code 00180 1	Permit			Report	1	PER- CENT	
Mon.Site No. FLW-1	Requirement					CENT	_
BOD, Carbonaceous 5 day, 20C	Sample				į		
D. D. C. C. L. A0000	Measurement					3.60%	_
PARM Code 80082 Y	Permit			Report		MG/L	
Mon.Site No. INF-1	Requirement	-	_	(An.Avg.)	<u> </u>		_
Solids, Total Suspended	Sample						
DAD34 C- 1- 00620 W	Measurement Permit			Damant		MG/L	_
PARM Code 00530 Y				Report		MU/L	
Mon.Site No. INF-1	Requirement		+	(An.Avg.)			_
	Sample Measurement						
	Permit		-			+	_
	Requirement						
	Vedanement						

DAILY SAMPLE RESULTS - PART B

Facility:

Shangri-La By The Lake WWTF

Monitoring Period From: To: CBOD5 pH (SU) TSS (MG/L) Fecal TRC (For Flow (MGD) (MG/L) Coliform Disinfect.) Bacteria (MG/L) (#/100ML) Code 80082 74055 00400 00530 50060 50050 Mon. Site EFA-1 EFA-1 EFA-1 EFA-1 EFA-1 FLW-1 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Total Mo. Avg. PLANT STAFFING: Day Shift Operator Class: Certificate No: _ Name: Class: **Evening Shift Operator** Certificate No: Name: Night Shift Operator Class: Certificate No: _ Name: Lead Operator Class: Certificate No: Name:

Permit Number:

FLA010521

INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT

Read these instructions as well as the SUPPLEMENTAL INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT before com copies of the required parts of the DMR were provided with the permit. All required information shall be completed in full and typed or printed in ink. A signed, original DMR s by the 28th of the month following the monitoring period. The DMR shall not be submitted before the end of the monitoring period.

The DMR consists of three parts--A, B, 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 o facilities will have a Part B for reporting daily sample results. Part D is used for reporting ground water monitoring well data.

When results are not available, the following codes should be used on parts A and D of the DMR and an explanation provided where appropriate. Note: Codes used on Part B for r

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.
1	

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 neces 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 one-half 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 limitatic

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; 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 heaf following 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 mon 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

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 fine group number in the header. Enter the data or calculated results for each parameter on this row in the non-shaded area above the limit. Be sure the result being entered corresponding average, monthly average, single sample maximum, etc.) and units.

No. Ex.: Enter the number of sample measurements during the monitoring period that exceeded the permit limit for each parameter in the non-shaded area. 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 I 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 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 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 a

PART B - DAILY SAMPLE RESULTS

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 Daily Monitoring Results: Transfer all analytical data from your facility's laboratory or a contract laboratory's data sheets for all day(s) that samples were collected. Record the 160, F.A.C., contains a complete list of all the data qualifier codes that your laboratory may use when reporting analytical results. However, when transferring numerical results qualifier codes should be used and an explanation provided where appropriate.

CODE	DESCRIPTION/INSTRUCTIONS
<	The compound was analyzed for but not detected.
Α	Value reported is the mean (average) of two or more determinations.
J	Estimated value, value not accurate.
Q	Sample held beyond the actual holding time.
Y	Laboratory analysis was from an unpreserved or improperly preserved sample.

Add the results to get the Total and divide by the number of days in the month to get the Monthly Average.

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.

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 Date Sample Obtained: Enter the date the sample was taken. Also, check whether or not the well was purged before sampling.

Time Sample Obtained: Enter the time the sample was taken.

Sample Measurement: Record the results of the analysis. If the result was below the minimum detection limit, indicate that.

Detection Limits: Record the detection limits of the analytical methods used.

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.

Sampling Equipment Used: 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).

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 questions concerning this report. Enter the date when the report is signed.

Comments and Explanation: Use this space to make any comments on or explanations of results that are unexpected. If more space is needed, reference all attachments in this are

SPECIAL INSTRUCTIONS FOR LIMITED WET WEATHER DISCHARGES

Flow (Limited Wet Weather Discharge): Enter the measured average flow rate during the period of discharge or divide gallons discharged by duration of discharge (convert (MGD).

Flow (Upstream): Enter the average flow rate in the receiving stream upstream from the point of discharge for the period of discharge. The average flow rate can be calculated I and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit.

Actual Stream Dilution Ratio: To calculate the Actual Stream Dilution Ratio, divide the average upstream flow rate by the average discharge flow rate. Enter the Actual Stream I No. of Days the SDF > Stream Dilution Ratio: For each day of discharge, compare the minimum Stream Dilution Factor (SDF) from the permit to the calculated Stream Dilutio (*) if the SDF is greater than the Stream Dilution Ratio on any day of discharge. On Part A of the DMR, add up the days with an "*" and record the total number of days the S1 Dilution Ratio.

CBODs: Enter the average CBODs 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.

Actual Rainfall: Enter the actual rainfall for each day on Part B. Enter the actual cumulative rainfall to date for this calendar year and the actual total monthly rainfall on Part A 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.

Rainfall During Average Rainfall Year: On Part A, enter the total monthly rainfall during the average rainfall year and the cumulative rainfall for the average rainfall year. The the amount of rain, in inches, which fell during the average rainfall year from January through the month for which this DMR contains data.

No. of Days LWWD Activated During Calendar Year: Enter the cumulative number of days that the limited wet weather discharge was activated since January 1 of the current Reason for Discharge: Attach to the DMR a brief explanation of the factors contributing to the need to activate the limited wet weather discharge.



NOTIFICATION OF COMPLETION OF CONSTRUCTION FOR WASTEWATER FACILITIES OR ACTIVITIES

1. Instructions

- a. In accordance with Rule 62-620.410, F.A.C., this form must be submitted to the Department's appropriate district office or approved local program prior to placing a newly constructed facility or modified portion of an existing facility into operation for any purpose other than testing for leaks and equipment operation.
- b. Each applicable item must be completed in full. Where attached sheets or other technical documentation are used in lieu of the blank spaces provided, indicate appropriate cross-references in the spaces.
- c. Three (3) copies of this notification with supporting documentation shall be submitted with this form.
- d. All information is to be typed or printed in ink. Dates are to be entered in MM/DD/YR format.

2.	Facility Information		
	a. Permit Number	b. Facility Identification Number	
	c. Project/Facility Name		
	d. Contact Name: Number and Street City/State/Zip Code Telephone		
3.	Description of Facilities to	be Placed into Operation:	
4.	Description of Substantia Application Materials:	d Deviations from the Permit, Approved Preliminary Design	Report, and
5.	Implementation Dates		
	a. Actual Date Constructionb. Scheduled Date to Placec. Scheduled Date to Attaind. Scheduled Date to Subm	Facilities into Operation	

¹In accordance with Rule 62-620.410, F.A.C., DEP Form 62-620.910(13) Notification of Availability of Record Drawings and Final Operation and Maintenance Manuals must be submitted within six month after the facilities are placed into operation.

6. Certifications

a. Applicant or Authorized Representative

I certify that the statements made in this notification and all attachments are true, correct and complete to the best of my knowledge and belief. I agree to operate and maintain these facilities in such a manner as to comply with the provisions of Chapter 403, F.S., Chapter 62-620, F.A.C., and all other applicable rules of the Department.

•	(Signature of Applicant or Authorized Representation	tive ²)	(Date)
	Name (Please Type)	Company Name	
	Title	Company Address	
	Phone City/State	z/Zip Code	
b.	Applicant or Authorized Representative (For Domes	tic Wastewater Faci	lities Only)
-	I certify that an appropriate draft operation and mai which has been examined by a professional engineer	ntenance manual for as certified below, i	is available and located at
,	(Signature of Applicant or Authorized Representa	tive ²)	(Date)
	Name (Please Type)	Company Name	
	Title	Company Address	
	Phone City/State	e/Zip Code	
c.	Professional Engineer Registered in Florida I certify that the facilities listed above have been complete. I further certify that construction on these the permit and the approved preliminary design reabove will not prevent the system from functioning Florida and rules of the Department when properly a based upon on-site observation of construction, schedunder my direct supervision, for the purpose of depermit and the approved preliminary design report as	e facilities has proce eport and application in compliance with operated and maintangeduled and conducte etermining if the wo	beeded substantially in accordance with on materials, or that deviations noted in all applicable statutes of the State of ined. These determinations have been and by me or by a project representative ork proceeded in compliance with the
	Company Name:	Name (please typ	e)
	Company Address:		
	City/State/Zip Code	***************************************	
	Phone Number:		
		(Seal, Signature,	Date, and Registration Number)

²If signed by the authorized representative, attach a letter of authorization.

I certify that the draft	operation an	d maintenance	manual f	for these	domestic v	wastewater	facilities	has !	been
prepared or examined	by me or by	/ individual(s)	under my	y direct	supervision	and that	there is r	eason	able

d. Professional Engineer Registered in Florida (For Domestic Wastewater Facilities Only)

prepared or examined by me or by individual(s) under my direct supervision and that there is reasonable assurance, in my professional judgement, that the facilities, when properly operated and maintained in accordance with this manual, will comply with all applicable statutes of the State of Florida and rules of the Department.

Company Name:	Name (please type)
Company Address:	
City/State/Zip Code	
Phone Number:	
·-	(Seal, Signature, Date, and Registration Number)



RECEIVED-DEP CENTRAL DISTRICT OFFICE

2010 SEP 22 PH 1: 52



P. 352-343-8667 F. 352-343-8665 225 W MAIN ST TAVARES, FL 32778 WWW.WICKSCONSULTING.COM

CERTIFIED MAIL: 7004 0750 0003 4321 8899

September 20, 2010

Mr. David Smicherko, Supervisor Wastewater Compliance/Enforcement Florida Department of Environmental Protection 3319 Maguire Blvd, Ste 232 Orlando FL 32803-3767

REF: Lake County DW

Shangri-La By the Lake WWTF WW Facility Permit No. FLA010521

Dear Mr. Smicherko,

In response to the Department's letter OCD-C-WW-10-0676 dated September 14, 2010, the following response is submitted which corresponds to your numerical items:

1. The current Discharge Monitoring Report (DMR) form is not being submitted. As a result, the flow to the backup Rapid Infiltration Basin (RIB) has not been reported. Please see the enclosed DMR form that was issued with your permit.

RESPONSE: The current DMR form is now being used and will be submitted by the Plant Operator as required.

2. The Department has not received "Notification of Completion of Construction" for the addition of two clarifiers and chlorine contact chambers. Prior to placing the new facilities into operation or any individual unit processes into operation, for any purpose other than testing for leaks and equipment operations, the permittee shall complete and submit to the Department DEP Form 62-620.910(12). A copy of DEP Form 62-620.910(12) is enclosed.

RESPONSE: The Notification of Completion of Construction has been completed and three (3) copies are enclosed.

3. The traveling sludge return was not functioning properly.

RESPONSE: The traveling bridge sludge return mechanism is inoperable. Additional air eductors will be installed to facilitate the discharge of return sludge to the aeration tank. It should be noted that upon receiving Clearance for the new clarifiers, the old tank will be incorporated into the existing aeration tank.

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4. The ladder and catwalk supports were rusty and unsafe.

2010 SEP 22 PH 1: 52

RESPONSE: The ladder and catwalk have been repaired or replaced as needed to eliminate the rusty and unsafe conditions.

Please contact me if you have any questions or need further information.

Sincerely,

Kenneth R. "Ted" Wicks, P.E.

red Wichi

TW:KH

Enclosure

xc: Tom Felton Andy Werner

Farrell, Jenny E.

From:

Generalutilities@aol.com

Sent:

Friday, August 20, 2010 11:16 AM

To:

Farrell, Jenny E.

Subject:

Re: Response Letters Due

Jenny

Shangri-la's new DMR is being used and progress is being made on the removal of the traveling bridge and the addition of the air lines in the old clarifier and the old chlorine contact tank.

The completion of construction must come from the engineer when the owner finishes their part.

I am sure that a 2nd NCL would be helpful, but the owner is proceeding.

Thanks

Tom

In a message dated 8/20/2010 9:28:36 A.M. Eastern Daylight Time, Jenny E. Farrell@dep.state.fl.us writes:

Good Morning,

Just wanted to send and update on Response Letters that are due according to my records as of today, see below:

Shangri-La-will be sending out a second Noncompliance Letter this week, was due in July

Lakeside Village #1 and #2- was due beginning of August, talked to new manager the other day she wanted to update our records with her contact information, she said that you would be responding

These are the only letters that are considered past due at this time. Any questions let me know.

Thank you!

*After recipt of Cog C (see Albached)

full Response Lettle noW.

gy 9/30/2010

Jenny E. Farrell

Environmental Specialist II

Central District Wastewater Compliance Section

Phone: 407-893-3313

Fax: 850-412-0473



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2010 SEP 22 PM 1:52

6-1124 15-180 15-19-30

NOTIFICATION OF COMPLETION OF CONSTRUCTION FOR WASTEWATER FACILITIES OR ACTIVITIES

1. Instructions

2.

Facility Information

- a. In accordance with Rule 62-620.410, F.A.C., this form must be submitted to the Department's appropriate district office or approved local program prior to placing a newly constructed facility or modified portion of an existing facility into operation for any purpose other than testing for leaks and equipment operation.
- b. Each applicable item must be completed in full. Where attached sheets or other technical documentation are used in lieu of the blank spaces provided, indicate appropriate cross-references in the spaces.
- c. Three (3) copies of this notification with supporting documentation shall be submitted with this form.
- d. All information is to be typed or printed in ink. Dates are to be entered in MM/DD/YR format.

a.	Permit Number FLA010521 b. Facility Ident	ification Number
C.	Project/Facility Name Shangri-La-By-The-Lake	• WWTF
d.	Contact Name: Andrew R. Werner	
	Number and Street 100 Shangri-La Blvd	
	City/State/Zip Code Leesburg FL 34788	
	Telephone (352) 589-7744 cell (3	352) 406-0597
		Two new concrete clarifiers and dual chlorine
Des	contact chambers with associated piping. scription of Substantial Deviations from the Permit, Apaterials: No substantial deviations	
De: Ma	scription of Substantial Deviations from the Permit, App	
De: Ma	scription of Substantial Deviations from the Permit, Apaterials: No substantial deviations plementation Dates	proved Preliminary Design Report, and Application
De: Ma Im _j	scription of Substantial Deviations from the Permit, Apparentals: No substantial deviations plementation Dates Actual Date Construction Began	proved Preliminary Design Report, and Application
Des Ma Imp	scription of Substantial Deviations from the Permit, Apparentals: No substantial deviations plementation Dates Actual Date Construction Began Scheduled Date to Place Facilities into Operation	proved Preliminary Design Report, and Application 06/01/2009 10/2010
De: Ma Im _j	scription of Substantial Deviations from the Permit, Apparentals: No substantial deviations plementation Dates Actual Date Construction Began	proved Preliminary Design Report, and Application

In accordance with Rule 62-620.410, F.A.C., DEP Form 62-620.910(13) Notification of Availability of Record Drawings and Final Operation and Maintenance Manuals must be submitted within six month after the facilities are placed into operation.

6. Certifications

a. Applicant or Authorized Representative

	the statements made in this notification and all attachments are true, correct and complete to the best of ge and belief. I agree to operate and maintain these facilities in such a manner as to comply with the
provisions o	f Chapter 403, F.S., Chapter 62-620. F.A.C., and all other applicable rules of the Department.
4	mber R Verner 9/21/10
Si	gnature of Applicant or Authorized Representative:) (Date)
•	
	Name (Please Type) Andrew R. Werner Company Name Shangri-La-By-The-Lake Utilities, Inc.
	Title VD, Manager Company Address 100 Shangri-La Blvd Phone (352) 589-7744 City/State/Zip Code Leesburg FL 34788
	There cay, out of
b.	Applicant or Authorized Representative (For Domestic Wastewater Facilities Only)
	I certify that an appropriate draft operation and maintenance manual for these domestic wastewater facilities, which has been examined by a professional engineer as certified below, is available and located at
	100 Shangri-La Blvd, Leesburg FL 34788 and can be submitted upon request.
	Andron R Wenner 9/21/10
(ডা	gnature of Applicant or Authorized Representative:) (Date)
	Name (Please Type) Andrew R. Werner Company Name Shangri-La-By-The-Lake Utilities, Inc.
	Title VD Manager Company Address 100 Shangri-La Blvd
	Phone (352) 589-7744 City/State/Zip Code <u>Leesburg FL 34788</u>
c.	Professional Engineer Registered in Florida I certify that the facilities listed above have been completed to the point where the facilities are functionally complete. I further certify that construction on these facilities has proceeded substantially in accordance with the permit and the approved preliminary design report and application materials, or that deviations noted above will not prevent the system from functioning in compliance with all applicable statutes of the State of Florida and rules of the Department when properly operated and maintained. These determinations have been based upon on-site observation of construction, scheduled and conducted by me or by a project representative under my direct supervision, for the purpose of determining if the work proceeded in compliance with the permit and the approved preliminary design report and application materials. Company Name: Name (please type)
	Company Address:
	Phone Number:
	(Seal, Signature, Date, and Registration Number)
alf signed by	the authorized representative, attach a letter of authorization.

DEP Form 62-620.910(12) Effective October 23, 2000 d. Professional Engineer Registered in Florida (For Domestic Wastewater Facilities Only) I certify that the draft operation and maintenance manual for these domestic wastewater facilities has been prepared or examined by me or by individual(s) under my direct supervision and that there is reasonable assurance, in my professional judgement, that the facilities, when properly operated and maintained in accordance with this manual, will comply with all applicable statutes of the State of Florida and rules of the Department.

Company Name:	Wicks Consulting Services, Inc.	Name (please type)	Kenneth R. "TED" Wicks
Company Address:	225 West Main Street		
City/State/Zip Code	Tavares FL 32778		
Phone Number:	(352) 343-8667		

(Seal. Signature. Date, and Registration Number)



RECEIVED-DEP CENTRAL DISTRICT OFFICE

2010 SEP 22 PM 1:52



NOTIFICATION OF COMPLETION OF CONSTRUCTION FOR WASTEWATER FACILITIES OR ACTIVITIES

1. Instructions

Facility Information

2.

- a. In accordance with Rule 62-620.410, F.A.C., this form must be submitted to the Department's appropriate district office or approved local program prior to placing a newly constructed facility or modified portion of an existing facility into operation for any purpose other than testing for leaks and equipment operation.
- b. Each applicable item must be completed in full. Where attached sheets or other technical documentation are used in lieu of the blank spaces provided, indicate appropriate cross-references in the spaces.
- c. Three (3) copies of this notification with supporting documentation shall be submitted with this form.
- d. All information is to be typed or printed in ink. Dates are to be entered in MM/DD/YR format.

a.	Permit Number FLA010521 b. Facility Iden	tification Number
c.	Project/Facility Name Shangri-La-By-The-Lak	e WWTF
d.	Contact Name: Andrew R. Werner	
	Number and Street 100 Shangri-La Blvd	
	City/State/Zip Code Leesburg FL 34788	
	V-1):	352) 406-0597
Des		
De: Ma	contact chambers with associated piping. scription of Substantial Deviations from the Permit, Aparentals: No substantial deviations	
De: Ma	contact chambers with associated piping. scription of Substantial Deviations from the Permit, Apaterials: No substantial deviations plementation Dates	proved Preliminary Design Report, and Applic
De: Ma Im;	contact chambers with associated piping. scription of Substantial Deviations from the Permit, Apaterials: No substantial deviations plementation Dates Actual Date Construction Began	proved Preliminary Design Report, and Applic 06/01/2009
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In accordance with Rule 62-620.410, F.A.C., DEP Form 62-620.910(13) Notification of Availability of Record Drawings and Final Operation and Maintenance Manuals must be submitted within six month after the facilities are placed into operation.

6. Certifications

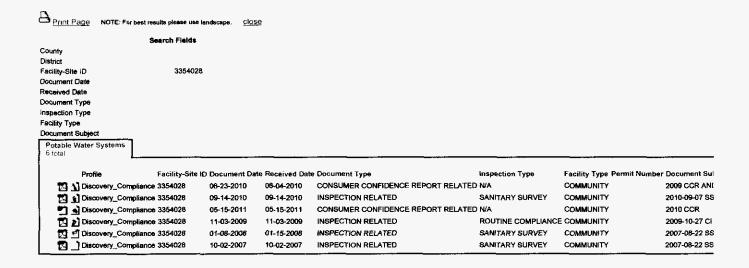
a. Applicant or Authorized Representative

my knowledge ar	statements made in this notification and all attachments are true, correct and complete to the best of and belief. I agree to operate and maintain these facilities in such a manner as to comply with the apter 403, F.S., Chapter 62-620, F.A.C., and all other applicable rules of the Department.
	han R Werner 9/21/10
The state of the s	arc of Applicant or Authorized Representative2) (Date)
(Signan	ire of Applicant of Altenorized Representatives) (Date)
Nar	me (Please Type) Andrew R. Werner Company Name Shangri-La-By-The-Lake Utilities, Inc.
	le <u>VD, Manager</u> Company Address <u>100 Shangri-La Blvd</u>
	one (352) 589-7744 City/State/Zip Code Leesburg FL 34788
b. App	plicant or Authorized Representative (For Domestic Wastewater Facilities Only)
I ce	entify that an appropriate draft operation and maintenance manual for these domestic wastewater facilities.
whi	ich has been examined by a professional engineer as certified below, is available and located at
<u>100</u>	O Shangri-La Blvd, Leesburg FL 34788 and can be submitted upon request.
$\mathcal{A}_{\mathcal{A}}$	Man R Weiner 9/21/10
	are of Applicant or Authorized Representative2) (Date)
(Oseman	tra or arbhanderic on a minne surface make an annual control
Na	me (Please Type) Andrew R. Werner Company Name Shangri-La-By-The-Lake Utilities, Inc.
Titl	le <u>VD, Manager</u> Company Address <u>100 Shangri-La Blvd</u>
Pho	one (352) 589-7744 City/State/Zip Code <u>Leesburg FL 34788</u>
I ce con wit not Sta hav rep	ofessional Engineer Registered in Florida entify that the facilities listed above have been completed to the point where the facilities are functionally implete. I further certify that construction on these facilities has proceeded substantially in accordance that the permit and the approved preliminary design report and application materials, or that deviations ted above will not prevent the system from functioning in compliance with all applicable statutes of the site of Florida and rules of the Department when properly operated and maintained. These determinations we been based upon on-site observation of construction, scheduled and conducted by me or by a project presentative under my direct supervision, for the purpose of determining if the work proceeded in impliance with the permit and the approved preliminary design report and application materials.
Co	mpany Name: Name (please type)
	impany Address:
	ry/State/Zip Code
Phe	one Number:
	(Seal, Signature, Date, and Registration Number)
If signed by the	authorized representative, attach a letter of authorization.

d. Professional Engineer Registered in Florida (For Domestic Wastewater Facilities Only) I certify that the draft operation and maintenance manual for these domestic wastewater facilities has been prepared or examined by me or by individual(s) under my direct supervision and that there is reasonable assurance, in my professional judgement, that the facilities, when properly operated and maintained in accordance with this manual, will comply with all applicable statutes of the State of Florida and rules of the Department.

Company Name: Wicks Consulting Services, Inc. Name (please type) Kenneth R. "TED" Wicks
Company Address: 225 West Main Street
City/State/Zip Code Tavares FL 32778
Phone Number: (352) 343-8667

(Seal. Signature. Date, and Registration Number)







Florida Department of Environmental Protection

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

Charlie Crist Governor

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

October 2, 2007

Mr. Jay Werner 1214 West IL Route 72 Leaf River, IL 61407 OCD-PW-SS-07-1136

Lake County – PW Shangri-La by the Lake Utilities, Inc. PWS ID Number 3354028

Dear Mr. Werner:

This confirms a visit to the subject community public water system on August 22, 2007 by Danielle D. Owens to conduct a sanitary survey inspection. A copy of the sanitary survey inspection report is enclosed for your reference and records.

Deficiencies found during the sanitary survey and in Department records are listed in the enclosed report. These deficiencies shall be corrected in order to return to compliance with *Florida Administrative Code* (F.A.C.) Rules 62-550, 62-555, 62-560 and 62-602.

Please correct the indicated deficiencies, and notify the Department in writing that the deficiencies have been corrected, no later than November 8, 2007. (You may use the attached response form to indicate the corrective actions taken.)

If you have any questions, please contact Danielle D. Owens by e-mail at Danielle.D.Owens@dep.state.fl.us or by phone at (407) 894-7555, extension 2216.

Sincerely,

Kim Dodson, Environmental Manager
Drinking Water Compliance and Enforcement

KMD/ddo Enclosures

cc: Danielle D. Owens, DEP Drinking Water Compliance and Enforcement

State of Florida Department of Environmental Protection Central District

SANITARY SURVEY REPORT

Plant Name: SHANGRI-LA BY THE LAKES UTILITIES	S. INC. County Lake PWS ID # 3354028
Plant Location 100 Shangri-La Boulevard, Leesburg, Fl	
Owner Name	Phone (815) 728-2508
Owner Address 1214 W. IL Route 72. Leaf River, IL 614	
	itle <u>Manager</u> Phone <u>(352) 589-7744</u>
This Survey Date <u>08/22/07</u> Last Survey Date <u>07/22</u>	/04 Last Compliance Inspection Date 10/28/98
PWS TYPE: Community	RAW WATER SOURCE
PLANT CATEGORY & CLASS: 4C	□ GROUND; Number of Wells 2 □ PURCHASED from PWS ID #
MAX-DAY DESIGN CAPACITY: 180,000gpd	Emergency Water Source Emergency Water Capacity
PWS STATUS: Approved	STANDBY POWER SOURCE
TREATMENT PROCESSES IN USE Disinfection	☑ Yes ☐ None ☐ Not Required Source ☐ Generac model no. SG015EPS-15
Disinfection Aeration	Capacity of Standby (kW) 20 Switchover: Automatic Manual
What additional treatment is needed? None at this time	Hrs Operated Under Load <u>Unknown</u>
For control of what deficiencies?	What equipment does it operate? Well Pumps Well #1
N/A	High Service PumpsHSP #1
CERUICE AREA CHARACTERISTICS	▼ Treatment Equipment All ■ ■ ■ ■ ■ ■ ■
SERVICE AREA CHARACTERISTICS	Satisfy avg. daily demand? ☐Yes ☐No ☑Unk
Mobile Home Park Food Service: ☐ Yes ☐ No ☒ N/A	Audio-visual alarm? ☐Yes ☒No
FOOD Service. Lifes Life MINA	Comments Generator did not appear to be
Number of Service Connections168	operational at the time of inspection.
Population Served 328 Basis Operator	DISTRIBUTION SYSTEM
OPERATION & MAINTENANCE	Coliform Sampling Plan: ☐ Yes ☐ No ☐ N/A
O&M Log:	D/DBP Monitoring Plan: X Yes X No X N/A
	Lead and Copper Plan: X Yes No N/A
Certified Operator: ☐ Yes ☐ No ☐ Not required	Distribution System Map
Operator(s) & Certification Class-Number	WRITTEN PROGRAMS
Tom Felton C-2241	Operation & Maintenance Manual Yes No
Operator Visitation Frequency	Preventive Maintenance Program X Yes No
Hrs/day: Required Visit Actual Visit	Flushing Program⊠ Yes ☐ No ☐ N/A
Days/wk: Required 5+1 Actual 5+1	Records Yes ⊠ No
Non-consecutive Days? ☐ Yes ☐ No ☒ N/A	Isolation Valve Exercise ☐ Yes ☐ No ☐ N/A Records☐Yes ☑ No
MONTHLY OPERATION REPORTS (MORs)	Emergency Response Plan ☑ Yes ☐ No ☐ N/A
MORs submitted regularly? ☐ Yes ☐ No ☐ N/A	Comments: No records available for review.
Data missing from MORs? ☐ No ☑ Yes ☐ N/A	
Average Day (from MORs) 45.916 gpd	CROSS CONNECTION CONTROL
Maximum Day (from MORs) 346,000 gpd 06/07	#BFPAs <u>1</u> #Tested <u>1</u>
Comments Plant category, plant class, and max-day	WWTP RPZ Yes Date Tested 10/06
design capacity reported on MORS differ from Department records.	Written Plan: Inadequate Date Unknown
	Comments Cross-connection control program not
Flow Measuring Device Flow Meter	established and implemented.
Meter Size & Type: 4" McCrometer & 6" Water Specialties	

PWS ID#	3354028
Date	08/22/07

GROUND WATER SOURCE

·	WATER SOURCE				
Well Number (Florida Unique Well ID#)		1 (AAH6720)	2 (AAH6721)		
Year Drilled		1975	1999		
Depth Dri	lled	340'	330'		
Drilling Me	ethod	Cable tool	Cable tool		
Type of G	rout	Unknown	Neat cement		
Static Wat	ter Level	14'	12'	1.	
Pumping \	Water Level	Unknown	12'		
Design W	ell Yield	250	850		
Test Yield		Unknown	1,200 gpm	 	
Actual Yie	Id (if different than rated capacity)	Unknown	Unknown		
Strainer		Unknown	Open hole		
Length (or	utside casing)	200'	191'		
Diameter ((outside casing)	6"	8"		
Material (c	outside casing)	Black steel	Black steel		,
Well Conta	amination History	None	None		
Is inundati	ion of well possible?	No	No		
6' X 6' X 4	* Concrete Pad	Yes	Yes		
·····	Septic Tank	N/A	N/A		
SET	Reuse Water	N/A	N/A		
BACKS	WW Plumbing	> 200'	> 200'		
	Other Sanitary Hazard	Canal <100'	Canal <200'	, , , , , , , , , , , , , , , , , , , ,	
	Туре	Submersible	Submersible		
	Manufacturer Name	Unknown	Griswold		
PUMP	Model Number	Unknown	30NSBYCZ-T	<u> </u>	
	Rated Capacity (gpm)	270	850		
	Motor Horsepower	3	30		
Well casing 12" above grade?		Yes	Yes	·	
Well Casing Sanitary Seal		Ok	Yes		
Raw Wate	r Sampling Tap	Yes	Yes		
Above Gro	ound Check Valve	Yes	Yes		
Security		Yes	Yes		
Well Vent Protection		N/A	Yes		

COMMEN 13 Provide information for all items marked	<u>"unknown."</u>

PWS ID#	3354028
Date	08/22/07

(

CHLORINATION (Disinfection) Type: Gas Hypo Make Chem-Tech (2) Capacity 30 and			STORAGE FACILITIES (G) Ground (C) Clearwell (E) Elevated (B) Bladder (H) Hydropneumatic / flow-through					
Make <u>Chem-Tech (2)</u> Capacity <u>30 gpd</u> Chlorine Feed Rate <u>80% stroke</u> Avg. Amount of Cl ₂ gas used <u>N/A</u>				Tank Type/Number	G	H/1	H/2	
Avg. Amour	nt of Cl ₂ gas	used	N	/A	Capacity (gal)	20,000	3,000	5,000
Chlorine Re Remote tap					Material	Concrete	Steel	Steel
DPD Test K			With opera		Gravity Drain	Yes	Yes	Yes
	Non		Not Used I		By-Pass Piping	Yes	Yes	Yes
Injection Po Booster Pur					Protected Openings	Yes	Yes	Yes
Comments					Sight Glass or	N/A	Yes	Yes
					Level Indicator		1 65	, 00
AERATION	/Garas Ea	Mn De	moval)		Fittings for Sight Glass	N/A	Yes	Yes
Type Spray	ı`	Capa		0 gpm	AWWA Sample Tap	N/A	Yes	Yes
Aerator Con	dition Po	or			PRV/ARV	N/A	PRV	PRV
Visible Alga Protective S					Pressure Gauge	N/A	Yes	Yes
Frequency (On/Off Pressure	N/A	35/55	35/55
Date Last In	spected/Cl	eaned_Un	known		Access Secured	Yes	Yes	Yes
Comments			gae growtl	n and	Access Manhole	Yes	Yes	Yes
vegetation is	usi <u>de me ac</u>	erator.			Date of Inspection	Unknown	Unknown	Unknown
	<u></u>					Unknown	Unknown	Unknown
HIGH SER	/ICE PUMP	HSP2	HSP3	HSP4	Date of Cleaning	Cilkitowii	Cildiowii	Ciliaioiiii
Pump Number	погі	пога	пого	nor#	Comments			
Туре	Centrifugal	Centrifugal	Centrifugai	Centrifugai				
Make	Goulds	Goulds	Jacuzzi	Jacuzzi				
Model	3656	3656	20DC4	20CD4				
Capacity	125	125	545	545		•	•	
(gpm)					•			
Motor HP	7.5	7.5	20	20	,			
Date Installed	1999	1999	2001	2001				
Comments								

PWS ID#_	3354028
Date	08/22/07

DEFICIENCIES:

Failure to operate the water treatment plant within the designated maximum-day operating capacity. A
review of records indicates flows exceeded the maximum-day design capacity in June 2007.

No supplier of water shall operate any drinking water treatment plant at a capacity greater than the plant's permitted operating capacity except with the Department's prior approval, which shall be given when such operation will not cause a violation of a maximum contaminant level, a treatment technique requirement, or other operating requirements and is for no more than three months, or under circumstances that the supplier of water documents as highly unusual and nonrecurring. [Rule 62-555.350(4), F.A.C.]

Flushing activities, leaks, and/or breaks shall be recorded on monthly operation reports (MOR). For each day there are emergency or abnormal operating conditions at the plant or in the distribution system served by the plant, describe the emergency or abnormal operating conditions on the MOR (attach additional sheets as necessary). In addition, for each day plant or distribution components other than water service lines are taken out of operation for repair or maintenance, describe the repair or maintenance on the MOR (attach additional sheets as necessary). [Rule 62-555.900(3), F.A.C.]

The total capacity of all water source and treatment facilities connected to a water system shall at least equal the water system's design maximum-day water demand (including design fire-flow demand if fire protection is being provided). [Rule 62-555.320(6), F.A.C.]

- 2. Failure to provide standby power that complies with 62-555.320(14), F.A.C.
 - a. Each community water system (CWS) serving, or designed to serve, 350 or more persons or 150 or more service connections shall provide standby power for operation of that portion of the system's water source, treatment, and pumping facilities necessary to deliver drinking water meeting all applicable primary or secondary standards at a rate at least equal to the average daily water demand for the system.
 - b. Standby power shall be provided through:
 - i. Connection to at least two independent power feeds from separate substations; or
 - ii. One or more auxiliary power sources (i.e., generators or engines).
 - c. Where standby power is provided through connection to independent power feeds from separate substations, the power feeds shall not be located in the same conduit or supported from the same utility pole and, if overhead power feeds are used, shall not cross or be located in an area where a single plausible occurrence (e.g., a falten tree) could disrupt both power feeds.
 - d. Where standby power is provided through an auxiliary power source, an in-place auxiliary power source is preferred. A portable auxiliary power source may be provided only if all of the following conditions are met:
 - i. A system to automatically start up the auxiliary power source and transfer electrical loads is not required under paragraph (e) below.
 - ii. The supplier of water demonstrates that the water system has first priority for use of the portable auxiliary power source.
 - iii. The supplier of water demonstrates that the portable auxiliary power source will at all times be in reasonably close proximity to (i.e., within 25 miles of) the water system components for which standby power is required.
 - e. Where standby power is required and the time delay required to manually transfer electrical loads from one power source to another could result in failure to maintain the minimum water distribution system pressure required under subsection 62-555.350(7), the supplier of water shall provide a system to automatically start up the auxiliary power source if an auxiliary power source is provided and to automatically transfer electrical loads.

At each site where standby power is required under paragraph (a) above, the supplier of water shall provide an audio-visual alarm system that is activated in the event any power source fails. If the site is not staffed during all hours the standby-powered water system components are in operation, the alarm also shall be telemetered to a place staffed during all hours the standby-powered water system components are in operation, or shall trigger an automatic telephone dialing or paging device, to enable notification of an authorized representative of the supplier of water.

PWS	ID#	3354028
Date		08/22/07

DEFICIENCIES (continued):

3. Failure to adequately establish and implement a cross-connection control program.

Community water systems, and all public water systems that have service areas also served by reclaimed water systems regulated under Part III of Chapter 62-610, F.A.C., shall establish and implement a routine cross-connection control program to detect and control cross-connections and prevent backflow of contaminants into the water system. This program shall include a written plan that is developed using recommended practices of the American Water Works Association set forth in Recommended Practice for Backflow Prevention and Cross-Connection Control, AWWA Manual M14, as incorporated into Rule 62-555.330, F.A.C. [Rule 62-555.360(2), F.A.C.]

Upon discovery of a prohibited cross-connection, public water systems shall either eliminate the cross-connection by installation of an appropriate backflow prevention device acceptable to the Department or shall discontinue service until the contaminant source is eliminated. [Rule 62-555.360(3), F.A.C.]

The Florida Rural Water Association's website, <u>www.frwa.net</u>, has a cross-connection control manual for your reference.

4. Failure to maintain all public water system (PWS) components. The aerator and its protective screen are covered with profuse algae growth. Vegetative matter is growing inside the associated ground storage tank.

Suppliers of water shall keep all necessary public water system components in operation and shall maintain such components in good operating condition so the components function as intended [Rule 62-555.350(2), F.A.C.]

5. Failure to keep records documenting that isolation valves are being exercised.

Suppliers of water shall keep records documenting that their isolation valves are being exercised in accordance with subsection 62-555.350(2), F.A.C. [Rule 62-555.350(12)(c), F.A.C.]

6. Failure to keep records documenting that dead-end water mains are being flushed.

Suppliers of water shall keep records documenting that their water mains conveying finished drinking water are being flushed in accordance with subsection 62-555.350(2), F.A.C. [Rule 62-555.350(12)(c), F.A.C.]

7. Submitted monthly operation reports (MORs) contain omissions and/or information provided differs from department records. Max-day design capacity, plant category, and plant class reported on MORs differs from Department records.

Provide the correct information on future MORs. [Rule 62-555,350(12)(b), F.A.C]

COMMENTS/REMINDERS:

Lead and copper tap sampling must be conducted during the June-September 2008 monitoring period.

For other chemical monitoring requirements, you are advised to call Marie Carrasquillo at (407) 894-7555, extension 2242, or Paul Morrison at (407) 893-3988.

All results must be submitted to DEP within the first 10 days following the end of the required monitoring period or the first 10 days following the month in which the sample results were received, whichever time is the shortest. A Florida Department of Health (DOH) certified laboratory must analyze all laboratory samples.

Provide documentation of last cleaning and inspection for finished-drinking-water storage tanks.

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

PWS ID#	_3354028
Date	08/22/07

COMMENTS/REMINDERS:

Finished-drinking-water storage tanks shall be checked at least annually to ensure that hatches are closed and deposits, and sludge from inside the tanks; and shall be inspected for structural and coating integrity at least once every five years by personnel under the responsible charge of a professional engineer licensed in Florida.

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

Provide information for all items marked "unknown."

Inspector Nexulle D Overa	Title _	Env. Specialist I	Date	08/28/07
Approved by	Title	Environmental Manager	Date	10/2/07

GENERAL UTILITIES CORPORATION

7621 Frog Log Leesburg, FL 34748 Tele: 352-787-2493 FAX 352-326-8756 peold by email

8 January 2008

Department of Environmental Protection 3319 Maguire Blvd., Suite 232 Orlando, FL 32803-3767

Attn: Danielle Owens

Drinking Water Compliance/Enforcement

RE: Letter #OCD-PW-CI-07-1136 Shangri-La by the Lake Utilities PWS ID Number 3354028

Dear Ms Owens:

Thank you for your 22 August 2007 inspection.

The following is a response to the items noted in your survey.

1. A corrected MOR for June 2007 is attached. This should eliminate the need for a capacity analyses.

1. The existing standby generator has been serviced and is now operating properly.

3. A new cross connection program has been established and will be a living document and adjusted as the community changes.

4. The owner has cleaned the areation chamber with 12% Sodium Hypochlorite and has put this preventive maintenance on a more frequent schedule.

5. Documentation of isolation valve exercising will be dated and signed on the isolation valve plan after each event.

6. Main flushing will be documented with a signature and date on the main flushing plan after each event.

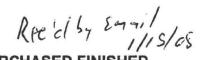
7. MOR information has been updated.

Thank you for your assistance with environmental issues.

Sincerely,

Thomas M. Felton

Cc: Shangri-La





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

See page 4 for instructions.

DEP Form 62-555.900(3)Alternate

	1-8-										
1.	General Information f	for the Month	Year of: June 12	20067							
A.	Public Water System (P	WS) Informati	on	,							
	PWS Name: Shangri-la	a by the Lake						PWS Ide	ntification No	umber: 3354028	
	PWS Type:	Community	Non-Transient Non-	Community .	Transie	nt Non-Community		Consecutive			
	Number of Service Co	nnections at Er	nd of Month: 168			Total Population S	Served at	End of Mon	th: 328		
PWS Owner: Shangri-la by the Lake Utilities, 1214 West Route 27, Leaf River, IL 61047											
	Contact Person: Thomas M. Felton Contact Person's Title: Operator										
	Contact Person's Maili	ng Address: 76	21 Frog Log			City: Leesburg			State: FI	Zip Code: 34748	
	Contact Person's Telep					Contact Person's F	Fax Numb	per: 352-326	-8756		
	Contact Person's E-Ma	il Address: ger	neralutilities@AOL.com								
B.	Water Treatment Plant	Information									
	Plant Name: Shangri-la	a						Plant Tel	ephone Num	ber: 352-787-2493	
	Plant Address: 100 Sha	angri-La Blvd.				City: Leesburg		State: Fl		Zip Code: 34788	
	Type of Water Treated		Raw Ground Water		sed Finished V	Water		•			
	Permitted Maximum D	Day Operating (Capacity of Plant, gallons	s per day: 180,	000						
	Plant Category (per sui					Plant Class (per su	bsection	62-699.310	(4), F.A.C.):	С	
	Licensed Operators	就被BAS. 58	Name	I	icense Class	License Number	Services.		Day(s)/Shift((s) Worked	I ALIMA
	Lead/Chief Operator	T. Felton	,		Ç	0002241			Vari	ies	
	Other Operators:	J. Bethea			С	0008590			Vari	ies	
		D Harris			С	0014540			Vari	ies	
		G. Murray			С	0012419			Vari	ies	
		T. Levi			С	0012911			Vari	ies	
11	. Certification by Lead	UChief On one	40.0	Addition the state of			ELDE IN	THE RESERVE			
			perator licensed in Florid	de am the lead	Under Francis	- Cale a sustant transf		411-45-4	in Don't a Cal	his manner! I soutifully at	Alba
			and accurate to the best								
			aplicable standards refere								
nla	nt were prepared each d	that a licens	sed operator staffed or vis	cited this plant	during the m	onth indicated above	va. (1) rac	unat the folio	owing addition	vicals used and chemica	1 food
rate	es: and (2) if anyticable	annrentiatetr	eatment process performa	ance records I	Curthermore	Lagree to provide t	hece addi	tional opera	tions records	to the PWS owner so the	he DIVE
OW	ner can retain them too	ether with con	ies of this report, at a con	venient location	on for at least	ten vegre	ireśe addi	itional opera	ifolisaccords	to the I was owner so the	TC1 W
O, III		Other With Con	se or mis-report, at a con	TVCIII TOCALIC	off tot at least	ton years.					
	41/		7/7/07	Thomas M. F	Felton	·•0			0002241		
Sig	pature and Date		, , , , ,	Printed or Ty					License Nu	ımher	
1				11micu of Ty	pod Hamie				Licondo 14u		
1											

	d Chlorine (Chloramines)							
Means of Achieving Four-Log Virus Inactivation/Removal: *	d Chlorine (Chloramines)							
I I I I I I I I I I I I I I I I I I I								
Ultraviolet Radiation Other (Describe):								
Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*	hlorine Dioxide							
Days CT Calculations CT Calculations UV Dose UV Dose UV Dose								
Plant Lowest CT Lowest								
Staffed Lowest Residual Disinfectant Provided Residual	·							
Or Disinfectant Coutact Time Before or Disinfectant Concentration (T) at C at First Minimum Lowest Minimum Concentration								
Visited Concestration (T) at C at First Minimum Lowest Minimum Concentration by Net Quantity (C) Before or at Measurement Customer Temp. CT Operating UV Dose n at Remote	Emergency or Abnormal Operating							
Day of Operator Hours of Finished Print Customer Point During During of pH of Required, UV Dose, Required, Point in Co	Conditions; Repair or Maintenance Work that							
	Involves Taking Water System Components							
onth X Operation Produced gal Rate, gpd Flow, mg/L minutes mg-min/L °C Applicable min/L sec/cm² sec/cm² System, mg/L	Out of Operation							
1 24 37 000 2 24 35 000								
3 24 \$5000								
4 24 19000								
5 24 26 000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	67							
7 24 3 3 000								
8 24 22000								
9 24 3 4 000								
10 - 24 26 000 1.5 11 - 24 27 000 1.2								
12 24 28 000								
13 24 24 000								
14 24 32 000 0 0 M								
16 24 36 000								
17 24 30 000								
18 24 27 000								
19 24 3 7 000 0.2 20 24 3 2 000 0.5								
21 24 24 000								
22 24 7,2,000								
23 24 3 6 000 0 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1								
24 24 33 000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
26 24 3 7 000								
27 24 53 000								
28 24 31 000 0.8								
30 24 3 000								
Total 933,000								
Average 3 1 000 Maximum 5 3 000	•							





Florida Department of Environmental Protection

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

Charlie Crist Governor

Jeff Kottkamp

Lt. Governor

Michael W. Sole Secretary

November 3, 2009

Mr. Jay Werner Werner and Werner Incorporated 1214 West IL Route 72 Leaf River, IL 61047-9614

OCD-PW-CI-09-0786

Lake County – PW Shangri-La By The Lake Utilities, Inc. PWS ID Number 3354028

Dear Mr. Werner:

The Department conducted a compliance inspection of your public water system on October 27, 2009, by Jill Farris. A copy of the Water Treatment Plant Compliance Inspection Report is enclosed for your reference and records.

Deficiencies found during the compliance inspection and in Department records are listed in the enclosed report. These deficiencies shall be corrected in order to return to compliance with *Florida Administrative Code* (F.A.C.) Rules 62-550, 62-560 and 62-602.

Please correct the indicated deficiencies, and notify the Department in writing that the deficiencies have been corrected, no later than December 4, 2009. (You may use the attached response form to indicate the corrective actions taken.)

If you have any questions, please contact me by email at Jill.Farris@dep.state.fl.us or by phone at (407) 894-7555, extension 2226.

Sincerely.

Jill Farris, Environmental Specialist

Drinking Water Compliance and Enforcement

/jmf

cc: Tom Felton, General Utilities [generalutilities@aol.com]

State of Florida Department of Environmental Protection Central District WATER TREATMENT PLANT COMPLIANCE INSPECTION REPORT

	_				
	County: <u>Lake</u>		# <u>3354028</u>	· · · · · · · · · · · · · · · · · · ·	
Address 100 Shangri-La Boulevard, Leesburg, FL 34788		Phone _:	<u>352-589-7744</u>		
Owner Name Shangri-la By The Lakes Utilities, Inc.		Contact:	Jay Werner		
Owner Address 1214 West IL Route 72, Leaf River, IL 61047-9614					
This Inspection Date 10/27/09 Last C.I. Date 10/28/9		te 08/22/07			
PWS Type: Community	nmunity	ommunity	·		
Service Area Characteristics Mobile Home Park No. of	Service Connections	168			
Food Service? ☐Yes ☐ No ☒ N/A	Served Population3	28			
OPERATION & MAINTENANCE					
Certified Operator: X Yes No	STORAGE TANKS				
Operator & Certification Class-Number:		(F	\ E1==t==		
Tom Felton C-2241) Elevator		
O & M Log: Yes No			ic/flow-throug		
WELL	Tank Type	G	H/1	H/2	
Number of wells 2 Stand-by well?	Capacity	20,000	3,000	5,000	
	Gravity Drain	Yes	Yes	Yes	
Auxiliary power ⊠ Yes ☐ No ☐ N/A 6' x 6' x 4" pad ☑ Yes ☐ No	By-Pass Piping	Yes	Yes	Yes	
Sanitary seal	Pressure Gauge	N/A	Yes	Yes	
Raw water tap: Yes No	On/Off Pressure	N/A	30/50	30/50	
Not smooth nosed	Sight Glass	N/A	Yes	No	
Check valve X Yes No	Air Release Valve	N/A	Yes	Yes	
Fence/housing X Yes No	Pressure Relief Valve	N/A	Yes	Yes	
Sanitary hazards None observed	Access Padlocked	Yes	Yes	Yes	
CHLORINATION	//cooss adiconcd			100	
Chlorinator type: ☐ Gas ☐ Hypo	DEFICIENCIES / CO	MMENTS			
Cl ₂ residual: Plant 1.48 Remote 2.2+	227.10.23.10.20.7 0.	ZINKILLI (I G			
DPD-type test kit ⊠ Yes □ No		•			
Gas cylinder scale ☐ Yes 🖾 No					
Gas cylinder chained ☐ Yes ☒ No	(Can attached a	~~~\			
Adequate air-pak Yes No	(See attached page	age)			
Fresh ammonia solution Yes No					
Adequate ventilation					
Dual chlorination					
Auto-switchover					
Alarm Yes No	-				
AERATION Type: Spray					
Condition Good					
OTHER TREATMENT PROCESSES:					
None					
OTHER					
Flow measuring device: 4" Macrometer, 6" Water					
Specialties					
Back-flow prevention devices: ☑ Yes ☐ No					
Cross-connections: None observed					

PWS	ID <u>3354028</u>	
Date	10/27/09	

DEFICIENCIES:

- 1. Failure to maintain public water system components.
 - The well pad for well #1 and the area surrounding both hydropneumatic tanks is overcome with plant growth.
 - The piping around the hydropneumatic tanks is corroded.

Suppliers of water shall keep all necessary public water system components in operation and shall maintain such components in good operating condition so the components function as intended. [Rule 62-555.350(2), F.A.C.]

2. Failure to keep records documenting that isolation valves are being exercised.

Suppliers of water shall keep records documenting that their isolation valves are being exercised in accordance with subsection 62-555.350(2), F.A.C. [Rule 62-555.350(12)(c), F.A.C.]

3. Failure to keep records documenting that dead-end water mains are being flushed.

Suppliers of water shall keep records documenting that their water mains conveying finished drinking water are being flushed in accordance with subsection 62-555.350(2), F.A.C. [Rule 62-555.350(12)(c), F.A.C.]

COMMENTS/REMINDERS:

• Lead and copper tap sampling must be conducted during the January through December 2011 monitoring period.

For other chemical monitoring requirements, you are advised to contact Marie Carrasquillo at (321) 229-8958.

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

• Provide documentation that the finished-drinking-water meter has been calibrated.

Preventive maintenance on electrical or mechanical equipment -- including exercising of auxiliary power sources, checking the calibration of finished-drinking-water meters at treatment plants, testing of air or pressure relief valves for hydropneumatic tanks, and exercising of isolation valves -- shall be performed in accordance with the equipment manufacturer's recommendations or in accordance with a written preventive maintenance program established by the supplier of water; however, in no case shall auxiliary power sources be run under load less frequently than monthly. [Rule 62-555.350(2), F.A.C.]

• For monitoring schedules and information about the Drinking Water Program, please visit the Central District's Drinking Water website at http://www.dep.state.fl.us/central/Home/DrinkingWater/default.htm.

Inspector	jui	yan		Title Environmental Specialist I	Date	10/27/09
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Effective Date: April 10, 2003

Certification of Delivery of Consumer Confidence Report

GENERAL INSTRUCTIONS: This form shall be completed by all community water systems (CWSs) that have prepared a Consumer Confidence Report (CCR) in accordance with Rule 62-550.824, F.A.C., Consumer Confidence Reports. At the end of this form is a certification in which a system's authorized representative shall certify that the reported information is accurate and is in conformance with Rule 62-550.824, F.A.C. COMPLETE THIS FORM AND SUBMIT IT BY AUGUST 10, together with a copy of your system's CCR, and any newspaper notice(s) and posted notice(s) of your CCR, to the appropriate DEP district office or Approved County Health Department (ACHD). Systems serving 100,000 or more persons posting their CCRs on publicly accessible Internet sites shall provide the information on the appropriate Internet link(s). All information provided on this form must be typed or printed in ink.

I. General Water System Information. (To be completed by all community water systems.)
System name: Shavarra Contact person: TFelton
PWS Identification number (PWS-ID): 3354028 Contact phone number: 352 787 249
Mailing address: PO Box 491221 City: Leesburg
State: FL Zip: 34749-1321 Population served (not the number of "service connections"): 328
II. CCR Distribution Method. (To be completed by all community water systems. Choose A or B as appropriate.)
A. We mailed or otherwise directly delivered a copy of our CCR to each customer on (enter date(s) of mailing or delivery.) 23 Tome 2010 (Systems that do not use the mailing waiver must mail or otherwise directly deliver a copy of their CCR to each customer.)
B. We were eligible to use a mailing waiver and used a mailing waiver. (Systems are eligible to use a mailing waiver <u>only</u> if they serve fewer than 10,000 persons, have not had any MCL or monitoring and reporting (M/R) violations, nor have been issued any formal Notices of Violations (NOVs), Consent Orders, Administrative Orders, or court-ordered civil actions during the calendar year before the year the CCR is due to the customers.)
Answer a. b. and c below.) a. Date of newspaper:
☐ b. Name of newspaper/newsletter that published our CCR:
□ c. A copy of our notice to customers, informing them that our CCR will <u>not</u> be mailed to them, is attached. This notice was: □mailed with bill; □published in newspaper/newsletter; or □other (describe)
III. Posting of CCR on the Internet. (To be completed by all CWSs serving 100,000 or more persons.)
☐ We posted our CCR on this publicly accessible Internet Site:
IV. Report on Your Effort to Distribute Your CCR to Your Water Consumers.
(To be completed by all CWSs. Check all items that apply - at least 2 items must be checked.)
In addition to the methods selected in Part II,
A. We posted our CCR on this publicly accessible Internet Indasoaphox. site -x m.com
B. We published our CCR in the local newspaper(s). The name(s) and date(s) of the newspaper(s) are:
C. We advertised the availability of our CCR as a press release, radio announcement, or TV announcement. The type(s) and date(s) of the advertisement(s) are:
☐ D. We delivered multiple copies of our CCR to single bill addresses serving several persons.
☐ E. We delivered multiple copies of our CCR to the following community organizations:
F. Our CCR was posted in the following public locations: Club House

Page 1 of 2

G. Our CCR was distributed by other methods (e.g., additional	
Additional Copies are	avoilable at main office.
_	11
	
V. Use of Non-English Language in CCR. (To be completed	d by all community water systems.)
☐ Information in a non-English language was included in our CC	
speak English but speak	The method we used to determine the proportion of
non-English speaking customers is	
🔀 This requirement does not apply to our system, because we h	ave no non-English speaking group among our
customers equal to or exceeding 20% of our total number of	customers.
VI. Other Delivery Requirements. (To be completed by all of	community water systems.)
(A) Was a copy of your CCR sent to your county health departm	
(B) Is your system regulated by the Public Service Commission	· · · · · · · · · · · · · · · · · · ·
If Yes, was a copy of your CCR sent to the PSC, as required	
(C) If your system sells water to other systems, have you provid required	·
consumer confidence information?	Applicable
VII. Certification of Delivery of CCR and Compliance with R	egulations. (To be completed by all CWSs.)
This statement certifies that the above named community public period starting January 1, 29, and ending December 31, 29, to it provided the appropriate notices of availability according to the r Rule 62-550.824, F.A.C. This statement also certifies that the recompliance monitoring data for the same period previously subm	water system has distributed its CCR for the time its customers on (mm/dd/yy) oL/23/tO and requirements listed in this form, which are also found in apported information is correct and consistent with the
delivered to the agencies identified in Rules 62-550.824(3)(e)3.,	and 4., F.A.C.
SIGNATURE OF AUTHORIZED REPRESENTATIVE:	
NAME (please print): T Felton	
TITLE: Operator	DATE: 31 JUL 2010
	3110019010
	•
🔀 A copy of our CCR is attached.	

DEP Form 62-555.900(19) Effective Date: April 10, 2003



Annual Drinking Water Quality Report A Publication for Shangri-La by the Lake PWS ID 3354028 Report for year 2009 Prepared 2010

We are pleased to present you with this year's Annual Water Quality Report. This report is designed to inform you about the quality of water and services we have delivered to you every day. Our constant goal is to provide you with a safe and dependable supply of drinking water. We want you to understand the efforts we make to continually improve the water treatment process and protect our water resources. We are committed to ensuring the quality of your water.

Our water is produced by two (2) groundwater wells that draws water from the Floridan Aquifer, aerated for taste and odor control and is disinfected by chlorination.

If you have any questions concerning your water utility, please contact Shangri-La by the Lake Water Treatment Division

at (352-589-7744) between the hours of 8:00 a.m. and 5:00 p.m. We want our valued customers to be informed about their water utility.

Shangri-La by the Lake routinely monitors for contaminants in your drinking water according to Federal and State laws.

The state allows us to monitor for some contaminants less than once per year because the concentration for these contaminants do not change frequently. Some of our data, though representative, is more than one year old. All water analyses are the most recent sampling in accordance with the Safe Water Drinking Act.

In this table, you will find many terms and abbreviations you might not be familiar with. To help you better understand these terms, we've provided the following definitions:

Parts per million (ppm) or Milligrams per liter (mg/L): One part by weight of analyte to 1 million parts by weight of water sample.

Parts per billion (ppb) or Micrograms per liter (ug/l): One part by weight of analyte to 1 billion parts by weight of water sample.

Picocurie per liter (pCi/L): Picocuries per liter is a measure of the radioactivity in water.

Action Level (AL): the concentration of a contaminant that, if exceeded, triggers treatment or other requirements that a water system must follow.

N/A: means not applicable.

Maximum Contaminant Level (MCL): The "Maximum Allowed" (MCL) is the highest level of a contaminant that is allowed in drinking water. MCL's are set as close to the MCLG's as feasible using the best available treatment technology.

Maximum Contaminant Level Goal (MCLG): The "Goal" (MCLG) is the level of a contaminant in drinking water below that there is no known or expected risk to health. MCLG's allow for a margin of safety.

Maximum Residual Disinfectant Level or MRDL: The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbial contaminants.

Maximum Residual Disinfectant Level Goal or MRDLG: The level of a drinking water disinfectant below that there is no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contaminants.

Range: Indicates the lowest and highest analysis result.

FDEP: Florida Department of Environmental Protection

USEPA: United States Environmental Protection Agency.

IDSE: Initial Distribution System Evaluation. The IDSE is a one-time study conducted by water systems to identify distribution system locations with high concentrations of trihalomethanes (THMs) and haloacetic acids (HAAs). Water systems will use results form the IDSE, in conjunction with their Stage 1 Disinfection Compliance Monitoring Data (DBPR), to select compliance monitoring locations for the Stage 2 DBPR.

TEST RESULTS TABLE

Results in the "Level Detected" column for Radiological and Inorganic contaminants are from individual samples.

Radiological Contaminants

Contaminant and	Dates of	MCL Violation	Level	Range of	MCLG	MCL	Likely Source of Contamination
Unit of Measurement	Sampling	Y/N	Detected	results			
Alpha emitters (pCi/l)	8/2009	N	3.9	N/A	0	15	Erosion of natural deposits

Inorganic Contaminants

Contaminant and Unit of Measurement	Dates of Sampling	MCL Violation Y/N	Level Detected	Range of results	MCLG	MCL	Likely Source of Contamination
Barium (ppm)	4/2009	N	0.011	N/A	2	2	Discharge of drilling wastes; discharge from metal refineries; erosion of natural deposits
Fluoride (ppm)	4/2009	Ň	0.11	N/A	4	4.0	Erosion of natural deposits; discharge from fertilizer and aluminum factories. Water additive which promotes strong teeth when at optimum levels between 0.7 and 1.2 ppm
Sodium (ppm)	4/2009	N	8.9	N/A	N/A	160	Salt water intrusion, leaching from soil

TTHMs and Stage 1 Disinfectant/Disinfection By-Product (D/DBP) Parameters

For bromate, chloramines, or chlorine, the level detected is the highest running annual average (RAA), computed quarterly, of monthly averages of all samples collected. For haloacetic acids or TTHM, the level detected is the highest RAA, computed quarterly, of quarterly averages of all samples collected if the system is monitoring quarterly or is the average of all samples taken during the year if the system monitors less frequently than quarterly. Range of results is the range of individual sample results (lowest to highest) for all monitoring locations, including

Initial Distribution System Evaluation (IDSE) results as well as Stage 1 compliance results.

Contaminant and	Dates of	MCL	Level	Range of	MCLG	MCL	Likely Source of Contamination
Unit of	Sampling	Violation	Detected	results	Or	Or	
Measurement	(mo./yr.)	Y/N			MRDLG	MRDL	
Chlorine (ppm)	1-12/	N	0.9	0.4-1.2	MRDLG	MRDL	Water additive to control microbes
	2009		+		=4	=4.0	
Haloacetic Acids	8/2009	N	11	N/A	N/A	MCL=	By-product of drinking water
(HAA5) (ppb)				-		60	disinfection
TTHM (total	8/2009	N	26.5	N/A	N/A	MCL=	By-product of drinking water
trihalomethanes						80	disinfection
(ppb)		}					

Lead and Copper (Tap Water)

Contaminant and Unit of Measurement	Dates of Sampling (mo./yr.)	AL Violation Y/N	90 th Percentile Results	No. of sampling sites exceeding the AL	MCLG	AL (action level)	Likely source of contamination
Copper (tap water) (ppm)	6/2008	N	0.15	0	1.3	1.3	Corrosion of household plumbing systems; erosion of natural deposits; leaching from wood preservative
Lead (tap water) (ppb)	6/2008	N	0.8	0	0	15	Corrosion of household plumbing systems; erosion of natural deposits

The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs and wells. As water travels over the surface of the land and through the ground, it dissolves naturally occurring minerals and, in some cases, radioactive material, and can pick up substances resulting from the presence of animals or from human activity.

Contaminants that may be present in source water include:

- (A): Microbial contaminants, such as viruses and bacteria, which may come from sewage treatment plants, septic systems, agricultural livestock, and wildlife.
- (B): Inorganic contaminants, such as salts and metals, which can be naturally occurring or result from urban storm water runoff, industrial or domestic wastewater discharges, oil and gas production, mining or farming.
- (C). Pesticides and herbicides, which may come from a variety of sources such as agriculture, urban storm water runoff and residential uses.
- (D): Organic chemical contaminants, including synthetic and volatile organic chemicals, which are by-products of industrial processes and petroleum production, and can also come from gas stations, urban storm water runoff and septic systems.
- (E): Radioactive contaminants, which can be naturally occurring or be the result of oil and gas production and mining activities.

In order to ensure that tap water is safe to drink, USEPA prescribes regulations, which limit the amount of certain contaminants in water provided by public water systems. Food and Drug Administration regulations establish limits for contaminants in bottled water, which must provide the same protection for public health.

Drinking water, including bottled water, may reasonably be expected to contain at least small amounts of contaminants. The presence of contaminants does not necessarily indicate that the water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the US Environmental Protection Agency's Safe Drinking Water Hotline at 1-800-426-4791.

MCL's are set at very stringent levels. To understand the possible health effects described for many regulated contaminants, a person would have to drink two (2) liters of water every day at the MCL level for a lifetime to have a one-in-a-million chance of having the described health effect.

In 2009 the department of Environmental Protection performed a Source Water Assessment. The assessments were conducted to provide information about any potential sources of contamination in the vicinity of our wells. A search of the data sources indicated no potential sources of contamination. The assessment data is available on the FDEP website link is www.dep.state.fl.us/swapp/.

Some people may be more vulnerable to contaminants in drinking water than the general population. Immune-compromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers. USEPA and the Center for Disease Control guidelines on appropriate means to lessen the risk of infection by cryptosporidium and other microbiological contaminants are available from the Safe Drinking Water Hotline (1-800-426-4791).

We at Shangri-La by the Lake work around the clock to provide top quality water to every tap. We ask that all our customers help us protect our water sources, which are the heart of our community, our way of life and our children's future.

If present, elevated levels of lead can cause serious health problems, especially for pregnant women and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. Shangri-La by the Lake is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline or at http://www.epa.gov/safewater/lead.



Florida Department of Environmental Protection

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

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

VIA EMAIL JAY-LAURA@JUNO.COM

September 14, 2010

Mr. Jay Werner Shangri-La by the Lakes Utilities, Inc. 1214 West IL Route 72 Leaf River, IL 61047-9614 OCD-PW-SS-10-0699

Lake County – PW Shangri-La by the Lakes Utilities, Inc. PWS ID Number 3354028

Dear Mr. Werner:

This confirms a visit to the subject community public water system on September 7, 2010, by Manuel Cardona and Matthew Bretzke to conduct a sanitary survey inspection. A copy of the sanitary survey inspection report is enclosed for your reference and records.

Deficiencies found during the sanitary survey and in Department records are listed in the enclosed report. These deficiencies shall be corrected in order to return to compliance with *Florida Administrative Code* (F.A.C.) Rules 62-550, 62-555, 62-560 and 62-602.

Please correct the indicated deficiencies, and notify the Department in writing that the deficiencies have been corrected, no later than October 14, 2010. (You may use the attached response form to indicate the corrective actions taken.)

If you have any questions, please contact Manuel Cardona by phone at (407) 894-7555, extension 2277, or by email at Manuel.Cardona@dep.state.fl.us.

Sincerely,

Reggie Phillips, Environmental Supervisor II Drinking Water Compliance and Enforcement

RFP/mfc

Enclosures: Cross-Connection Control Template A

cc: Tom Felton, General Utilities Corp. [generalutilities@aol.com]

State of Florida Department of Environmental Protection Central District

SANITARY SURVEY REPORT

Plant Location: 100 Shangri-La Boulevard, Leesburg. FL 34788	Plant Name: SHANGRI-LA BY THE LAKES UTILITIES, IN	NC. County <u>Lake</u> PWS ID # <u>3354028</u>
Owner Adness:	Plant Location: 100 Shangri-La Boulevard, Leesburg, FL 34788	
Owner Address: 1214 West IL Route 72, Leaf River, IL 61047-9614 Title Manager Phone (352) 406-0597 Contact Persor: Aud. Wemer Title Manager Phone (352) 406-0597 This Survey Date: 9/7/10 Last Survey Date 8/22/07 Last Compliance Inspection Date 10/27/09 PWS TYPE: Community Community RAW WATER SOURCE Community PLANT CATEGORY & CLASS: 5D PURCHASED From PWS ID # Emergency Water Source PWS STATUS: Approved Sproved Sproved Sproved Sproved Standbay PoWER SOURCE: Yes Source Generac model no. So(015F8>-15 Capacity of Standby (kW) 20 Switchover: Automatic Manual Instruction Manual Instruction Sproved Mrs. Quipment does it operate? Well Pumps Well #1 What equipment does it operate? Well Pumps Well #1 High Service Pumps HSP #1 Treatment Equipment All Satisty and daily demand? All Satisty and daily demand? All Satisty and daily demand? All Satisty and daily demand? All Satisty and daily demand? All Satisty and daily demand? All Satisty and daily demand? Al	Owner Name: Werner and Werner, Inc.	Phone (815) 728-2508
Contact Person: Andy Werner	Owner Address: 1214 West II. Route 72 Leaf River II. 61047-9	9614
PWS TYPE: Community PLANT CATEGORY & CLASS: 5D MAX-DAY DESIGN CAPACITY: 180,000 gpd PWS STATUS: Approved TREATMENT PROCESSES IN USE Disinfection Aeration Aeration Aeration Aeration Aeration SERVICE AREA CHARACTERISTICS Mobile Home Park Food Service: □ Yes □ No ☑ N/A Number of Service Connections 168 Population Served 328 Basis: Operator OPERATION & MAINTENANCE LOG: Yes Location Water Treatment Plant Comments CERTIFIED OPERATOR: Yes Operator(s) & Certification Class-Number: Tom Felton C-2241 Hrs/day: Required Visit Actual Visit Days/Wk: Required Visit A	Contact Person: Andy Werner Ti	tle <u>Manager</u> Phone <u>(352) 406-0597</u>
PLANT CATEGORY & CLASS: 5D MAX-DAY DESIGN CAPACITY: 180,000 gpd PWS STATUS: Approved TREATMENT PROCESSES IN USE Disinfection Aeration SERVICE AREA CHARACTERISTICS Mobile Home Park Food Service: Yes No N/A Number of Service Connections 168 Population Served 328 Basis: Operator OPERATION & MAINTENANCE LOG: Yes Location Water Treatment Plant Comments CERTIFIED OPERATOR: Yes Operator(s) & Certification Class-Number: Tom Felton C-2241 Hrs/day: Required Yisit Actual Visit Days/wk. Required 3 Actual 5+1 Non-consecutive Days? Yes No No N/A Comments: Nonconsecutive days for a total of 0.3hr/wk. MONTHLY OPERATION REPORTS (MORs) MORS submitted regularly? Yes S No Yes No N/A Average Day (from MORs) 25,750 gpd Maximum Day (from MORs) 93,000 gpd 06/2010 Comments Flow Measuring Device: Flow Meter Meter Size & Type: 4" McCrometer & 6" Water Specialties VISIT PURCHASED from PWS ID #	This Survey Date: 9/7/10 Last Survey Date 8/22/07	Last Compliance Inspection Date 10/27/09
PURCHASED from PWS ID #	PWS TYPE: Community	
Emergency Water Source	PLANT CATEGORY & CLASS: 5D	
TREATMENT PROCESSES IN USE Disinfection Aeration Aeration SERVICE AREA CHARACTERISTICS Mobile Home Park Food Service: Yes No N/A Number of Service Connections 168 Population Served 328 Basis: Operator OPERATION & MAINTENANCE LOG: Yes Location Water Treatment Plant Water Treatment Plant Comments Certification Class-Number: Tom Felton C-224 Hrs/day: Required Yisit Actual Yisit Days/Wk: Required 3 Actual 5+1 Days/Wk: Required 4+1 Days/Wk: Required 5+1 MAX-DAY DESIGN CAPACITY: 180,000 gpd		
STANDBY POWER SOURCE: Yes Disinfection Aeration SERVICE AREA CHARACTERISTICS Mobile Home Park Food Service: Yes No N/A Number of Service Connections 168 Population Served 328 Basis: Operator OPERATION & MAINTENANCE LOG: Yes Location Water Treatment Plant Comments CERTIFIED OPERATOR: Yes Operator(s) & Certification Class-Number: Tom Felton C-2241 Hrs/day: Required *Visit	PWS STATUS: Approved	Emergency Water Capacity
Capacity of Standby (kW) 20 Switchover: Automatic Manual Hrs Operated Under Load 1 hr/wk.		STANDBY POWER SOURCE: Yes
Disinfection Aeration Acration	TDEATMENT DDOCESSES IN LISE	
SERVICE AREA CHARACTERISTICS Mobile Home Park		
SERVICE AREA CHARACTERISTICS Mobile Home Park Food Service:		
Mobile Home Park Food Service:	Notation	
High Service Pumps	SERVICE AREA CHARACTERISTICS	
Number of Service Connections 168	Mobile Home Park	Vell Pumps Well #1
Number of Service Connections 168 Population Served 328 Basis: Operator OPERATION & MAINTENANCE LOG: Yes Location Water Treatment Plant Comments	Food Service: ☐ Yes ☐ No ☒ N/A	High Service Pumps HSP#1
Population Served 328 Basis: Operator OPERATION & MAINTENANCE LOG: Yes Location Water Treatment Plant Comments Comments CERTIFIED OPERATOR: Yes Operator(s) & Certification Class-Number: Tom Felton C-2241 Hrs/day: Required *Visit Actual *Visit Days/Wk: Required 3 Actual 5 + 1 Non-consecutive Days?	New transfer Consider Connections 160	Satisfy ava daily demand? Ves No Ulinknown
OPERATION & MAINTENANCE LOG: Yes Location Water Treatment Plant Comments Comments	Number of Service Connections 108	
OPERATION & MAINTENANCE LOG: Yes Location Water Treatment Plant Comments CERTIFIED OPERATOR: Yes Operator(s) & Certification Class-Number:	Population Served 328 Basis. Operator	
Location Water Treatment Plant Comments PLANS AND MAPS Coliform Sampling Plan	OPERATION & MAINTENANCE LOG: Yes	Comments
Comments		
Certified Operators: Yes Operator(s) & Certification Class-Number: Tom Felton C-2241 Hrs/day: Required *Visit		PLANS AND MAPS
D/DBP Monitoring Plan		Coliform Sampling Plan ☐ Yes ☐ No ☐ N/A
CERTIFIED OPERATOR: Yes Operator(s) & Certification Class-Number: Tom Felton C-2241 Hrs/day: Required *Visit		D/DBP Monitoring Plan ☐ Yes ☐ No ☐ N/A
Tom Felton C-2241 Hrs/day: Required		Lead and Copper Plan ⊠ Yes □ No □ N/A
Hrs/day: Required *Visit		
Hrs/day: Required *Visit	Tom Felton C-2241	
Days/wk: Required 3		Comment
Non-consecutive Days?	Hrs/day: Required *Visit Actual *Visit	
Comments: * Nonconsecutive days for a total of 0.3hr/wk. Comments: * Nonconsecutive days for a total of 0.3hr/wk.	Days/WK: Required 3 Actual 5+1	DDEVENTIVE MAINTENANCE/ORM
Preventive Maintenance Program Yes No No N/A MONTHLY OPERATION REPORTS (MORs) MORs submitted regularly? Yes No No N/A Data missing from MORs? No Yes N/A Average Day (from MORs) 25,750 gpd Maximum Day (from MORs) 93,000 gpd 06/2010 Comments Flow Measuring Device: Flow Meter Meter Size & Type: 4" McCrometer & 6" Water Specialties Preventive Maintenance Program Yes No No N/A Records Yes No No N/A Records Yes No N/A Comments CROSS CONNECTION CONTROL # BFPAs 1 # Tested 1 WWTP RPZ Yes Date Tested 2009 Written Plan Inadequate Date 2007	Non-consecutive Days? Yes \(\text{No } \text{No } \text{No } \)	
MONTHLY OPERATION REPORTS (MORs) MORs submitted regularly?	Comments: * Nonconsecutive days for a total of 0.3nr/wk.	Preventive Maintenance Program X Yes No
MONTHLY OPERATION REPORTS (MORs) MORs submitted regularly?		Flushing Program Yes No N/A
MORs submitted regularly?	MONTHLY OPERATION REPORTS (MORs)	Records ☐ Yes ☒ No ☐ N/A
Data missing from MORs? No Yes N/A Average Day (from MORs) 25,750 gpd Maximum Day (from MORs) 93,000 gpd 06/2010 Comments CROSS CONNECTION CONTROL # BFPAs 1 # Tested 1 WWTP RPZ Yes Date Tested 2009 Written Plan Inadequate Date 2007		
Average Day (from MORs) 25,750 gpd	Data missing from MORs? No Tyes N/A	Records 🔲 Yes 🔯 No 🔲 N/A
CROSS CONNECTION CONTROL # BFPAs 1 # Tested 1 WWTP RPZ Yes Date Tested 2009 Written Plan Inadequate Date 2007		Comments
# BFPAs 1 # Tested 1 WWTP RPZ Yes Date Tested 2009 Meter Size & Type: 4" McCrometer & 6" Water Specialties Written Plan Inadequate Date 2007	Maximum Day (from MORs) 93,000 gpd 06/2010	
# BFPAs 1 # Tested 1 Flow Measuring Device: Flow Meter	Comments	CROSS CONNECTION CONTROL
Flow Measuring Device: Flow Meter	Attack -	
Meter Size & Type: 4" McCrometer & 6" Water Specialties Written Plan Inadequate Date 2007	Characteristics Devices District	
WICKE OIZE & 17DC. T MICCIOINEW & V WALL DOCUMEN	Motor Sing 2 Type: 4" McCrometer 9: 6" Wester Specialties	
Date Last Calibrated: Unknown Comments		Comments

PWS ID#	3354028
Date	9/7/10

GROUND WATER SOURCE

Well Number (Florida Unique Well ID #) I (AAH6720) 2 (AAH6721) Year Drilled 1975 1999 Depth Drilled 340' 330' Drilling Method Cable tool Cable tool Type of Grout Unknown Neat cement Static Water Level 14' 12' Pumping Water Level Unknown 12' Design Well Yield 250 850 Test Yield Unknown 1,200 gpm Actual Yield or different than rated capacity) Unknown Unknown Strainer Unknown Unknown Length (outside casing) 200' 191' Diameter (outside casing) 6" 8" Material (outside casing) Black steel Black steel Well Contamination History None None Is inundation of well possible? No No No No No 6' X 6' X 4" Concrete Pad Yes Yes SET Septic Tank N/A N/A N/A BACKS	CITOOND	WATER OCCIOE			
Depth Drilled 340' 330' 330'	Well Numb	OEF (Florida Unique Well ID#)	1(AAH6720)	2(AAH6721)	
Drilling Method Cable tool Cable tool Type of Grout Unknown Neat cement Static Water Level 14' 12' Pumping Water Level Unknown 12' Design Well Yield 250 850 Test Yield Unknown 1,200 gpm Actual Yield (if different than rated capacity) Unknown Unknown Strainer Unknown Open hole Length (outside casing) 200' 191' Diameter (outside casing) 6" 8" Material (outside casing) Black steel Black steel Well Contamination History None None Is inundation of well possible? No No 6' X 6' X 4" Concrete Pad Yes Yes Yes Yes Yes SET Septic Tank N/A N/A SACKS WW Plumbing >200' >200' Other Sanitary Hazard None noted None noted PUMP Model Number Unknown Unknown	Year Drille	d	1975	1999	
Type of Grout	Depth Drill	ed	340'	330'	
Static Water Level	Drilling Me	thod	Cable tool	Cable tool	
Pumping Water Level	Type of Gr	out	Unknown	Neat cement	
Design Well Yield 250	Static Water	er Level	14'	12'	
Test Yield	Pumping V	Vater Level	Unknown	12'	
Actual Yield (if different than rated capacity) Unknown Unknown	Design We	ell Yield	250	850	
Strainer	Test Yield		Unknown	1,200 gpm	•
Diameter (outside casing) 200' 191'	Actual Yiel	d (if different than rated capacity)	Unknown	Unknown	
Diameter (outside casing) 6" 8" Material (outside casing) Black steel Black steel Well Contamination History None None Is inundation of well possible? No No Is inundation of well possible? No No 6' X 6' X 4" Concrete Pad Yes Yes SET Septic Tank N/A N/A N/A N/A N/A BACKS WW Plumbing >200' >200' Other Sanitary Hazard None noted None noted Wone noted None noted None noted Manufacturer Name Unknown Griswold PUMP Model Number Unknown Griswold Model Number Unknown 30NSBYCZ-T Rated Capacity (gpm) 270 850 Motor Horsepower 3 30 Well casing Sanitary Seal Ok Ok Well Casing Sanitary Seal Ok Ok Raw Water Sampling Tap Yes Yes Above Ground Check Val	Strainer		Unknown	Open hole	
Material (outside casing) Black steel Black steel Well Contamination History None None Is inundation of well possible? No No 6' X 6' X 4" Concrete Pad Yes Yes Septic Tank N/A N/A SET Reuse Water N/A N/A BACKS WW Plumbing >200' >200' Other Sanitary Hazard None noted None noted Type Submersible Submersible Manufacturer Name Unknown Griswold PUMP Model Number Unknown Rated Capacity (gpm) 270 850 Motor Horsepower 3 30 Well casing 12" above grade? Yes Yes Well Casing Sanitary Seal Ok Ok Raw Water Sampling Tap Yes Yes Above Ground Check Valve Yes Yes Security Yes Yes	Length (ou	tside casing)	200'	191'	
Well Contamination History None None Is inundation of well possible? No No 6' X 6' X 4" Concrete Pad Yes Yes SET Septic Tank N/A N/A BACKS Reuse Water N/A N/A BACKS WW Plumbing >200' >200' Other Sanitary Hazard None noted None noted Type Submersible Submersible Manufacturer Name Unknown Griswold PUMP Model Number Unknown 30NSBYCZ-T Rated Capacity (gpm) 270 850 Motor Horsepower 3 30 Well casing 12" above grade? Yes Yes Well Casing Sanitary Seal Ok Ok Raw Water Sampling Tap Yes Yes Above Ground Check Valve Yes Yes Security Yes Yes	Diameter (outside casing)	6"	8"	
Is inundation of well possible? No	Material (o	utside casing)	Black steel	Black steel	
6' X 6' X 4" Concrete Pad Yes Yes SET BACKS Septic Tank N/A N/A N/A BACKS WW Plumbing >200' >200' Other Sanitary Hazard None noted None noted Type Submersible Submersible Manufacturer Name Unknown Griswold Model Number Unknown 30NSBYCZ-T Rated Capacity (gpm) 270 850 Motor Horsepower 3 30 Well casing 12" above grade? Yes Yes Well Casing Sanitary Seal Ok Ok Raw Water Sampling Tap Yes Yes Above Ground Check Valve Yes Yes Security Yes Yes	Well Contamination History		None	None	
Septic Tank N/A N/A N/A	Is inundation of well possible?		No	No	
Reuse Water N/A N/A	6' X 6' X 4	" Concrete Pad	Yes	Yes	
BACKS		Septic Tank	N/A	N/A	
Other Sanitary Hazard None noted None noted	SET	Reuse Water	N/A	N/A	
Type	BACKS	WW Plumbing	>200'	>200'	
PUMP Manufacturer Name Unknown Griswold Model Number Unknown 30NSBYCZ-T Rated Capacity (gpm) 270 850 Motor Horsepower 3 30 Well casing 12" above grade? Yes Yes Well Casing Sanitary Seal Ok Ok Raw Water Sampling Tap Yes Yes Above Ground Check Valve Yes Yes Security Yes Yes		Other Sanitary Hazard	None noted	None noted	
PUMP Model Number Unknown 30NSBYCZ-T Rated Capacity (gpm) 270 850 Motor Horsepower 3 30 Well casing 12" above grade? Yes Yes Well Casing Sanitary Seal Ok Ok Raw Water Sampling Tap Yes Yes Above Ground Check Valve Yes Yes Security Yes Yes		Туре	Submersible	Submersible	
Rated Capacity (gpm) 270 850 Motor Horsepower 3 30 Well casing 12" above grade? Yes Yes Well Casing Sanitary Seal Ok Ok Raw Water Sampling Tap Yes Yes Above Ground Check Valve Yes Yes Security Yes Yes		Manufacturer Name	Unknown	Griswold	
Motor Horsepower 3 30 Well casing 12" above grade? Yes Yes Well Casing Sanitary Seal Ok Ok Raw Water Sampling Tap Yes Yes Above Ground Check Valve Yes Yes Security Yes Yes	PUMP	Model Number	Unknown	30NSBYCZ-T	
Well casing 12" above grade? Yes Yes Well Casing Sanitary Seal Ok Ok Raw Water Sampling Tap Yes Yes Yes Yes Yes Yes Security Yes Yes Yes Yes		Rated Capacity (gpm)	270	850	
Well Casing Sanitary Seal Ok Ok Raw Water Sampling Tap Yes Yes Above Ground Check Valve Yes Yes Security Yes Yes		Motor Horsepower	3	30	
Raw Water Sampling Tap Yes Yes Above Ground Check Valve Yes Yes Security Yes Yes	Well casin	g 12" above grade?	Yes	Yes	
Above Ground Check Valve Yes Yes Security Yes Yes	Well Casir	ng Sanitary Seal	Ok	Ok	
Security Yes Yes	Raw Wate	r Sampling Tap	Yes	Yes	
	Above Gro	ound Check Valve	Yes	Yes	
Well Vent Protection N/A Yes	Security		Yes	Yes	
	Well Vent	Protection	N/A	Yes	

COMMENTS	 	 	 	

PWS ID#_	3354028	
Date	9/7/10	
***		•

CHLORINATION (Dis		n)		CTODACE FAC	~61 IT 6	F6		
Type: 🗌 Gas 🖾 Hy				STORAGE FAC		_	E) Eleveted	
Make <u>Pulsafeeder</u> Capacity 24 gpd Chlorine Feed Rate <u>Pre-100%, post- 50%</u>							E) Elevated atic / flow-th	
Avg. Amount of Cl ₂ ga	Pre-1009 as used	%, post-	50% N/A	Tank Type/Numb		G	H/1	H/2
Chlorine Residuals: F	Plant	.49	Remote 1.63	Capacity (gal)		20,000	3,000	5,000
Remote tap location			- <u> </u>	Material		Concrete	Steel	Steel
DPD Test Kit: ☐ Or	n-site one		h operator : Used Daily	Gravity Drain		Yes	Yes	Yes
Injection Points Pre &	& post ac	_		By-Pass Piping		Yes	Yes	Yes
Booster Pump Info N				Protected Openin	ıgs	Yes	Yes	Yes
Comments				Sight Glass or Level Indicator		N/A	Yes	Yes
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			PRV/ARV		N/A	PRV	PRV
Chlorine Gas Use Requirements	YES	NO	Comments	Pressure Gauge	1	N/A	Yes	Yes
Dual System				On/Off Pressure		N/A	35/55	35/55
Auto-switchover				Access Secured		Yes	Yes	Yes
Alarms:				Access Manhole		Yes	Yes	Yes
Loss of Cl ₂ capability Loss of Cl ₂ residual Cl ₂ leak detection				Tank Sample Tap Location		On tank	On tank	On tank
Scale	H			Date of Inspection	n	Unknown	Unknown	Unknown
Chained Cylinders				Date of Cleaning		Unknown	Unknown	Unknown
Reserve Supply				Comments		- 1// 12 * n = 6	···	
Adequate Air-pak						400		
Sign of Leaks		/		HIGH SERVICE Pump Number	= PUN 1		3	
Fresh Ammonia		Z		Туре	1	L		4
Ventilation							Centrifugal	· -
Room Lighting				Make	Goul	ds Gould	ls Jacuzzi	Jacuzzi
Warning Signs				Model	365	6 3656	20DC4	20DC4
Repair Kits				Capacity (gpm)	125	5 125	545	545
Fitted Wrench				Motor HP	7.5	7.5	20	20
Housing/Protection				Date Installed	199	9 1999	2001	2001
AERATION (Gases, F Type Spray Aerator Condition Conditio	Good No ndition G As no Cleaned rvey. Ra	Ok eeded PVC paw water	y 1,100 gpm	Comments				

PWS	ID#	3354028	
Date		9/7/10	

DEFICIENCIES:

1. Failure to keep records documenting that isolation valves are being exercised.

Suppliers of water shall keep records documenting that their isolation valves are being exercised in accordance with subsection 62-555.350(2), F.A.C. [Rule 62-555.350(12)(c), F.A.C.]

2. Failure to keep records documenting that dead-end water mains are being flushed.

Suppliers of water shall keep records documenting that their water mains conveying finished drinking water are being flushed in accordance with subsection 62-555.350(2), F.A.C. [Rule 62-555.350(12)(c), F.A.C.]

3. Failure to establish and implement a cross-connection control program.

Community water systems, and all public water systems that have service areas also served by reclaimed water systems regulated under Part III of Chapter 62-610, F.A.C., shall establish and implement a routine cross-connection control program to detect and control cross-connections and prevent backflow of contaminants into the water system. This program shall include a written plan that is developed using recommended practices of the American Water Works Association set forth in *Recommended Practice for Backflow Prevention and Cross-Connection Control*, AWWA Manual M14, as incorporated into Rule 62-555.330, F.A.C. [Rule 62-555.360(2), F.A.C.]

Note: A sample cross-connection control plan template is enclosed for your use.

4. Failure to provide documentation of the cleaning and inspection of the finished-water storage tanks. This documentation was requested following the last sanitary survey dated August 22, 2007.

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

COMMENTS:

• Provide documentation that the finished-drinking-water meter has been calibrated.

Preventive maintenance on electrical or mechanical equipment -- including exercising of auxiliary power sources, checking the calibration of finished-drinking-water meters at treatment plants, testing of air or pressure relief valves for hydropneumatic tanks, and exercising of isolation valves -- shall be performed in accordance with the equipment manufacturer's recommendations or in accordance with a written preventive maintenance program established by the supplier of water; however, in no case shall auxiliary power sources be run under load less frequently than monthly. [Rule 62-555.350(2), F.A.C.]

PWS ID #	3354028
Date	9/7/10

REMINDERS:

- For monitoring schedules and information about the Drinking Water Program, please visit the Central District's Drinking Water website at http://www.dep.state.fl.us/central/Home/DrinkingWater/default.htm.
- Suppliers of water shall submit written notification to the Department before beginning work or alterations to the
 public water system. Each notification shall be submitted to the appropriate Department of Environmental
 Protection District Office or Approved County Health Department and shall include the following: a description
 of the scope, purpose, and location of the work or alterations; and assurance that the work or alterations will
 comply with applicable requirements listed in Rule 62-555.330, F.A.C. Suppliers of water may begin such work
 or alterations 14 days after providing notification to the Department unless they are advised by the Department
 that the notification is incomplete or that a construction permit is required.
- Suppliers of water shall telephone the SWP at 1-800-320-0519 immediately (i.e., within two hours) after discovery of any actual or suspected sabotage or security breach, or any suspicious incident, involving a public water system. [Rule 62-555.350(10)(a), F.A.C.]
- Suppliers of water shall telephone, and speak directly to a person at, the appropriate DEP District Office as soon as possible, but never later than noon of the next business day, in the event of any of the following emergency or abnormal operating conditions:
 - o The occurrence of any abnormal color, odor, or taste in a public water system's raw or finished water;
 - o The failure of a public water system to comply with applicable disinfection requirements; or
 - The breakdown of any water treatment or pumping facilities, or the break of any water main, in a public water system if the breakdown or break is expected to adversely affect finished-water quality, interrupt water service to 150 or more service connections or 350 or more people, interrupt water service to any one service connection for more than eight hours, or necessitate the issuance of a precautionary "boil water" notice in accordance with the Department of Health's "Guidelines for the Issuance of Precautionary Boil Water Notices" as adopted in Rule 62-555.335, F.A.C. [Rule 62-555.350(10)(b), F.A.C.]
- Suppliers of water shall notify affected water customers in writing or via telephone, newspaper, radio, or television; and telephone, and speak directly to a person at, the appropriate DEP District Office by no later than the previous business day before taking PWS components out of operation for planned maintenance or repair work if the work is expected to adversely affect finished-water quality, interrupt water service to 150 or more service connections or 350 or more people, interrupt water service to any one service connection for more than eight hours, or necessitate the issuance of a precautionary "boil water" notice in accordance with the Department of Health's "Guidelines for the Issuance of Precautionary Boil Water Notices" as adopted in Rule 62-555.335, F.A.C. [Rule 62-555.350(10)(d), F.A.C.]
- Suppliers of water shall issue precautionary "boil water" notices as required or recommended in the Department
 of Health's "Guidelines for the Issuance of Precautionary Boil Water Notices" as adopted in Rule 62-555.335,
 F.A.C. [Rule 62-555.350(11), F.A.C.]

Manul Handon.				
Inspector	TitleE	Env. Specialist III	Date	9/14/10
Bouth				
Approved by	TitleE	Env. Supervisor II	Date	9/14/10

RESPONSE FORM

Please provide any changes to the following:

PWS ID Number: 3354028		
PWS Name: Shangri-La by the Lake	Utilities, Inc.	
	Owner(s) Name:	
Mailing Address:		
	Mailing Address:	
Date:	Phone Number(s):	
	Fax #:	
	E-Mail Address:	
Florida Department of Environm Drinking Water Compliance/Enfo 3319 Maguire Boulevard, Suite 2 Orlando, Florida 32803 Attention: Manuel F. Cardona, Environ In response to the Department's Sanithe following actions were done to cor	orcement Program 32 onmental Specialist III ary Survey Report for the subject public water sys	stem dated September 7, 2010,
-	ed the listed deficiencies.	
<u>Item No</u> .	Corrective Action Done	Date Done
	and the second s	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(Attach additional sheet if necessary)		
I hereby certify to the correctness of the	ne above information:	
PWS Owner/Representative Signature	ə:	
Name of PWS Owner/Representative		

(Please Type or Print)



P 352/343-8667 F, 352-343-8665 225 W MAIN ST TAVARES, FL 32778 -> WWW.WICKSCONSULTING.COM

Via Electronic Mail

June 8, 2011

Ms. Jenny E. Farrell Florida Department of Environmental Protection 3319 Maguire Boulevard, Ste 232 Orlando, Florida 32803-3767

REF: Shangri-La By The Lake WWTF

Non-Compliance Letter Permit No. FLA010521

Dear Ms. Farrell:

In response to your letter (OCD-C-WW-11-0341) regarding your inspection of the referenced Facility, the following response is submitted which corresponds to your numbered items:

1. The permit for this facility will expire on September 12, 2011. The Department has not received a permit application. Application for permit renewal should have been made at least 180 days prior to the expiration date.

RESPONSE: Our Firm was retained to prepare the application and supporting information for submittal to the Department for renewal of the referenced permit. The preparation of the application and submittals has been underway for some time. Due to an error on our part, the application due date was incorrectly recorded on the Project Progress Tracking. The application and supporting information is complete and will be submitted to the Department as soon as possible. It is expected to be submitted within seven (7) days.

2. On a few occasions various values were missing or reported incorrectly on Part A of the Discharge Monitoring Reports (DMRs) for this review period. Please see the inspection report for details. It is important to report all data carefully and accurately as specified on the DMRs.

RESPONSE: The problem with missing data and reporting on the DMRs has been discussed with the Owner and Operator. This situation will be corrected on all future reports.

3. The Department has not received "Notification of Availability of Record Drawings and Final Operation and Maintenance Manuals" form. Within six months after a facility is placed in operation, the permittee shall provide written certification to the Department on DEP Form 62-620.910(13) that

C:V: L ENGINEERING - LAND DEVELOPMENT - ENVIRONMENTAL AND WATER RESQUECE ENGINEER: NG

record drawings and an operation and maintenance manual are available at the location specified on the form. A copy of DEP Form 62-620.910(13) is enclosed.

RESPONSE: The Project As-Built Plans were prepared and made available to the Owner in September 2010 and the O & M Manuals were also reviewed at that time. The Notification was prepared for submittal to the Department; however, again, the Project Tracking dates were incorrectly recorded and the submittal date was missed. The required Notification and As-Builts are being submitted to the Department and should be received before the end of the week.

The additional items in the Inspection Report that require corrective action will be handled by the Owner and Operator.

Please contact our office if there are further questions or comments regarding this response.

Sincerely,

Ted Wicks

Kenneth R. "Ted" Wicks, P.E.

TW:kh

XC:

Andrew Werner, Owner Tom Felton, Operator

2011-06-08/07136/Correspondence/Comments-Resp/2011-06-08 Resp to 5-24-2011 FDEP NonCompl



NOTIFICATION OF AVAILABILITY OF RECORD DRAWINGS AND FINAL OPERATION AND MAINTENANCE MANUALS RECEIVED

JUN 1 4 2011

1. Instructions

DEP Central Dist.

- a. In accordance with Rule 62-620.410, F.A.C., this form must be submitted to the appropriate Department district office or approved local program within six months after placing a newly constructed facility or modified portion of an existing facility into operation.
- b. Each applicable item must be completed in full. Where attached sheets or other technical documentation are used in lieu of the blank spaces provided, indicate appropriate cross-references in the spaces.
- c. Three (3) copies of this notification with supporting documentation shall be submitted with this form.
- d. All information is to be typed or printed in ink. Dates are to be entered in MM/DD/YR format.

2. Facility Information

a .	Permit Number	FLA010521-004-DW3
b.	Project/Facility Name	Shangri-La By the Lake WWTF
C.	Facility Identification Number	FLA010521
đ.	Contact Name	Andrew R. Werner
	Number and Street	100 Shangri-La Boulevard
	City/State/Zip Code	Leesburg FL 34788
	Telephone	(352) 406-0597

3. Description of facilities for which Record Drawings, and for domestic wastewater facilities final Operation and Maintenance Manuals, are available

Two new pre-stressed concrete clarifiers and chlorine contact chambers, designed to meet Class III reliability at an Annual Average Daily Flow (AADF) of 0.05 MGD, as part of the future replacement plant.

4. Description of substantial deviations from the permit, approved Preliminary Design Report, and application materials

No substantial deviations.

DEP DOMESTIC
WASTE SEC.

PROJECT TWO HENCLA BLEEPS
AND CHIORINE CONTACT CHAMBERS
FLACIOS 21-004-DW3

BY WEB DATE 15/2011

RECEIPT ACKNOWLEDGED

1



P. 352-343-8667 F, 352-343-8665 225 W MAIN ST TAVARES, FL 32778 WWW WICKSCONSULTING, COM

LETTER OF TRANSMITTAL

JOB NO.

07136

HAND DELIVERED

DATE

June 13, 2011

FILE COPY

Environmental, Sanitary & Water Resources Engineering RECEIVED-DEP CENTRAL DISTRICT OFFICE

2011 JUN 14 AM 11:01

			ATTENTION DENNISE JUDY			
TO 5555		Domestic Waste Permitting				
TO FDEP		R		By The Lake Utilities		
3319 Maguire Blv	d Ste 232		Permit FLA0	010521-004-DW3		
Orlando FL 3280	3_3767					
Ollaiku FL 5280.	3-3707					
		L.				
WE ARE SENDING YOU	X Attached Under sepa	rate cover viathe f	oliowing items:			
COPIES		DES	CRIPTION			
3	FDEP Form 62-620.910(1	3) Notice Avail Rec	ord Drawings an	nd Final O & M Manuals		
3	Record Drawings (1 orig, 2		J			
	, , , , , , , , , , , , , , , , , , ,	,				
				·		
⊠For approval		☐ Approved as submit	ted [Resubmit copies for approval		
☐ For your information	ation / use	☐ Approved as noted	ſ	Submit copies for distribution		
		☐ Returned	ı	Return corrected prints		
☐ For review and	comment	☐ For signature & Reti	urn [☐ For your file		
FOR BIDS DU	E		1	☐ For Payment		
☐ Fax Transmittal	of pages, including this	transmittal sheet.	•	Hard Copy to Follow 🗍 Yes 📗 No		
REMARKS:						
Please contac	t our office if there are	any questions rega	arding this sub	omittal.		
			_			
				/m / 137 1 - 7 - 7		
COPY TO Andy Wen	ner w/encl.	SIGNE	•	son / Ted Wicks, P.E.		



NOTIFICATION OF AVAILABILITY OF RECORD DRAWINGS AND FINAL OPERATION AND MAINTENANCE MANUALS

1. Instructions

- a. In accordance with Rule 62-620.410, F.A.C., this form must be submitted to the appropriate Department district office or approved local program within six months after placing a newly constructed facility or modified portion of an existing facility into operation.
- b. Each applicable item must be completed in full. Where attached sheets or other technical documentation are used in lieu of the blank spaces provided, indicate appropriate cross-references in the spaces.
- c. Three (3) copies of this notification with supporting documentation shall be submitted with this form.
- d. All information is to be typed or printed in ink. Dates are to be entered in MM/DD/YR format.

2. Facility Information

a.	Permit Number	FLA010521-004-DW3
b.	Project/Facility Name	Shangri-La By the Lake WWTF
c.	Facility Identification Number	FLA010521
đ.	Contact Name Number and Street City/State/Zip Code Telephone	Andrew R. Werner 100 Shangri-La Boulevard Leesburg FL 34788 (352) 406-0597

3. Description of facilities for which Record Drawings, and for domestic wastewater facilities final Operation and Maintenance Manuals, are available

Two new pre-stressed concrete clarifiers and chlorine contact chambers, designed to meet Class III reliability at an Annual Average Daily Flow (AADF) of 0.05 MGD, as part of the future replacement plant.

4. Description of substantial deviations from the permit, approved Preliminary Design Report, and application materials

No substantial deviations.

5. Certifications

b.

a. Applicant or Authorized Representative

I certify that the statements made in this notification and all attachments are true, correct and complete to the best of my knowledge and belief. I agree to operate and maintain these facilities in such a manner as to comply with the provisions of Chapter 403, F.S., and all applicable rules of the Department. A copy of the record drawings or other plans, as applicable, showing the newly constructed facilities or modified portion

of the existing facilities, as applicable, is available at 100 Shangri-La Blvd. Leesburg FL 34788

Andrew Rheiner	6/13/11
Signature of Applicant or Authorized Representative ¹	Date
Name (Please Type) Andrew R. Werner Company Na	me Shangri-La By The Lake Utilities
Title Manager / VD Company Address	100 Shangri-La Boulevard
Phone (352) 589-7744 City/State/Zip Code	Leesburg FL 34788
Applicant or Authorized Representative (For Domestic Wastewater I certify that an appropriate final operation and maintenance in facilities, which has been examined by a professional engineer as at	nanual for these domestic wastewater certified below, is available and located
100 Shangri-La Boulevard, Leesburg FL 34788	and can be submitted upon request.
Hardeen Rivernor	6/13/11
Signature of Applicant or Authorized Representative	Date
Name (Please Type) Andrew R. Werner Company Na	me Shangri-La By The Lake Utilities
Title Manager/ VD Company Address	100 Shangri-La Boulevard
Phone (352) 589-7744 City/State/7in Code	Leechurg EL 34799

c. Professional Engineer Registered in Florida

I certify that record drawings for the facilities have been reviewed by me or by individual(s) under my direct supervision for completeness and adequacy, and have been provided to the permittee. I further certify that the record drawings identify those substantial deviations noted above.

Name (please type): Kenneth R. "Ted" Wicks, PE
Company Name: Wicks Consulting Services, Inc.
Company Address: 225 West Main Street
City/State/Zip Code: Tavares FL 32778
Phone Number (352) 343-8667

much 6/13/11 33279

(Seal, Signature, Date, and Registration Number)

¹ If signed by the authorized representative, attach a letter of authorization.

d. Professional Engineer Registered in Florida (For Domestic Wastewater Facilities Only)

I certify that the final operation and maintenance manual for these domestic wastewater facilities has been prepared or examined by me or by individual(s) under my direct supervision and that there is reasonable assurance, in my professional judgement, that the facilities, when properly operated and maintained in accordance with this manual, will comply with all applicable statutes of the State of Florida and rules of the Department.

Name (please type): Kenneth R. "Ted" Wicks. PE			
Company Name: Wicks Consulting Services. Inc.			
Company Address: 225 West Main Street			
City/State/Zip Code: Tavares FL 32778	16 1 1.	.11	
Phone Number (352) 343-8667	Muchi	6/13/11	<u> 33274_</u>
	(Seal, Signature, Dat		



P. 352-343-8667 F. 352-343-8665

Consulting Services, Inc.

Environmental, Sanitary & Water Resources Engineering

CENTRAL JUNIA AH 11: 02

FILE	СОРУ
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LETTER OF TRANSMITTAL

JOB NO.

HAND DELIVERED

DATE

June 13, 2011 O7136		,	Trung I	2 2011	07126			
Domestic Waste Permitting RE: Shangri-La By The Lake Utilities Permit FLA010521-004-DW3 Operating Permit Renewal Application Orlando FL 32803-3767 WE ARE SENDING YOU Attached Under separate cover via the following items: COPIES DESCRIPTION 4 ea COMB BOUND SUBMITTAL of the following: FDEP Application Form 62-620-9010 (1) and (2) Form 1 and Form 2-A Quad Map / WWTF Site Plan w/Facility Flow Schematic Sludge Residuals Disposal Contract Flow Calibration Report / Backflow Prevention Device Test & Maintenance Report O & M Performance Report Capacity Analysis Report 1 Check #5955 \$1,000.00 Defor approval Approved as submitted Resubmit Copies for approval Refurmed Return Copies for distribution For review and comment For system Returned Return For your file For RIDS DUE Form Pages, including this transmittal sheet. Hard Copy to Follow Yes No REMARKS: Please contact our office if there are any questions regarding this submittal.				ATTENTION DENNISE JUDY Domestic Waste Permitting				
TO FDEP 3319 Maguire Blvd Ste 232 Orlando FL 32803-3767 WE ARE SENDING YOU Attached Under separate cover via			,					
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Orlando FL 32803-3767 WE ARE SENDING YOU Attached Under separate cover via				_				
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Tom Felton (O & M and CA Report only) admin@wicksconsulting.com				Henderson / Ted W	icks, P.E.			
	Ton	Felton (O & M and CA Rep	port only) admir	@wicksconsulting.c	om			



Annual Drinking Water Quality Report A Publication for Shangri-La by the Lake PWS ID 3354028 Report for year 2010 Prepared 2011

We are pleased to present you with this year's Annual Water Quality Report. This report is designed to inform you about the quality of water and services we have delivered to you every day. Our constant goal is to provide you with a safe and dependable supply of drinking water. We want you to understand the efforts we make to continually improve the water treatment process and protect our water resources. We are committed to ensuring the quality of your water.

Our water is produced by two (2) groundwater wells that draws water from the Floridan Aquifer, aerated for taste and odor control and is disinfected by chlorination.

If you have any questions concerning your water utility, please contact Shangri-La by the Lake Water Treatment Division

at (352-589-7744) between the hours of 8:00 a.m. and 5:00 p.m. We want our valued customers to be informed about their water utility.

Shangri-La by the Lake routinely monitors for contaminants in your drinking water according to Federal and State laws.

The state allows us to monitor for some contaminants less than once per year because the concentration for these contaminants do not change frequently. Except when indicated otherwise, this report is based on the results for the period January 1 to December 31, 2010. All water analyses are the most recent sampling in accordance with the Safe Water Drinking Act.

In this table, you will find many terms and abbreviations you might not be familiar with. To help you better understand these terms, we've provided the following definitions:

Parts per million (ppm) or Milligrams per liter (mg/L): One part by weight of analyte to 1 million parts by weight of water sample.

Parts per billion (ppb) or Micrograms per liter (ug/l): One part by weight of analyte to 1 billion parts by weight of water sample.

Picocurie per liter (pCi/L): Picocuries per liter is a measure of the radioactivity in water.

Action Level (AL): the concentration of a contaminant that, if exceeded, triggers treatment or other requirements that a water system must follow.

N/A: means not applicable.

Maximum Contaminant Level (MCL): The "Maximum Allowed" (MCL) is the highest level of a contaminant that is allowed in drinking water. MCL's are set as close to the MCLG's as feasible using the best available treatment technology.

Maximum Contaminant Level Goal (MCLG): The "Goal" (MCLG) is the level of a contaminant in drinking water below that there is no known or expected risk to health. MCLG's allow for a margin of safety.

Maximum Residual Disinfectant Level or MRDL: The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbial contaminants.

Maximum Residual Disinfectant Level Goal or MRDLG: The level of a drinking water disinfectant below that there is no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contaminants.

Range: Indicates the lowest and highest analysis result.

FDEP: Florida Department of Environmental Protection

USEPA: United States Environmental Protection Agency.

IDSE: Initial Distribution System Evaluation. The IDSE is a one-time study conducted by water systems to identify distribution system locations with high concentrations of trihalomethanes (THMs) and haloacetic acids (HAAs). Water systems will use results form the IDSE, in conjunction with their Stage 1 Disinfection Compliance Monitoring Data (DBPR), to select compliance monitoring locations for the Stage 2 DBPR.

TEST RESULTS TABLE

Results in the "Level Detected" column for Radiological and Inorganic contaminants are from individual samples.

Radioactive Contaminants

Contaminant and	Dates of	MCL Violation	Level	Range of	MCLG	MCL	Likely Source of Contamination
Unit of Measurement	Sampling	Y/N	Detected	results			
Alpha emitters (pCi/l)	8/2009	N	3.9	N/A	0	15	Erosion of natural deposits

Inorganic Contaminants

Contaminant and Unit of Measurement	Dates of Sampling	MCL Violation Y/N	Level Detected	Range of results	MCLG	MCL	Likely Source of Contamination
Barium (ppm)	4/2009	N	0.011	N/A	2	2	Discharge of drilling wastes; discharge from metal refineries; erosion of natural deposits
Fluoride (ppm)	4/2009	N	0.11	N/A	4	4.0	Erosion of natural deposits; discharge from fertilizer and aluminum factories. Water additive which promotes strong teeth when at optimum levels between 0.7 and 1.2 ppm
Sodium (ppm)	4/2009	N	8.9	N/A	N/A	160	Salt water intrusion, leaching from soil

TTHMs and Stage 1 Disinfectant/Disinfection By-Product (D/DBP) Parameters

For bromate, chloramines, or chlorine, the level detected is the highest running annual average (RAA), computed quarterly, of monthly averages of all samples collected. For haloacetic acids or TTHM, the level detected is the highest RAA, computed quarterly, of quarterly averages of all samples collected if the system is monitoring quarterly or is the average of all samples taken during the year if the system monitors less frequently than quarterly. Range of results is the range of individual sample results (lowest to highest) for all monitoring locations, including Initial Distribution System Evaluation (IDSE) results as well as Stage 1 compliance results.

Contaminant and	Dates of	MCL	Level	Range of	MCLG	MCL	Likely Source of Contamination
Unit of	Sampling	Violation	Detected	results	Or	Or	
Measurement	(mo./yr.)	Y/N			MRDLG	MRDL	
Chlorine (ppm)	1-12/	N	1.0	0.6-1.2	MRDLG	MRDL	Water additive to control microbes
	2010				=4	=4.0	
Haloacetic Acids	8/2009	N	11	N/A	N/A	MCL=	By-product of drinking water
(HAA5) (ppb)	1					60	disinfection
TTHM (total	8/2009	N	26,5	N/A	N/A	MCL=	By-product of drinking water
trihalomethanes]			80	disinfection
(ppb)							
Lead and Copper (Tan Water)							

Contaminant and Dates of 90th No. of MCLG AL Likely source of contamination AL (action Unit of Sampling Violation Percentile sampling level) Measurement (mo./yr.) Y/N Results sites exceeding the AL 1.3 1.3 Corrosion of household plumbing 6/2008 N 0.15 0 Copper (tap systems; erosion of natural water) (ppm) deposits; leaching from wood preservative 0.8 0 0 15 Corrosion of household plumbing 6/2008 N Lead (tap water) systems; erosion of natural deposits (ppb)

The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs and wells. As water travels over the surface of the land and through the ground, it dissolves naturally occurring minerals and, in some cases, radioactive material, and can pick up substances resulting from the presence of animals or from human activity.

Contaminants that may be present in source water include:

- (A): Microbial contaminants, such as viruses and bacteria, which may come from sewage treatment plants, septic systems, agricultural livestock, and wildlife.
- (B): Inorganic contaminants, such as salts and metals, which can be naturally occurring or result from urban storm water runoff, industrial or domestic wastewater discharges, oil and gas production, mining or farming.
- (C): Pesticides and herbicides, which may come from a variety of sources such as agriculture, urban storm water runoff and residential uses.
- (D): Organic chemical contaminants, including synthetic and volatile organic chemicals, which are by-products of industrial processes and petroleum production, and can also come from gas stations, urban storm water runoff and septic systems.
- (E): Radioactive contaminants, which can be naturally occurring or be the result of oil and gas production and mining activities.

In order to ensure that tap water is safe to drink, USEPA prescribes regulations, which limit the amount of certain contaminants in water provided by public water systems. Food and Drug Administration regulations establish limits for contaminants in bottled water, which must provide the same protection for public health.

Drinking water, including bottled water, may reasonably be expected to contain at least small amounts of contaminants. The presence of contaminants does not necessarily indicate that the water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the US Environmental Protection Agency's Safe Drinking Water Hotline at 1-800-426-4791.

MCL's are set at very stringent levels. To understand the possible health effects described for many regulated contaminants, a person would have to drink two (2) liters of water every day at the MCL level for a lifetime to have a one-in-a-million chance of having the described health effect.

In 2009 the department of Environmental Protection performed a Source Water Assessment. The assessments were conducted to provide information about any potential sources of contamination in the vicinity of our wells. A search of the data sources indicated no potential sources of contamination. The assessment data is available on the FDEP website link is www.dep.state.fl.us/swapp/.

Some people may be more vulnerable to contaminants in drinking water than the general population. Immune-compromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers. USEPA and the Center for Disease Control guidelines on appropriate means to lessen the risk of infection by cryptosporidium and other microbiological contaminants are available from the Safe Drinking Water Hotline (1-800-426-4791).

We at Shangri-La by the Lake work around the clock to provide top quality water to every tap. We ask that all our customers help us protect our water sources, which are the heart of our community, our way of life and our children's future.

If present, elevated levels of lead can cause serious health problems, especially for pregnant women and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. Shangri-La by the Lake is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline or at http://www.epa.gov/safewater/lead.



Water Sold Each Month between April, 2010 and May, 2011

	Water	Irrigation	Total
April, 2010	678000	0	678000
May, 2010	816000	0	816000
June, 2010	747000	661000	1408000
July, 2010	505000	0	505000
August, 2010	507000	0	507000
September, 2010	610000	438000	1048000
October, 2010	689000	0	689000
November, 2010	705000	0	705000
December, 2010	657000	485000	1142000
January, 2011	550000	0	550000
February, 2011	531000	0	531000
March, 2011	720000	297000	1017000
April, 2011	559000	0	559000
May, 2011	873000	0	873000
Total Gallons Sold	9147000	1881000	11028000

#9

WATER SYSTEM PUMPS &TO

UTILITY NAME:S SYSTEM NAME:S	YEAR OF RI DECEMBER 3									
WELLS AND WELL PUMPS										
(a)	(b)	(c)	(d)	(e)						
Year Constructed Types of Well Construction and Casing Depth of Wells Diameters of Wells Pump - GPM Motor - HP Motor Type * Yields of Wells in GPD Auxiliary Power * Submersible, centrifugal, etc.	350 6" 225 10 submersible 14,191	submersible cast 330 8" 850 30 submersible 14,191 yes								
	RESE	ERVOIRS								
(a)	(b)	(c)	(d)	(e)						
Description (steel, concrete) Capacity of Tank Ground or Elevated	steel 3,000 ground	concrete 15,000 ground	steel 5,000 ground							
	HIGH SERV	ICE PUMPING								
(a)	(b)	(c)	(d)	(e)						
Motors Manufacturer Type Rated Horsepower	JMM3219	Baldor JMM3219 7.5	Baldor SM3514T 30	Baldor SM3514T 30						
Pumps Manufacturer Type Capacity in GPM Average Number of Hours Operated Per Day Auxiliary Power	3656 125 unknown		Jacuzzi 20DC4 545 unknown yes							

Pacilities Inventory (Source: Well)	Plant Name: 5400611 - 47	
Page Three	THECAILE	UTIL 17765
HIGH SERVICE		
Pump Number Manufacturer Name Pump Type and Motor HP	CAN PEAN 1/32 IM	
*Model Number Date Installed	2004	
Capacity *Attach marked pump curve sheet.	54B GV27 (2) (10	70 701 7
COMMENTS:		
STORAGE FACILITIES: = eround; 2 + hy Tank Number/Type	A THING MINER CONTRACT	
Capacity Material	5000 (25000A)	
Gravity Drain Capacity Bypass Capacity		CQ149
Covered/Screened Openings Pressure Gauge		
Sight Glass On/Off Pressure		
Height to Bottom of Elevated Tank Height to Maximum Water Level		
COMMENTS:		

3525897744 SHANGRI - LA BY THE LI STATE OF FLORIDA Department OF ENVIRONMENTAL PROTECTION Facilities Inventory

This form must be comp	leted and forward	d to DEP with	the project engineer	of-record's
"Certification of Comple Plant Name SHOME	4-17-184 THE	PKE CITICIT	ASOLOW CHI	<u>E </u>
Plant Address 1005			Plant Phone (352	
City LET-SON AG		FL	Zip Code	34788
Owner Name 541) NG		E CAIGE UT	7. THES Phone 3	52-589-7744
			Zap Code	
	State	J. BANK		
Engineer-of-Record _			osed 1/8	Metered /CC
Population proposed	100	6 Pm	EXCE BY LANGE	\$50 \$ 2\$0)
Design Capacity	/090		MEH SEND HU	
Type meter and capaci	ty	6		
Service area characteri			Recogation Area	
Airport Subdivision Bathing Area	Institut Intersta		Residentia	
Trailer Park Campground Visitor Center	Lodge		Rest Area	
Company Town Indian Reserve			Removed C E	WERAS
Emergency Water Sou		ency Power Sou		LUX POWER AUTO STORKTUP
				The state of the s

PAGE

08/08

07/04/2011

Tank Information

- 1. The capacity of this tank is 3,000 gailons.
- 2. This tank was installed at the present location sometime around 1995 to 1997.
- 3. The interior was coated on the interior with a white colored material, possibly epoxy, that was sprayed onto the entire exterior.
- This tank appears to have been coated on the exterior with a blue colored industrial cnamel material.
- 5. It appeared that the interior has not been recoated or repaired since the initial installation.
- 6. It appeared that the exterior has not been reconted or repaired since the initial installation.

Tank Information

- 1. The capacity of this tank is 5,000 gallons.
- 2. The client had no information about the date this tank was installed at the present location. 99
- 3. The interior was coated on the interior with a white colored material, possibly epoxy, that was sprayed onto the entire exterior.
- 4. This tank appears to have been coated on the exterior with a blue colored industrial enamel material.
- It appeared that the interior has not been reconted or repaired since the initial installation.
- It appeared that the exterior has not been recoated or repaired since the initial installation.

DATA SHEET E-631 Page 1 of 17 Date: Oct. 1, 1988



Model 30NSGYC2-T

INSTALLATION INSTRUCTIONS

and **OWNER'S MANUAL** for

GRISWOLD SUBMERSIBLE TURBINE PUMPS

PLEASE READ THIS MANUAL BEFORE INSTALLING THE PUMP.

INSPECTION

Examine equipment at time of receipt. Check that power cable is not cut or demaged, and that all equipment is correct for the particular installation. Handle pump and cable carefully, and do not load other meterial on top of them. This is very importent because of the precise alignment of the assembly and the vulnerability of the cable.

INSTALLATION RECORD

Record the following detail retain for future reference		time of 1	installation	and
Purchased From:		~ ~ ~ ~ -		
Installed By: Date of installation: Catalog Figure Number:			·	NOT
Catalog Figure Number:				
Notor Make:	_Hotor S	erlal Num	ber:	<u>-</u>
Motor Hr: 30 Volts:	Pha	\$6;	_Cycle:	
WELL: Inside Diameter:	87		Depth: 3	30 Ft
Catalog Figure Number: Motor Make: Motor MP: 30 Volts: Meximum Allowable Current: WELL: Inside Diameter: Standing Water Level: Depth to Lowest Perforation RISER PIPE: Size: 8 ((Refer to section on RISE POWER CABLE: Size:	এ		Ft. Below (Ground
RISER PIPE: Site: 8"	in lin.	Length:		Ft
POWER CASE: Size: Distance Separating Condicion	ж г эг <u>х)</u> (Length:		F+
Distance Between Vell and P.	oint of D	ischarge;		
Distance Between Well and P. Discharge Operating Condition				
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~				· · · · · · ·

Ticket #66147/64104



BARNEY'S PUMPS INC.

X North & South Lift Station

CORPORATE OFFICES
3907 Highway 98 South
LAKELAND, FLORIDA
Zip Code 33813-4268
POST OFFICE BOX 3529.
LAKELAND, FLORIDA
Zip Code 33802-3529
(863) 665-8500
Fax (863) 666-3858

OPERATION AND MAINTENANCE MANUAL

PROJECT:

Eagle Point

Leesburg, Florida

ENGINEER:

Jack Banning

Leesburg, Florida

CONTRACTOR:

C D K Construction Co., Inc.

Ocala, Florida

EOUIPMENT PROVIDED BY BARNEY'S PUMPS, INC.

S/N S63869 & S/N S63870

- (2) Model S3HRC300M2.2 Hydromatic Submersible Pumps with 30' Power Cords, 4.0" Impellers, 3" Discharge, 2" Solids Capability, 3 H.P., 3450-RPM Motors with Seal Failure and Overload Sensors for Design Conditions of: 80 GPM @ 25' TDH, 230/1/60.
- (1) Duplex Rail System to Include:
 - (2) Base Elbows, 3*
 - (2) Pump Discharge Flanges, 3"
 - (2) Stainless Steel Lift Cables, 1/4" X 15' Long
 - (2) Stainless Steel Guide Rail Brackets
 - (1) Stainless Steel Cable Holder
 - (4) Stainless Steel Guide Rails, 1-1/2" X 20'
- (1) 36" X 48" Aluminum Wet Well Cover, all Stainless Steel Hardware with Locking Hasp. (Rated: 300 PSF)
- (1) 48" X 48" Aluminum Valve Box Cover, all Stainless Steel Hardware with Locking Hasp. (Rated: 300 PSF)
- (4) Model S50NO Roto-Float Level Controls, 50' Each.
- (1) Duplex Control Panel per F.D.E.P. Specifications.

SEWER Plant BLOWER

QTy 2

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FABRICATION

AIR WATER SEPARATORS

VISIT OUR PHOTO GALLERY



ROOTS™ 56 URAI-J-DSL WHISPAIR™ ROTARY POSITIVE BLOWER

ROOTS™ 56 URAI-J-DSL WHISPAIR™ ROTARY POSITIVE BLOWER

Price: \$2,940.00

In Stock?: No Lead Time: 2 Weeks

Add to Cart

Description Documents Related Products

Roots Model 56 URAI-J-DSL Flow Range: to 580 CFM Max Δ Pressure: 13 psi Max Δ Vacuum: 15" Hg

Max RPM: 2850 Min RPM: 763 Max ΔT: 225°F Connection: 4" FPT Shaft Dia.: 1.125

Drive End Lubrication: Oil Gear End Lubrication: Oil

Required Oil for Gear End Horizontal Unit: 27.6 ounces Required Oil for Drive End Horizontal Unit:14.8 ounces Required Oil for Gear End Vertical Unit: 16 ounces Required Oil for Drive End Vertical Unit: 7.5 ounces

Unit Weight: 185 pounds (84.1 kg)

Shipping Box Size (LxWxH): 24.5"x19.5"x20" (622mmx495mmx508mm)

Shipping Container: Cardboard Box with formed foam

Common carrier is recommended

Roots Bill of Material (BOM) Number: T30415020

You must specify shaft orientation and discharge location to insure receiving a properly oriented unit. Available configurations are Left/Bottom, Left/Top, Right/Bottom, Right/Top, Top/Left, Top/Right, Bottom/Left and Bottom/Right

E-Commerce by: Red Clay Interactive

2008 Rotating Engineered Products, Inc.® | 2405 Murphy Blvd, Gainesville, GA 30504 | 800.536.9933 | 770.538.0020

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Motor, 3-Ph, 10, 1750, 208-230/460, Eff 89.5 - Three Phase Motors - General Purpose M... Page 1 of 2

SEWER PLANT BLOWER MOTOR

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Alternate

DAYTON Motor, 3-Ph, 10, 1750, 208-230/460, Eff 89.5

Motors > General Purpose Motors > Three Phase Motors

Inverter Duty Motor, Totally Enclosed Fan Cooled, HP 10, RPM 1750, Voltage 208-230/460, NEMA Frame 215T, 1.15 Service Factor, 60 Hz, 89.5 Nominal Efficiency, Rigid Mounting, Double-Shielded Ball Bearings, Thermal Protection None, Full Load Amps 27.2-24.6/12.3, Steel Frame, Insulation Class F, Ambient 40 C, CW/CCW Rotation, Shaft Diameter 1 3/8 In, Shaft Length 3 3/8 In

Grainger Item # 3KX09 N/A Price (ea.) Brand DAYTON Mfr. Model # 3KX09 Ship Qty. 2 1 Sell Qty. (Will-Call) 2 1 Ship Weight (lbs.) 167.9 Usually Ships** 3 Discontinued Catalog Page No. 14 🕮 Country of Origin Taiwan

(Country of Origin is subject to change.)

See Notes & Restrictions for important safety information. A This item has been discontinued and cannot be ordered online.

Some discontinued items may be available through your local branch. An alternate item(s) may be available online. See the Alternate Products tab below

OR

←→ Compare Alternates

Price shown may not reflect your price. Sign in or register Additional

& Restrictions Information Accessories Accessories Products General Purpose Motor Motor Type 3-Phase 10 1750 208-230/460 Nameplate RPM Voltage NEMA Frame 215T Totally Enclosed Fan-Cooled Enclosure Full Load Amps 27.2-24.6/12.3 Inverter 1.15 89.5 Duty Service Factor Nominal Efficiency Bearings
Thermal Protection Double-Shielded Ball Rotation
Insulation Class
Ambient (C)
Overall Length (In.)
Shaft Dia. (In.)
Shaft Length (In.)
Frame Material 19-9/16 Efficiency Group NEMA Standard Rated EPAct Eff, NEMA MG1 Table 12-11 Inverter NEMA MG 1 Part 30: 10:1 Variable and 2:1 Constant Torque 50 Hz Operation on 190/380V at 5/6 of 60 Hz HP and RPM at 1.0 SF Phase Usable on 200V @ 1.0 SF Standards Warranty (Years) Yes
UL Recognized (E47479), CSA Certified (227508), CE Footnotes Mfr. Stock No. 5,10,15 3KX09 1400-1800

Required

View Catalog Page
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RPM Range

The "Usually Ships" reflects when an item is generally expected to ship from Grainger based on its stocking location. Real-time availability information will be shown during the checkout process and on the e-mail order confirmation (for U.S. and Puerto Rico - US customers only). Please allow additional delivery time for international orders.



Brand





EAST & WEST LIFT STA. BITY & IN EACH SPORTS OF 2

WS_BHF Series Model 3887BHF

Submersible Sewage Pump

FEATURES

Impeller: Cast iron, enclosed, non-clog, dynamically balanced with pump out vanes for mechanical seal protection.

Casing: Cast iron flanged volute type for maximum efficiency. Designed for easy installation on A10-20 slide rail or base elbow rail systems.

Mechanical Seal: SILICON CARBIDE VS. SILICON CARBIDE sealing faces for superior abrasive resistance, stainless steel metal parts, BUNA-N elastomers.

Shaft: Corrosion-resistant, 300 series stainless steel. Threaded design. Locknut on all models to guard against component damage on accidental reverse rotation.

Fasteners: 300 series stainless steel.

Capable of running dry without damage to components.

Designed for continuous operation when fully submerged.

EXTENDED WARRANTY AVAILABLE FOR RESIDENTIAL APPLICATIONS.

AGENCY LISTINGS



Tested to UL 778 and CSA 22.2 108 Standards By Canadian Standards Association File #LR38549







Specifically designed for the following uses:

- Homes
- Water transfer
- Sewage systems
- · Light industrial
- Dewatering/Effluent Commercial applications

Anywhere waste or drainage must be disposed of quickly, quietly and efficiently.

SPECIFICATIONS

Pump

- Solids handling capabilities: 2" maximum
- Capacities: up to 220 GPM
- Total heads: up to 81 feet TDH
- Discharge size: 2" NPT threaded companion flange as standard. 3" option available but must be ordered separately. (Order no. A1-3)
- Temperature: 104°F (40°C) continuous 140°F (60°C) intermittent.

MOTORS

• Fully submerged in high grade turbine oil for lubrication and efficient heat transfer. All ratings are within the working limits of the motor.

Class B insulation on 1/3-11/2 HP models.

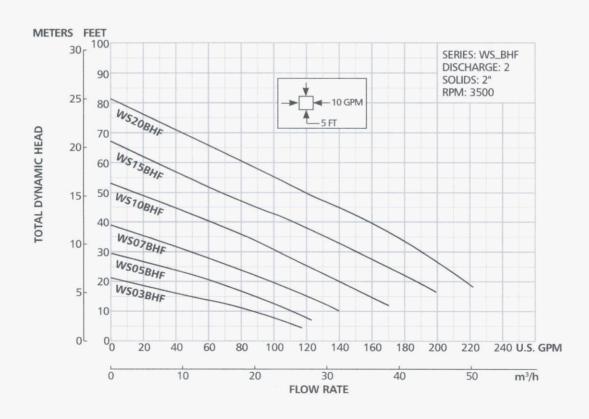
Class F insulation on 2 HP models.

Single phase (60 Hz):

- Capacitor start motors for maximum starting torque.
- · Built-in overload with automatic reset.
- SJTOW or STOW severe duty oil and water resistant power cords.
- $\frac{1}{3}$ 1 HP models have NEMA three prong grounding pluas.
- 1½ HP and larger units have bare lead cord ends.

Three phase (60 Hz):

- Class 10 overload protection must be provided in separately ordered starter unit.
- STOW power cords all have bare lead cord ends.
- Bearings: Upper and lower heavy duty ball bearing construction.
- Designed for Continuous Operation: Pump ratings are within the motor manufacturer's recommended working limits, can be operated continuously without damage when fully submerged.
- Power Cable: Severe duty rated, oil and water resistant. Epoxy seal on motor end provides secondary moisture barrier in case of outer jacket damage and to prevent oil wicking. Standard cord is 20'. Optional lengths are available.
- Motor Cover O-ring: Assures positive sealing against contaminants and oil leakage.

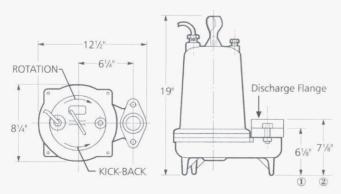


MOTOR AND MODEL INFORMATION

Order					Impeller	Max.	Locked	KVA	Full Load	Resi	stance
Number	ar HP Phase Voits KPIVI Dia (In.) Amns	Rotor Amps	Code	Motor Eff. %	Start	Line-Line					
WS0311BHF	0.33	1	115			12.4	46.0	М	54	7.5	1.0
WS0318BHF	0.33	1	208		2.94	6.8	31.0	K	68	9.7	2.4
WS0312BHF	0.33	1	230			6.2	34.5	М	53	9.6	4.0
WS0511BHF	0.5	1	115			14.5	46.0	М	54	7.5	1.0
WS0518BHF	0.5	1	208			8.4	31.0	K	68	9.7	2.4
WS0512BHF	0.5	1	230			7.6	34.5	М	53	9.6	4.0
WS0538BHF	0.5	3	200		3.19	4.9	22.6	R	68	_	3.8
WS0532BHF	0.5	3	230			3.6	18.8	R	70	-	5.8
WS0534BHF	0.5	3	460			1.8	9.4	R	70	-	23.2
WS0537BHF	0.5	3	575			1.5	7.5	R	62	_	35.3
WS0718BHF	0.75	1	208			11.0	31.0	K	68	9.7	2.4
WS0712BHF	0.75	1	230			10.0	27.5	J	65	12.2	2.7
WS0738BHF	0.75	3	200		3.44	6.2	20.6	L	64	_	5.7
WS0732BHF	0.75	3	230		3.44	5.4	15.7	K	68	_	8.6
WS0734BHF	0.75	3	460			2.7	7.9	K	68	j-	34.2
WS0737BHF	0.75	3	575	3500		2.2	9.9	L	78		26.5
WS1018BHF	1	1	208	3300	00	14.5	59.0	K	68	9.3	1.1
WS1012BHF	1	1	230			13.0	36.2	J	69	10.3	2.1
WS1038BHF	1	3	200		3.75	8.6	27.6	М	77	_	2.7
WS1032BHF	1	3	230		3.75	7.5	24.1	L	79	_	4.1
WS1034BHF	1	3	460	1		3.8	12.1	L	79	-	16.2
WS1037BHF	1	3	575	1		3.1	9.9	L	78	-	26.5
WS1512BHF	1.5	1	230			18.0	52.0	J	67	2.76	0.53
WS1538BHF	1.5	3	200			10.0	42.4	K	78	-	1.7
WS1532BHF	1.5	3	230		4.00	9.6	42.4	K	78	-	1.7
WS1534BHF	1.5	3	460		3000	4.8	21.2	K	78	-	6.6
WS1537BHF	1.5	3	575			3.9	16.3	L	78	_	10.5
W52012BHF	2	1	230			18.0	49.6	F	78	3.2	1.1
WS2038BHF	2	3	200			12.0	42.4	K	78	-	1.7
WS2032BHF	2	3	230		4.44	11.6	42.4	K	78	-	1.7
WS2034BHF	2	3	460			5.8	21.2	K	78	-	6.6
WS2037BHF	2	3	575			4.7	16.3	L	78	-	10.5

DIMENSIONS

(All dimensions are in inches. Do not use for construction purposes.)



Discharge Flange:

- ① 2" NPT standard
- ② 3" NPT optional (order an A1-3)

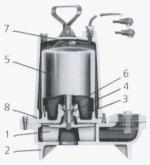


PERFORMANCE RATINGS (gallons per minute)

Orde	r No.	WS03BHF	WS05BHF	WS07BHF	WS10BHF	WS15BHF	WS20BHF
	HP▶	1/3	1/2	3/4	1	11/2	2
F	RPM ►	3500	3500	3500	3500	3500	3500
	10▶	86	110	140	_	_	_
	15	48	88	120	158	-	-
	20	_	62	98	139	186	217
	25	-	32	74	120	170	204
	30	-	-	49	101	150	190
d d	35	-	-	21	82	130	175
Total Head Feet of Water	40	-	_	-	60	110	159
t of	45	-	-	-	38	88	140
Tee Fee	50	_	-		-	67	120
	55	_	_	-	-	47	100
	60	-	-		-	29	80
	65	-	_		-	-	62
	70	-	-	-	-	-	43
	75			_	_	_	23

COMPONENTS (for reference only)

Item No.	Description				
1	Impeller				
2	Casing				
3	Mechanical Seal				
4	Motor Shaft				
5	Motor				
6	Ball Bearings				
7	Power Cable				
8	Casing O-Ring				



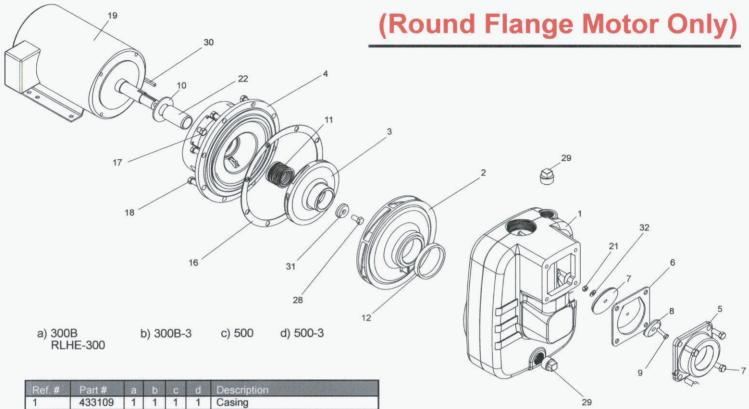
* For repair parts, reference repair parts book.



SPRAY FIELD PUMP

Monarch - NSPHE Red Lion - RLHE-300 SERIES

Lawn and Turf Sprinkler Pumps 3 HP-5HP Models



Ref. #	Part #	a	b	С	d	Description
1	433109	1	1	1	1	Casing
2	433197	1	1	1	1	Diffuser
3	433196	1	1			Impeller
	433140			1	1	Impeller
4	433141	1	1	1	1	Adapter
5	414730	1	1			Port Adapter
	414731			1	1	Port Adapter
6	191261	1	1	1	1	Flapper
7	014740	1	1	1	1	Top Weight
8	013150	1	1	1	1	Bottom Weight
9	225750	1	1	1	1	Hex HD. Bolt 1/4UNC x 1ZN PL
10	190848	1	1	100	1	Flinger
	194140		1			Flinger
11	240070	1	1	1	1	Seal
12	246237	1	1	1	1	Diffuser Ring
16	193924	1	1	1	1	Gasket
17	120010	8	8	8	8	Hex HD. Bolt 3/8 UNC x 1
18	120000	8	8	8	8	Hex HD. Bolt 3/8 UNC x 7/8
19	218700	1				Motor 3HP*1PH*230V
	218702		1			Motor 3HP*3PH*230/460V
	217696		1			Motor 3HP*3PH*575V *TEFC*
	218705	反對		1		Motor 5HP*1PH*230V
	218707				1	Motor 5HP*3PH*230/460V
	218708				1	Motor 5HP*3PH*230/460V
21	227810	1	1	1	1	Hex Nut 1/4UNC ZN PL
22	266006	1	1	1	1	Sleeve
23	240071	1	1	1	1	Spring Holder
28	125794	1			- Zau	Hex HD Bolt 3/8 UNC x 7/8
	226200				1	Hex HD. Bolt 3/8UNC x7/8 ZN PL
	125794		1	1		Hex HD. Bolt 3/8 UNC x 7/8 SST
29	185650	2	2	2	2	Pipe Plug 3/4 NPT
30	432020		EM	1	1	Key 3/16 x 1.375
	432015	1	1			Key 3/16 x 1.25
31	416720			1	1	Washer
	416721	1	1			Washer
32	175000	1	1	1	1	Washer 1/4



Moorhead, MN 56560 218-236-1818 800-365-3070 www.riverbendind.com Products: AC Motors: JMM3610T: Baldor Electric Company, a leader in energy efficient ... Page 1 of 1

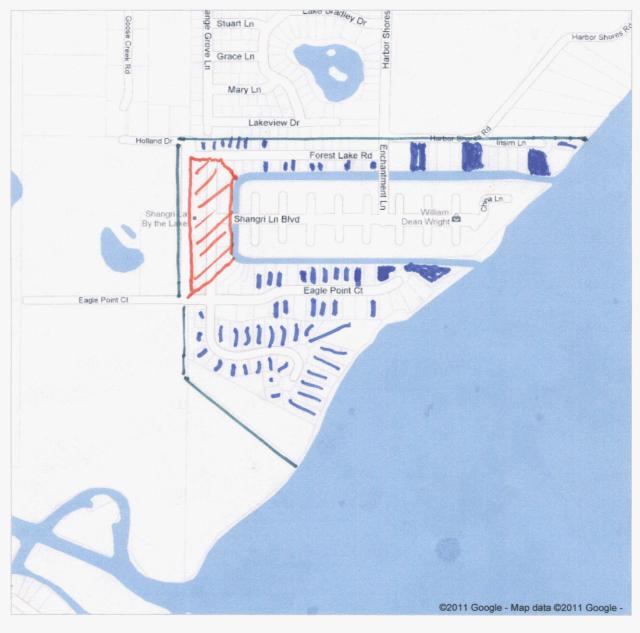
SPRAY FIELD fump motor (1)

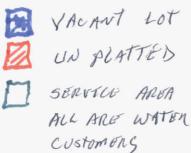


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Google maps Address Leesburg, FL 34788







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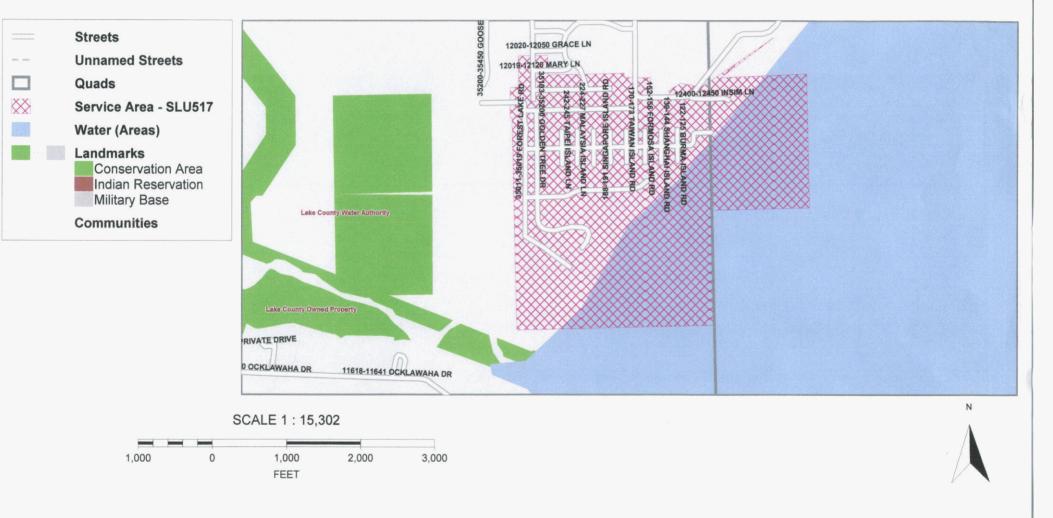
Ecological Set-aside

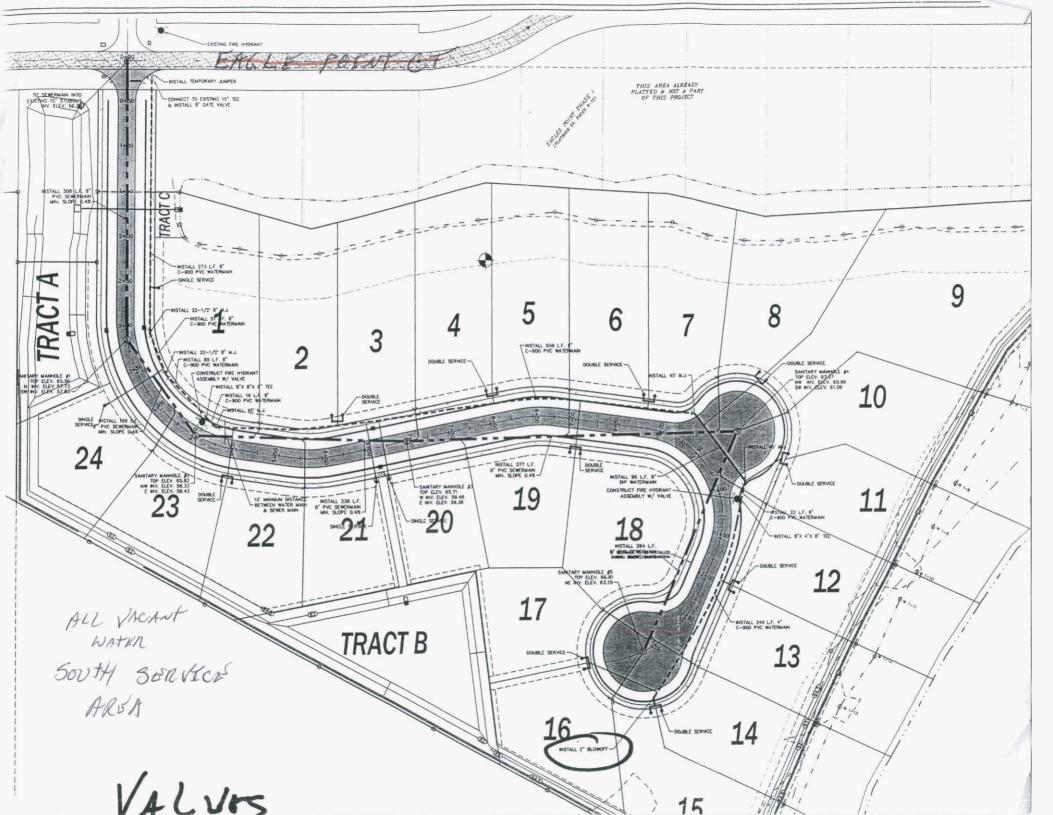
Vacant Lots

ALL ARE SERVED WATER

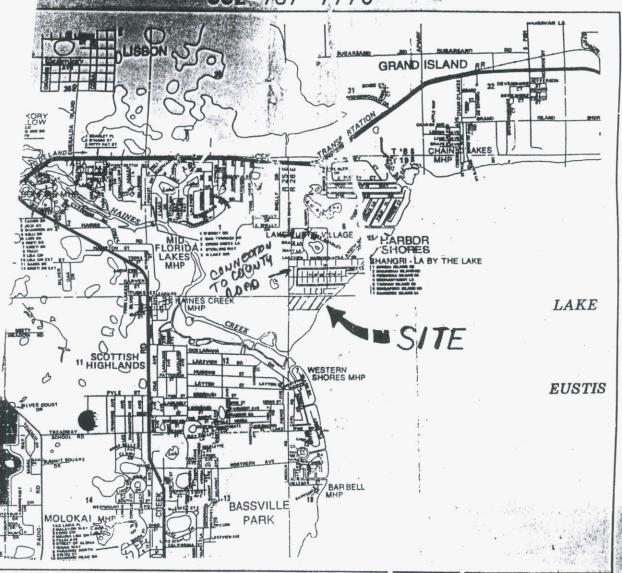
Office

Sunshine State One Call of Florida

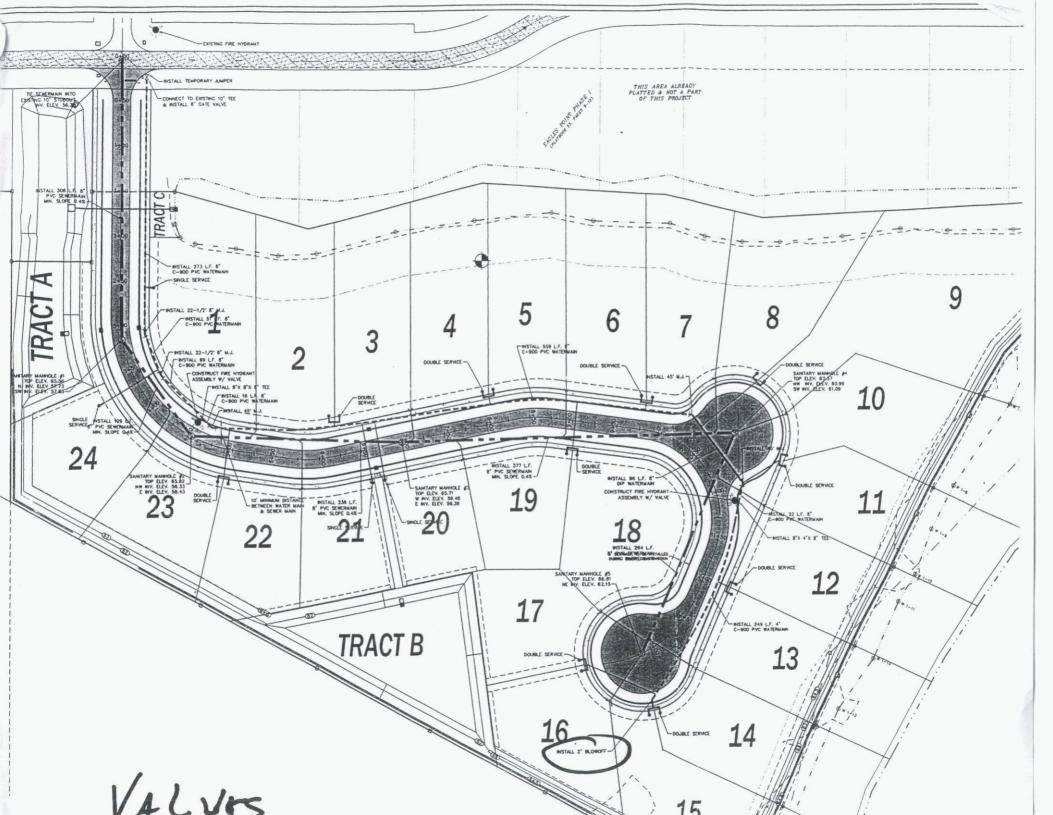


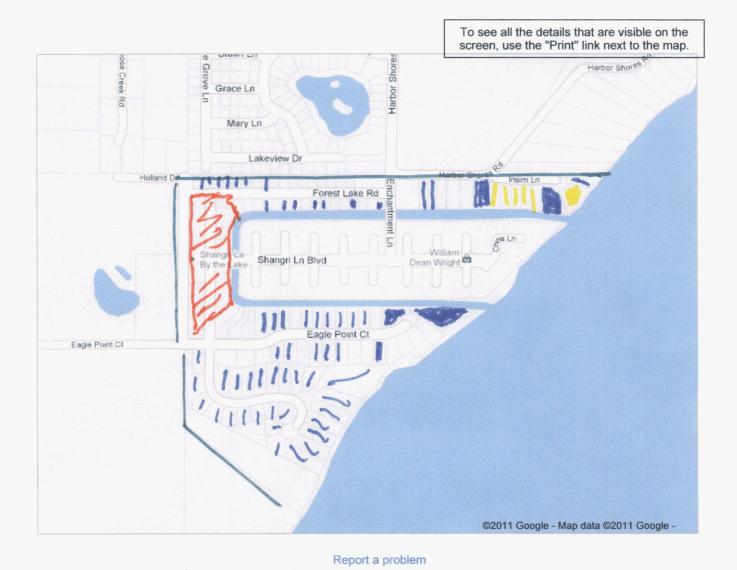


ENCINEER: JACK BANNING P.E. 406 N. 13th St. Leesburg, FL 34749 352-787-7776



LOCATION MAP





Report a problem

ACANT LOT

UN PLATS BD

SERVICE ANDA

THUSE ARE THO

ONLY CUSTOMERS

THAT AREN'S

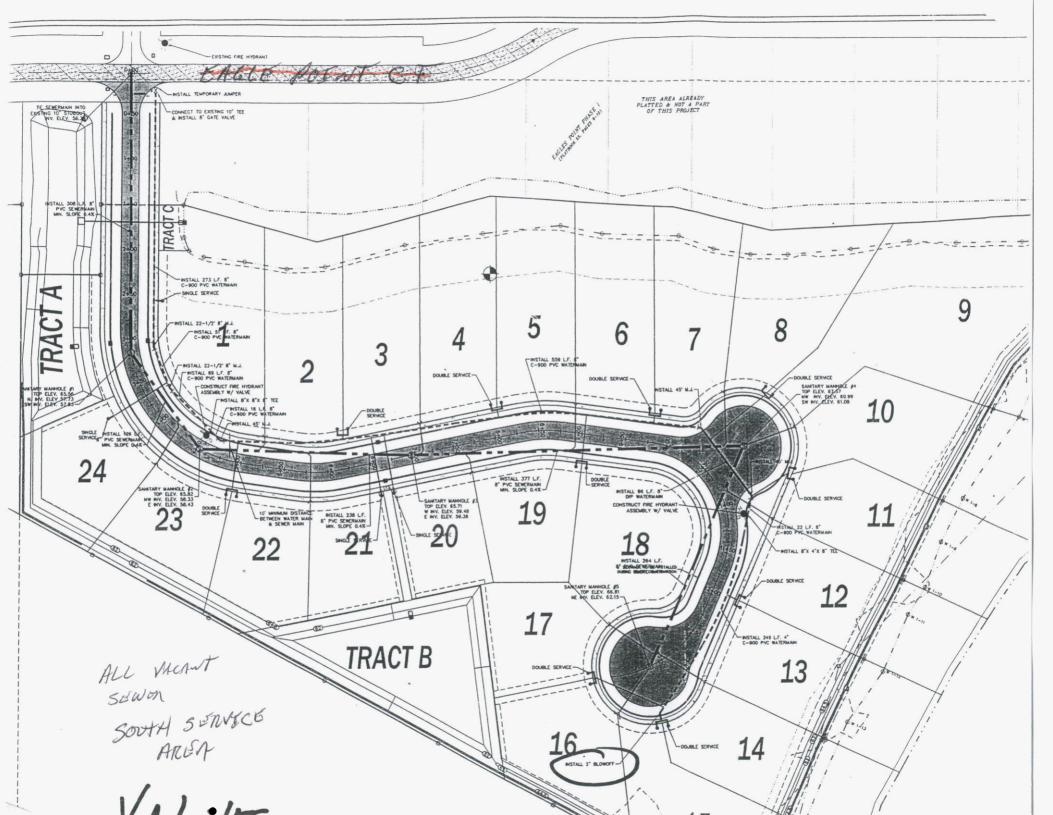
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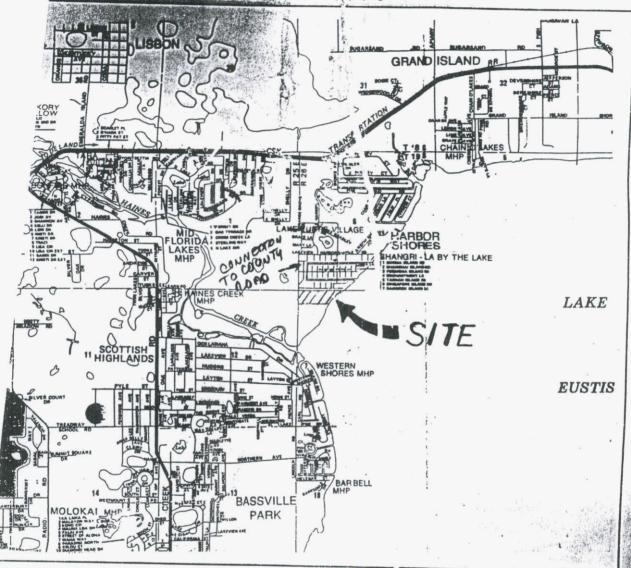
ALL ARE SERVED SEWER

Sunshine State One Call of Florida





ENGINEER: JACK BANNING P.E. 406 N. 13th ST. LEESBURG, FL 34749 352-787-7776



LOCATION MAP

1:27 PM 07/07/11 Accrual Basis

Shangri-La By The Lake Utilities Sewer - Maintenance & Repairs January through December 2010

Date	Name	Memo	Amount	Balance
Sewer				
MaintRepair				
1/7/2010	Utility Technicians, Inc.	Replace band aid on ai	337.75	337.75
1/19/2010	A. D. Rosier Plumbing & Heat	0239447	14.59	352.34
3/12/2010	A. D. Rosier Plumbing & Heat	Pump for spray field	543.93	896.27
3/12/2010	A. D. Rosier Plumbing & Heat		92.56	988.83
4/5/2010	Laura Werner	Circuit Board	183.97	1,172.80
6/4/2010	HAJOCA Gorman Co.	PumpMaster Float Swit	79.93	1,252.73
7/27/2010	A. D. Rosier Plumbing & Heat	242344, 242535, 242608	202.70	1,455.43
8/11/2010	A. D. Rosier Plumbing & Heat	O-Ring, Ell, Coupling	28.23	1,483.66
8/16/2010	Tavares Electric Motor Repair	32918, 32910	332.35	1,816.01
8/27/2010	Belew's Welding Service	Repair/fabrication on w	517.88	2,333.89
8/27/2010	HD Supply Waterworks, Ltd.	Manhole Riser	43.87	2,377.76
9/4/2010	Bronson Ace Hardware & Paint		8.29	2,386.05
9/28/2010	A. D. Rosier Plumbing & Heat	243531	13.33	2,399.38
10/18/2010	Werner & Werner, Inc.	Charlie's Drain Cleaning	135.00	2,534.38
10/21/2010	A. D. Rosier Plumbing & Heat	11046	185.17	2,719.55
11/29/2010	Werner & Werner, Inc.	Home Depot Hose & H	12.46	2,732.01
12/14/2010	Sandy Schnuile	Charlie's Drain Cleaning	135.00	2,867.01
12/16/2010	Home Depot	Rake Handle, Paint, Sh	9.79	2,876.80
Total MaintRe	pair		2,876.80	2,876.80
Total Sewer			2,876.80	2,876.80
TAL			2,876.80	2,876.80

1:29 PM 07/07/11 Accrual Basis

Shangri-La By The Lake Utilities Water - Maintenance & Repairs January through December 2010

Date	Name	Memo	Amount	Balance
Water				
MaintRepair				
1/7/2010	Utility Technicians, Inc.	Lift Station at Eagle Point &	703.18	703.18
2/9/2010	Sunstate Meter & Supply, Inc.	Cover only	106.55	809.73
3/12/2010	CJ's Power Systems	Minor pm per contract	114.40	924.13
6/29/2010	Utility Technicians, Inc.	Aerator Tank per proposal	9,985.00	10,909.13
6/29/2010	Utility Technicians, Inc.	Remove excess sand from A	1,200.00	12,109.13
6/29/2010	Utility Technicians, Inc.	Service call to lift station by p	342.10	12,451.23
6/29/2010	HD Supply Waterworks, Ltd.	3 PVC S80 Male Adpt, 3 Brz	84.16	12,535.39
6/29/2010	American Pipe & Tank Inc.	Remove trash, debris & jet cl	650.00	13,185,39
7/27/2010	CJ's Power Systems	Minor PM per contract	114.40	13,299.79
8/3/2010	Bronson Ace Hardware & P	,	7.90	13,307.69
8/27/2010	HD Supply Waterworks, Ltd.	Manhole Riser	43.87	13,351,56
9/28/2010	A. D. Rosier Plumbing & He	243260	4.15	13,355.71
10/18/2010	Werner & Wemer, Inc.	Besco on 6/29	107.22	13,462.93
11/4/2010	Besco Electric Supply	001-230-118 Phase Monitor	90.59	13,553.52
12/16/2010	Home Depot	Rake Handle, Paint, Shelf Br	9.79	13,563.31
12/30/2010	CJ's Power Systems	Minor PM per contract	124.90	13,688.21
12/31/2010	•	Reclass Purchase of Aerator	-11,527.10	2,161.11
Total MaintRep	pair	_	2,161.11	2,161.11
Total Water			2,161.11	2,161.11
TAL			2,161.11	2,161.11

Wtility Technicians, Inc.

Water and Sewer Specialty Contractor
Sine Liberton Utility Contracts #CUCOSEGS

Office (352) 669-5822 Fax (352) 669-6037

PROPOSAL

630 Goodbar Avenue Umatilla, Florida 32784

NAME / ADDRESS

Shangrita By The Lake C.O Werner & Worner, Inc. 1214 W. Il Route 72 Leaf River, IL 61047 DATE 5/31/2011

PROPOSAL

4487

JOS:

Water Line Valve

Net 30

Utility Technicians will furnish all material, equipment, and labor to install a new 4" ductile iron mechanical joint gate valve in the water line by the casal. Valve to have a 2" operating mut and east iron valve box with a "WATER" lid. Backfill excavation and rough grade.

Does not include the following:
Concrete housekeeping and around valve box.
Brass valve tag to identify size and type of valve.
Boil water notifications.
Water samples for basteriological test.
Notices for the lifting of the boil water notices.
Sed or landscaping.

TOTAL:

\$3,012.00

All material and workmanship is guaranteed for for one year or an stated. All work to be completed in a professional manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an additional charge over and above estimate. All agreements contingent upon strikes, accidents, delays beyond our control. Owner to carry fire and other accessary insurance. Our workers are fully quored by Worker's Compensation Insurance.

Termst Proposal valid for thirty (30) days from date of proposal.

Payment due as listed above.

SIGNATURE:	Todd Lealy	DATE: 5/31/2011	
ACCEPTANCE OF CONTI	RACT:The above prices, specific	ations and conditions are satisfactory and are hereby	secupted. You are sutherfixed to do the
BIGNATURE:		DATE:	-

Utility Technicians, Inc.

Water and Sewer Specialty Contractor
Smit Licensed Utility Contractor #CUCO52605

Office (352) 669-5822 Fax (352) 669-6037

07/04/2011 23:49

PROPOSAL

630 Goodbar Avenue Umatilla, Florida 32784

NAME / ADDRESS

Shangrila By The Lake C.O Werner & Werner, Inc. 1214 W. II Route 72 Leaf River, IL 61047

DATE 5/18/2011

SHANGRI-LA BY THE LK

PROPOSAL

4474

JOB:

Bridge Water Line

Net 30

Utility Technicians will furnish all material, equipment, and labor to install a new water line on the bridge per the following scope: Install fabricated steel piping supports to the bridge side, anchor to be stainless steel. Install new 6" ductile iron piping with elbows and sleeves to connect to the existing line. Install a new 6" gate valve on new line.

Coordinate with operator and staff for shut down and change over to new line. Boil water notices by others. Water samples by others.

TOTAL:

\$8,482,00

All material and workmanship is guaranteed for for one year or as stated. All work to be completed in a professional manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an additional charge over and above estimate. All egreements contingent upon strikes, accidents, dainys beyond our control. Owner to carry fire and other necessary insurance. Our workers are fully covered by Worker's Compensation Insurance. Terms: Proposal valid for thirty (30) days from date of proposal.

Payment due as listed above.

SIGNATURE: Jodd Lealy	DATE: 5/18/2011
ACCEPTANCE OF CONTRACT: The above prices, specifications and conditions work as specified above:	are satisfactory and are hereby accepted. You are authorized to do the
SIONATURE:	_DATE:

Shangri-La By The Lake Utilities, Inc.

Business Manager:
Jay E. Werner
1214 West Route 72
Leaf River, IL 61047
(815) 738-2508
telephone & fax
e-mail: jaylaura6@msn.com

Site Manager:
Andrew Werner
100 Shangri-La Blvd.
Leesburg, FL 34788
(800) 682-7744
telephone & fax

July 5, 2011

Two General Service Meters; One Customer:

Werner & Werner, Inc.

- Clubhouse
- Pool